

SIPP

NOMINATION OF DEATH BENEFICIARIES

Please complete this form if you wish to request that any of your pension fund remaining on your death is payable to one or more persons.

Personal Details

Title:	<input type="text"/>	(Mr/Mrs/Miss/Ms/Other)
Forename/s:	<input type="text"/>	
Middle Name(s):	<input type="text"/>	
Surname:	<input type="text"/>	
Member Number:	<input type="text"/>	
Permanent Residential Address:	Town:	<input type="text"/>
	County:	<input type="text"/>
	Postcode/Country:	<input type="text"/>
National Insurance Number:	<input type="text"/>	
Contact Tel Number:	<input type="text"/>	
Email Address:	<input type="text"/>	

In the table on page 2 please state each person's name and address in the first column and the desired percentage or proportion of your available fund in the fourth column. This nomination can be changed by submitting a replacement nomination form to us at any time.

If you wish benefits to be paid to children under age 18, it may be advisable for benefits to be paid from the Scheme into a trust for their benefit. You should discuss the establishment of a trust with your solicitor and enter the details of the trust in the table on page 2.

The security and safety of your data is very important to London & Colonial. A copy of the London & Colonial Privacy Notice can be found on the website: www.londoncolonial.com/privacy-notice

In the event of my death I would like any sums payable under the Scheme to be paid to the following person or persons in the manner shown in the table on page 2.

I understand that in exercising your discretion in the disposal of the benefits you will not be bound by my nominations but you will bear them in mind.

	Full name and address of beneficiary <i>(if under age 18, please input trust details)</i>	Date of birth	Contact number and/or email	%
1				
2				
3				
4				
5				
6				
7				
			Total: <i>(Must add up to 100%)</i> :	

Signature

Date:

We recommend that you review your nomination(s) regularly, particularly if either your circumstances, or those of your beneficiaries, change. Upon notification of your death, we will refer to the most recent signed nomination received by us.

Please return the completed form to:

London & Colonial

Rockwood House, 9-17 Perrymount Road, Haywards Heath, West Sussex, RH16 3TW, United Kingdom



PART OF



For more information please contact:
 t: +44 (0)203 479 5505
 w: www.londoncolonial.com
 e: servicingteam@londoncolonial.com

