

Managed Pension Nomination of beneficiaries form

Please complete this form using BLOCK CAPITALS.

This form enables you to nominate whom you wish to benefit from your managed pension on your death. You may change nominations at any time either in writing or by requesting another nomination form from Utmost.

nomination form from Utmost.
Policy number:
Section A - Spouse's/Dependant's benefit
See Notes overleaf on qualification for Section A
On your death, the individual named below, if any, will be given the following options:
 to take the residual value of the policy in cash after deduction of tax; to take over the managed pension policy; to purchase a pension annuity.
Please note that the person named must be an individual as defined in the Notes below.
You should write 'none' if you do not wish any individual to be given these options but wish the declaration in Section B to be adopted in all circumstances.
Name:
Date of birth: / /
Relationship:
Address:

Notes

The individual named in Section A must be:

- (a) a person who is the member's spouse or civil partner;
- (b) a person who was the member's spouse or civil partner when the member first became entitled to a pension under the scheme;
- (c) the member's child (who is under the age of 23); or
- (d) a person who, in the opinion of the scheme administrator, at the date of the member's death:
 - (i) was financially dependent on the member,
 - (ii) had a financial relationship with the member that was one of mutual dependence, or
 - (iii) was dependent on the member because of physical or mental impairment.

Please note that a pension providing income on the life of a child must cease at his or her 18th birthday or, if later, the date he or she leaves full-time education or vocational training. Utmost does not currently offer such pension products.

Section B - Other beneficiaries

If you die and either:

- (a) the beneficiary named in Section A has either predeceased you or does not meet the conditions in Section A; or
- (b) you have entered 'none' in Section A,

then the residual value of the policy will become payable in cash after deduction of tax.

The scheme administrators will have discretion as to the beneficiary or beneficiaries of the cash benefit. You may, however, indicate below to whom you wish any cash benefit to be paid.

Please note that the benefit proportion must total 100%.

Beneficiary 1			
Name:	 	 	
Address:	 	 	
Benefit proportion:			

Bene	eficiary 2 if applica	ble				
Name	e: .					
Addr	ess:					
Bene	fit proportion:	%				
Bene	eficiary 3 if applica	ble				
Name	e:					
Addr	ess:					
Bene	fit proportion:	%				
Note Pleas		seep Utmost informed of any changes to your nominated beneficiary (ies).				
Secti	ion C - Declaration					
		dividual (if any) nominated in Section A, if he/she is then living, is to be the				
2. li	in Section B to benefit. 3. I understand that the nomination(s) made under Section B are not binding on the scheme administrators. 4. These nominations supersede any prior nominations I may have made.					
3. I						
4. T						
5. I	understand that I c	an change the nominations in Sections A and B at any time.				
S	Signed:					
P	Print name:					
C	Date:	//				

REST ASSURED

Calls may be recorded for training or monitoring purposes.

Contact us at: Walton Street, Aylesbury, Bucks, HP21 7QW Tel: 0330 159 1530 Fax: 0845 835 5765: www.utmost.co.uk
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