

Notes to be read before completing the Nomination Form

1. *If you die before you retire, a death benefit is payable. This consists of the money in your pension pot at the time of death and four times your annual salary if you are still an active member of the Scheme.*
2. *The Trustees have discretion in deciding to whom any death benefit is paid. Use this form to record your wishes which will be taken into account by the Trustees.*
3. *You may nominate one or more persons to receive the death benefit. These nominees do not have to be relatives or dependants. You may also nominate a registered charity.*

If you want to nominate more than one beneficiary for your death benefit, then please enter the proportion on the form you would like each nominee to receive.

4. *You may if you prefer request the Trustees to arrange for part, or all, of the death benefit to be paid to your estate. If so, please write "to my estate" against "Full Name" below, and the proportion if it is not to be the full amount. But take note that if your estate is subject to inheritance tax then your death benefit will also be taxed.*
5. *Should you change your mind about whom you wish to be nominated as a beneficiary, you should complete and return a further death benefit nomination form as soon as possible.*
6. *This death benefit nomination form cancels and replaces all previous nominations you may have made. If you wish to change your nominations a new form will need to be completed and submitted. This nomination may be taken into account by the Trustees for all benefits of the scheme unless you specifically request otherwise.*
7. *You should consider changing your death benefit nomination if your personal circumstances change.*
8. *If you get divorced, the court may order that all or part of any death benefit is paid to your former spouse.*
9. *Please complete this form in **black ink** and in **CAPITAL LETTERS**.*

Your Information

Full Name

Date of Birth

NI Number

Home address

Postcode

Nomination(s)

Whilst I fully understand that the destination of the lump sum benefits payable on my death is at the complete discretion of the Trustees, I should like the Trustees to consider the person(s) named below as possible recipient(s):

Full Name	Relationship	Share of benefit %	Address

If any person named above dies at the same time as me I should like the Trustees to consider the person(s) named below as possible recipients of their share.

I understand that this is an 'Expression of Wish' which is not binding on the Trustees and may be revised by me at any time. I would like the individual(s) or organisation(s) named on this form to receive any benefits payable on my death. I confirm that any previous nominations I have made are cancelled in favour of this one, and I understand that any amendments required to this nomination will require completion of a new form.

Declaration

Full Name	Relationship	Address

Signature

Date

Please return completed form to:

**Broadstone
PO Box 18383
Prospect House
Fishing Line Road
Redditch
B97 9YX**

Or Via Email to: Aircelle@broadstone.co.uk