



London Market

Broker at **LLOYD'S**

Individual
Medical
Practitioner
NCD





**Individual Medical Practitioner Declaration Of No Known Claims Or Circumstances
That Could Give Rise To A Claim**

I declare that after investigation of all colleagues and partners I am unaware of any claims and/or circumstances that could give rise to a claim for the last 10 years, whether insured or not, other than those either attached to the proposal form, dated _____, and/or other information disclosed to insurers, and/or attached to this declaration.

Further I declare that the information given in the proposal form dated _____ remains complete, correct, accurate and unaltered.

Name _____

Signed _____

Dated _____

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