

Insurance Corporation of the Channel Islands
P.O.Box 160
Dixcart House
Sir William Place
St Peter Port
Guernsey
GY1 4EY

Dear Sirs

Policy Number:

Name:

Please arrange for the above policy to be reinstated.

I confirm that there have been no incidents between (cancellation date)
.....and(today's date) that would have given rise to a claim being
submitted had cover been in force.

Yours faithfully