

Administration Bond PROPOSAL



FOR OFFICE USE ONLY

Date of Acceptance FROM Time AM PM

Policy No.

Area/Branch

Area/Branch Number

Agency

Agency No. & Chk Ltrs

Note:

The insurer with which your contract will be concluded is Aviva Insurance Europe SE ("the Company"). The insurance will not be in place until the proposal has been accepted by the Company. The Company reserves the right to decline any proposal. A specimen of the policy/bond normally issued will be supplied on request.

Please provide the following information using CAPITAL LETTERS and ticking boxes where appropriate. Please give additional information, where required, by covering letter.

AMOUNT OF BOND REQUIRED

(double amount of Gross Estate including current market value of immovable property)

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1 Proposed ADMINISTRATOR/ADMINISTRATRIX

(a) Full Name Relationship to deceased or, where
 Address will annexed, capacity in which
 he/she is applying for Grant

Age (b) Is proposed Administrator/Administratrix well known to you? YES NO

Occupation (c) Can you, from your knowledge of his/her character and
 circumstances, recommend acceptance of the proposed
 Administrator/Administratrix?

2 Deceased

(a) Full Name Description (i.e. marital status etc.)
 Address Date and place of death

Age Indicate whether deceased died TESTATE or
 Occupation INTESTATE

If testate, please attach copy of the Will and give reason for present application

3 Beneficiaries

List all BENEFICIARIES Full Name	Address	Indicate if not sui juris	Date of birth if under 18	Relationship to deceased	Share
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

State fully how it is proposed to deal with the shares of any minor beneficiaries or beneficiaries who are not sui juris

(b) Have all beneficiaries been traced? YES NO
 If NO, state in detail the enquiries that have been made and if application will be made to the Court

(c) Are any life interests involved?
 If YES, state the steps that will be taken to safeguard the assets

4

The Estate

(a) Is leasehold and/or real property being sold? YES NO
If **NO**, how will each beneficiary get his/her share?

(b) Did the deceased carry on a business?
If **YES**, state how it is proposed to deal with this

(c) Is any litigation threatened, pending or proceeding in connection with the Estate?
If **YES**, give full details

(d) Will statutory advertisements for claims against the Estate be published?
If **NO**, state reason and that you are satisfied all debts have been traced

(e) Has any administration taken place already?
If **YES**, give details

(f) How long do you estimate it will take to complete the administration?

5

Has a proposal been submitted to any other surety or has private security been sought YES NO
If **YES**, give details

6

Please attach a copy of your current Professional Indemnity Insurance Certificate, Please tick if already provided.

7

IMPORTANT: WHERE BOND EXCEEDS €200,000 PLEASE SUPPLY A COPY OF THE AFFIDAVIT FOR REVENUE

Important

You must tell us any other facts which are likely to affect whether we agree to provide cover, or how we assess the risks proposed for insurance. If you are not sure whether you should tell us about something, please tell us anyway. This is for your own protection because, if you do not give us all the information we need, your policy may not provide you with the cover you need, or the policy could be declared invalid and void.

Under the third EU Non-life Directive we must give you the following information before you buy your policy.

The law that applies to the contract - Under the relevant European and Irish laws, we Aviva Insurance Europe SE and you, the proposer, are free to choose the law that will apply to the contract. We propose that Irish law will apply to the contract, We, Aviva Insurance Europe SE, will provide the insurance under this policy.

Complaints procedure - We aim to give excellent service to all our customers; however, we recognise that things may occasionally go wrong. We will do our best to deal with your complaint as effectively and quickly as possible. If you arranged your cover through an agent or adviser, please send your complaint to them. If your complaint is not sorted out to your satisfaction, please contact:

Customer Feedback Team, Aviva Insurance Europe SE, One Park Place, Hatch Street, Dublin 2

CallSave: 1850 36 37 38
E-mail: complaints@aviva.ie
Website: www.aviva.ie

You can also write to the Managing Director, Aviva Insurance Europe SE, One Park Place, Hatch Street, Dublin 2 or you can contact the following

• **The Irish Insurance Federation's Insurance Information Service, 39 Molesworth Street, Dublin 2**

Phone: 01 676 1914
Fax: 01 676 1943
E-mail: iis@iif.ie
Website: www.iif.ie

• **The Financial Services Ombudsman Bureau, 3rd Floor, Lincoln House, Lincoln Place, Dublin 2**

Phone: 01 662 0899
LoCall: 1890 88 20 90
Fax: 01 662 0890
E-mail: enquiries@financialombudsman.ie
Website: www.financialombudsman.ie

You will not lose your right to take legal action if you contact either of the above.

DATA PROTECTION - Aviva Insurance Europe SE ("we", "us" or "our"), as data controller, will keep the information you provide about yourself and about third parties confidential. We may use it to advise on, provide and administer insurance products and financial services provided by us or other Aviva companies and sometimes with our affiliates and/or commercial partners, in order to comply with legal obligations imposed on us. We may share the information both inside and outside of the European Economic Area, in confidence, for these purposes with agents or service providers we have appointed, private investigators, regulatory organisations, other insurance and financial services companies (directly or via a central register), other Aviva group companies, those to whom we outsource certain business operations and as required by law. We will process this information and store it on our computer and manual record systems.

To assist in preventing, detecting and/or protecting our customers and ourselves from theft and fraud, we may use your information to make searches of our or other Aviva companies' records. If you give us false information or fail to disclose information and we suspect fraud, we will record this. We also participate in industry databases such as those operated by the Irish Insurance Federation for the purpose of sharing of information among insurance companies as a check against non-disclosure.

From time to time, we may record your telephone calls for verification and training purposes.

If you would like a copy of the details we hold about you, please write to the Regulation and Compliance Manager, Aviva Insurance Europe SE, One Park Place, Hatch Street, Dublin 2. Please enclose the correct fee (€6.35). You also have the right to correct any errors in the information held about you, block certain uses or object to the processing of your personal data.

Declaration - We confirm that, having made due and diligent enquiries, that all the answers above are correct and complete and that we have not withheld, mis-stated or misrepresented any information material to the issuing of a bond.

Signature of Solicitor

Date:

Address:

FOR COMPLETION BY THE PROPOSED ADMINISTRATOR/RIX

I/We confirm my/our authorisation
to (Solicitors)

to propose on my/our behalf to the Aviva Insurance Europe SE (the Company) for an Administration Bond in the matter of the Estate

of

and further, undertake and agree that the conduct and control of the administration of the said Estate shall not be taken out of the hands of the
said solicitors without the written consent of the Company.

Signature of proposed administrator/rix

Date:

Witness:

Address:

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Occupation:

Aviva is the world's sixth largest* insurance group, serving 53 million customers across Europe, North America and Asia Pacific. In Ireland over 1.2 million customers trust us to look after their financial and personal assets.

We are very proud of our established and trusted heritage in Ireland spanning over 100 years. We are committed to understanding our customers, recognising their individual needs and providing world-class service through our nationwide network of branches and independent brokers together with our customer contact centre and website www.aviva.ie

From our breadth of products and range of innovative benefits to our dedication to providing security, quality and value, we are continuously developing our products and services to meet our customers' requirements.

**based on gross worldwide premiums at 31 December 2010*



For our joint protection, we may record and monitor phone calls.

Aviva Insurance Europe SE

Phone 01 898 8000 Website: www.aviva.ie

Registered in Ireland number 3319 Registered Office: One Park Place, Hatch Street, Dublin 2.

Aviva Insurance Europe SE is regulated by the Central Bank of Ireland