Notice of Interest or Cessation of Interest in Fire Policy



Mortgage Application No:	
When signed by the Borrower, this form authorises the Bank to ask an Insurance Company to note the Bank's interest or cessation of interest in a Home Insurance (Fire) policy.	Bank of Ireland Mortgages PO Box 13298 Dublin 18
This form should be prepared and forwarded in duplicate so that one copy can be completed and returned by the Insurance Company.	Date: / / / / / / / / / / / / / / / / / / /
TO: Insurance Company Name and Address	
RE: Policy Number:	
Covering (Property address):	
In the Name(s) of:	
The above property has been charged to this Bank. Please note the Policy Holder I	nstructions below.
OR* Please note that the above property is no longer charged to this Bank.	
Yours sincerely,	
Manager, Bank of Ireland Mortgages	* Delete as appropriate
Policy Holder Instructions The Insurance Company is hereby requested to (A) note that the Bank has an interis authorised to issue payment of claims arising under the policy in the joint names Signature(s) of Policy Holder(s): Signature 1 Signature 2 Please note that if the mortgage is in joint names, then the Insurance Policy This form must be signed by ALL Borrowers.	s of the undersigned and the Bank.
Insurance Company Acknowledgement	
TO: The Manager Bank of Ireland Mortgages, PO Box 13298, Dublin 18 We have noted the above information. For the Company Authorised Official	Date: / / / Official Brand
Please return to: Information Centre, Bank of Ireland Mortgages, PO Box 13298, Dublin 18	