

FuneralBond direct claim form



Guide to completing this form

- This form is to be completed to make a FuneralBond claim.
- Please use BLACK/BLUE ink and complete the applicable sections in BLOCK LETTERS.

Section 1

Deceased's details

1.1 Deceased's details

Title

Given name(s)

Surname

Date of birth

Date of death

Funeral Bond No.

1.2 Deceased's residential address

PO Box / RMB / Locked
Bag is not acceptable.

Address

Suburb/City/Town

Postcode

State

Country

Section 2

Contact person submitting this form

2.1 Contact details

Title

Given name(s)

Surname

Mobile number

Phone number

Email address

Relationship to deceased

2.2 Contact's residential address

PO Box / RMB / Locked Bag is not acceptable.

Address

Suburb/City/Town

Postcode

State

Country

Section 3

Payment details

3.1 Nominated Australian financial institution information for this claim

Direct electronic funds transfer payment to the nominated account.

Note: Please complete Section 3.2 below if you would like to make a payment directly to the funeral director.

Bank and branch name

Account name


BSB number

Account number

3.2 Funeral Director's Australian financial institution information (Optional)

Pay the funeral director the amount of
\$, , .

with the balance paid to the nominated account provided in Section 3.1 above.


Please attach evidence of funeral services supplied (e.g. invoice or receipt).

Bank and branch name

Account name

BSB number

Account number

Section 4

Declaration and signature

I do solemnly and sincerely declare that the foregoing particulars are true and correct in every detail and I agree that if I have made or in further declaration in respect of the said claim make any false or fraudulent statements or suppress, conceal or falsely state any material fact whatsoever, payment of my claim may be refused.

4.1 Declaration and signature

Full name (please print)

Capacity/position

Signature

Date / /



Required documents

Certified copies of the following documents are required

Certified copy of Death Certificate (or for Cemetery and Crematorium, Authorisation for the Disposal of the Deceased's body)

OR

Certified copy of Medical Examiner's Certificate

Certified copies of the following identification documents are required

Certified copy of your current driver's licence

OR

Certified copy of your passport (current or expired passport within the last 2 years)

For other acceptable forms of identification, please refer to the '[Completing proof of identity](#)' document on our website.

If this form is signed under Power of Attorney the attorney certifies that he/she has not received notice of revocation of that power.

If your power of attorney has not previously been registered by us, we will require a certified copy of the power of attorney document as well as the appropriate proof of identification documents in accordance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (AML/CTF Law).



Outthinking today.

Form submission

Email

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Postal address

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Enquiries

Investor services

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Investment Bonds

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