

Customer ID number (staff use only)



Bereavement Instruction Form

This form must be completed when you are notifying us of the death of a customer unless there are only joint savings accounts held.

IMPORTANT INFORMATION DETAILING THE SECTIONS YOU WILL NEED TO COMPLETE

All fields within the relevant sections must be completed

Section 1: Details of the deceased. This must be completed and is mandatory for all

Section 2: Declaration and signature for balances under £5,000

Section 3: Declaration and signature for closures between £5,000 and £15,000

Section 4: Signature for savings account closures over £15,000

Section 5: This must be completed and is mandatory for all

Section 6: Additional Permitted Subscription (ISA Declaration)

Section 7: Mortgage accounts only

SECTION 1 . DETAILS OF THE DECEASED

THIS SECTION MUST BE COMPLETED

Title *Mr/Mrs/Ms/Miss/Other* Surname

Forenames *(in full)*

Date of birth Date of death

Permanent Residential Address at the date of death

Postcode

PERSONAL REPRESENTATIVES DETAILS

PERSONAL REPRESENTATIVES DETAILS

If you are an existing customer/Power of Attorney at Saffron Building Society, you only need to complete 'Title', 'Surname', 'Forenames' and 'Existing account number'

Existing account number <input type="text"/>	Existing account number <input type="text"/>
Title <i>Mr/Mrs/Ms/Miss/Other</i> <input type="text"/> Surname <input type="text"/>	Title <i>Mr/Mrs/Ms/Miss/Other</i> <input type="text"/> Surname <input type="text"/>
Forenames <i>(in full)</i> <input type="text"/>	Forenames <i>(in full)</i> <input type="text"/>
Date of Birth <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date of Birth <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Permanent Residential Address <input type="text"/>	Permanent Residential Address <input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/> Postcode <input type="text"/>	<input type="text"/> Postcode <input type="text"/>
Date moved into current address <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date moved into current address <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Telephone Number (Home) <input type="text"/>	Telephone Number (Home) <input type="text"/>
Telephone Number (Work) <input type="text"/>	Telephone Number (Work) <input type="text"/>
Telephone Number (Mobile) <input type="text"/>	Telephone Number (Mobile) <input type="text"/>
Email <input type="text"/>	Email <input type="text"/>
Country of Birth <input type="text"/>	Country of Birth <input type="text"/>
Place of Birth <input type="text"/>	Place of Birth <input type="text"/>
Preferred contact method Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile <input type="checkbox"/> Email <input type="checkbox"/>	Preferred contact method Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile <input type="checkbox"/> Email <input type="checkbox"/>

HOW WE USE YOUR DATA

When you open an account, or when you are added to an account, we are required by law to confirm your identity. We will ask you to provide proof of your identity and current residential address.

We will also seek to validate your identity and residence via an online search facility using information held by Credit Reference Agencies including the Electoral Register and any database (public or otherwise) to which the Credit Reference Agencies have access. They may also use your details in the future to assist other companies for verification purposes. A record of this search will be retained.

In order to prevent or detect fraud, the personal information we have collected from you will be shared with fraud prevention agencies who will use it to prevent fraud and money-laundering and to verify your identity. If fraud is detected, you could be refused certain services,

finance or employment. Further details of how your information will be used by us and these fraud prevention agencies, and your data protection rights, can be found in our Customer Privacy Notice. We confirm that all elements of this Customer Privacy Notice relating to savings accounts are applicable to you as a Personal Representative.

We will share your data with regulatory bodies, such as HMRC, where we are required to do so by any regulations or legislation with which we are obliged to comply.

Any information about you and your account may be shared within the Society for business analysis and market research purposes. We will update all of your records when you inform us of a change to your personal details, to keep your records up to date.

SECTION 2. DECLARATION AND SIGNATURE FOR BALANCES UNDER £5,000

I/We, the named Personal Representative(s), do solemnly and sincerely declare that:

- No Grant of Probate or Letters of Administration have been granted to the late customer's estate
- I am/We are legally entitled to administer the late customer's estate and, if there is anyone else entitled to administer the estate, I/we have their consent to manage the account(s)
- To indemnify Saffron Building Society against any claims, proceedings, damages or expenses by reason of it acting in accordance with my instructions

Please note we are unable to transfer to any other bank or building society.

Who should the cheque be made payable to?

Once completed the information above please sign in section 5

SECTION 3. DECLARATION AND SIGNATURE FOR CLOSURES BETWEEN £5,000 AND £15,000

I/We, the named Personal Representative(s), do solemnly and sincerely declare that:

- No Grant of Probate/Letters of Administration has/or will be granted to the late customer's estate
- I am/We are legally entitled to administer the late customer's estate. Where there are other person(s) entitled to administer the estate, I/we confirm that I/we have their consent to make this Declaration and close the account(s)
- To indemnify Saffron Building Society against any claims, proceedings, damages or expenses by reason of it acting in accordance with my instructions
- I/We make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the Statutory Declarations Act 1835

Please note we are unable to transfer to any other bank or building society.

Who should the cheque be made payable to?

Please make sure a Commissioner for Oaths/Solicitor completes the declaration on page 3

Declared at

Property number and/or property name

Postcode

Before me (Name of commissioner for Oaths/Solicitors)

Signature

Date

Official Stamp

Once completed the information above please sign in section 5

SECTION 4. FOR SAVINGS ACCOUNT CLOSURES OVER £15,000

In order for Saffron Building Society to close any of the accounts where Grant of Probate or Letters of Administration have been granted we must see an original copy of the documents together with this completed form.

Who should the cheque be made payable to?

Once completed the information above please sign in section 5

SECTION 5. MANDATORY FOR ALL - SIGNATURES

Signature of Personal Representative

Name

Date

Signature of Personal Representative

Name

Date

SECTION 6. ADDITIONAL PERMITTED SUBSCRIPTION (APS) ISA DECLARATION

Please tick this box if you would like to apply for Additional Permitted Subscriptions with Saffron Building Society (transfer of allowance from any other provider is not permitted).

SECTION 7. MORTGAGE ACCOUNTS ONLY

Mortgage Account Number

It is important that you read and understand how we use your data

By signing this form you agree that we can use your information in this way:

- I am/we are legally entitled to administer the late customer's estate and if there is anyone else entitled to administer the estate, I/we have their consent to deal with this mortgage.

- The mortgage and property was held in:

- Sole name of the late customer Please detail how the mortgage will be repaid
- Joint names - where joint was the property held as
 - Joint tenants
 - Tenants in common

- I/we enclose a certified copy of the Death Certificate

Yes No

If no, we will not update our records until received

- I/we enclose a copy of Grant of Probate
Yes No To follow

Letters of Administration

Yes No To follow

Signature of Personal Representative

Name

Date

Signature of Personal Representative

Name

Date

We will check our records and inform you of any other documents or information we will require from you.