

{Date}

{CustomerFullName}

{CustomerStreet},

{CustomerState}.

Dear {CustomerFirstName},

**{ProductName}**

**PROPOSER: {PatientName}**

As part of the assessment process, you are required to undergo medical examination. We are by a copy of this letter requesting our medical examiner (details below) to liaise with you and carry out the necessary medical examination at your convenience.

Please note that it is very important to have the foregoing to enable us assess the risk and confirm acceptance in writing. Our liability, pending acceptance, is limited to **N{CapAmount}** being our free cover limit. It is expected that this exercise would be completed within 45 days from the date on this letter; otherwise the proposal will be cancelled. At this stage, should either party exercise its right to terminate the contract, the Company would charge pro rata premium and administration fee for the term on risk.

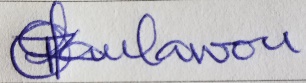
We therefore solicit your cooperation in ensuring that this exercise is completed in goodtime.

Thank you.

Yours faithfully

For: **AXA** **MANSARD INSURANCE PLC**

**(signature)**



**Authorized Signatory**

**Cc**: **{HospitalContactPersonName}**

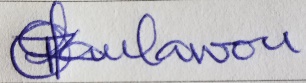
**{HospitalName}**

{HospitalStreet},

{HospitalCity},

{HospitalState}.

Telephone: **{HospitalPhone}**



Authorized Signatory