

APPLICATION AND INDEMNITY FORM	
То:	Bord Gáis Energy Limited, One Warrington Place, Dublin 2
Date of Application:	
Name of Applicant:	
Address of Applicant:	
Name of Deceased:	
Address of Deceased:	
Date Deceased Died:	
Bord Gáis Energy Account Number[s]	
EXECUTOR/INTESTATE RELATIONSHIP	
Please select one:	
By his/her last will the Deceased appoint not proposed to obtain a grant of probability.	nted the Applicant as one of his/her executors, but it is ate in the estate of the Deceased.
The Deceased died intestate and the Applicant is a person entitled to extract a grant of administration intestate in the estate of the Deceased pursuant to the Succession Act 1965. It is not proposed to obtain a grant of administration intestate in the estate of the Deceased.	
The Applicant is the	(state relationship) of the Deceased.
DECLARATION	
At the Deceased's date of death all amounts standing to the credit of the Account[s] are due and payable to the estate of the Deceased.	
The Applicant hereby requests and applies to Bord Gáis Energy to release the funds held in the Account[s] to him/her without the Applicant having first obtained and delivered to Bord Gáis Energy a copy of a grant of probate/grant of administration intestate in the estate of the Deceased.  Bord Gáis Energy has agreed to accept such request and application and effect such release on the condition that the Applicant should enter into the undertaking and indemnity set out below.	
NOW THIS DEED WITNESSES as follows:	
In consideration of Bord Gáis Energy's acceptance of the application and request for the release to the Applicant of all funds held in the deceased's Account[s], the Applicant undertakes that he/she will, at all times, deal with the funds paid on the foot of this application in accordance with law and distribute to those persons entitled and will indemnify and keep indemnified Bord Gáis Energy against all actions, proceedings, losses, claims, demands, expenses and costs of any nature whatever that may arise in respect of, or arising out of, or in connection with, the release of funds held in the deceased's Account[s] to the Applicant.	
SIGNED by	[Signature of Applicant]
In the presence of	[Signature of Witness]