

LETTER OF AUTHORITY.

Date: _____

FAO : Please tick below the Companies you may have business with:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Eagle Star / Zurich | <input type="checkbox"/> Friends First | <input type="checkbox"/> Hibernian / Aviva | <input type="checkbox"/> New Ireland |
| <input type="checkbox"/> BCP Asset Management | <input type="checkbox"/> Irish Life | <input type="checkbox"/> Caledonian Life | <input type="checkbox"/> Canada Life |
| <input type="checkbox"/> Standard Life | <input type="checkbox"/> Ark Life | <input type="checkbox"/> BoI Life | <input type="checkbox"/> Acorn Life |
| <input type="checkbox"/> Other _____ | | | |

Re: _____

To Whom It May Concern

I / We hereby consent to you providing all details of any policy / policies held with you by me / us to Mr Michael Hannon of Michael Hannon Financial Services, Gortatleva, Claregalway, Co. Galway.

Yours faithfully

Policy / reference number(s):

Details

Policy Number _____

Date of Birth _____