

POLICY REVIEW FORM

Original
Client Address:

Insurance Company Address

Re: Policy No/s:

Date :

Dear Sirs,

Please be advised that I/we have appointed Providence Finance Services t/a The Money Doctor as my/our insurance intermediary.

Please update your records accordingly and also **provide The Money Doctor with whatever information is required** to review my policy/policies.

Yours faithfully,

Client:

Client: