

**Personal Pension Plan / Free Standing AVC/
Dependants Drawdown/Utmost Drawdown Plan Nomination of
beneficiaries of death benefits**

1. Personal details

Surname:

Forenames:

Plan number:

In the event of my death, it is my express wish that any lump sum benefits available under the plan should be paid in the following proportions to the individuals (not Trusts) named below:

2. Nomination

Scheme rules specify that nominations must be made in writing.

Scheme rules do not allow payments to be made to a trust although the trustees of a trust can be nominated.

Complete the form with details of the individuals you would like to receive the death benefits, their relationship to you and the percentage or amount you would like them to receive. You can nominate as many individuals as you like but the split must be clear and unambiguous and total 100%.

**1st Nominee
% or Amount:**

Name:

Address:

Post code:

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Date of birth:

D	D	M	M	Y	Y	Y	Y
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Relationship:

Continued overleaf

2nd Nominee
% or Amount: _____

Name: _____

Address: _____

Post code:

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Date of birth:

D	D	M	M	Y	Y	Y	Y
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If you wish to nominate any more individuals please do so on a blank sheet.

Relationship: _____

3. Declaration

Any nomination made by you is only an indication of your wishes and is not binding on Utmost as scheme administrator. If we are unable to note the nomination for any reason we will let you know, otherwise we will not comment on the nomination in any way including but not limited to its completeness or fitness for purpose.

I understand that the expression of this wish is in no way binding on the administrator.

Signature: _____

It is recommended that you make a copy for your records.

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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Both have their registered office at: Walton Street, Aylesbury, Bucks, HP21 7QW.
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