

# Nomination form

This form can be used for some or all of your accounts held under our Group Personal Pension, Stakeholder Pension Schemes or Transplan schemes (post 1 August 2011).



Reference:MPEN19/J NG08078 07/2018

## Important notes

This nomination form should not be completed for accounts you wish to place under an individual trust. If your policy is not set up under trust, the scheme administrator will decide at its discretion, and in accordance with the scheme rules how the lump sum benefits under the policy should be distributed amongst the range of potential beneficiaries specified in the rules governing the policy. To help us make this decision, please fill in the form below. Before completing this form, you should read the notes below.

- This nomination can be revoked or amended in writing at any time. If your circumstances change please complete a new nomination form.
- It is important to note that this nomination applies only to lump sum death benefits. For further details see your scheme documents.
- This nomination will not apply to any account which you have placed under individual trust or assigned.
- Lump sum death benefits will be distributed at Aviva's discretion between any one or more of the following individuals or bodies:
  - Any person, charity, association, club, society or other body whose names you have notified to Aviva in writing during your lifetime;
  - Your surviving husband, wife or civil partner;
  - Your dependants;
  - Your parents or grandparents or any children or remoter issue of any of them;
  - If you are married or in a civil partnership at the time of your death, the parents or grandparents of your husband, wife or civil partner or any children or remoter issue of any of the those parents or grandparents;
  - Any person, charity, association, club, society or other body entitled under your Will to any interest in your estate;
  - Your legal personal representatives.

For this purpose, a relationship acquired by legal adoption is as valid as a blood relationship. Any nomination you make will not be binding on Aviva.

Please complete this form using BLOCK CAPITALS throughout.

- All sections of this form must be fully completed and returned to: **Aviva, PO Box 1550, Salisbury, SP1 2TW.**
- We, Aviva Life & Pensions UK Limited ('Aviva'), cannot make any payments until we have full details of all the possible beneficiaries.
- Under current law, the benefits will not normally form part of your estate for inheritance tax purposes.
- Please give details of the people you would like to nominate to receive any lump sum payable under the scheme if you die before you take your pension benefits.
- Future changes should be notified to the scheme administrator on a separate form.

## A Your details

Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other <input type="text"/>
Surname	<input type="text"/>				
Forename(s)	<input type="text"/>				
Permanent residential address	<input type="text"/>				
	Town/City <input type="text"/>		County <input type="text"/>		
	Postcode <input type="text"/>				
Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nationality	<input type="text"/>				
National Insurance number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Policy number (if known)	<input type="text"/>				
Scheme name	<input type="text"/>				

## B Nominee information

### To the scheme administrator

I understand that the scheme administrator will pay the lump sum death benefits under the scheme at their discretion. I would, however, like the scheme administrator to consider paying benefits to the people named below.

You can select up to five nominees using this form. If you wish to select more than five, please continue on a separate sheet. You should keep a copy of this form for your own records.

Full name	<input type="text"/>				
Relationship (if any)	<input type="text"/>				
Address	<input type="text"/>				
	Town/City <input type="text"/>		County <input type="text"/>		
	Postcode <input type="text"/>				
Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Percentage of benefit	<input type="text"/>	%			
Full name	<input type="text"/>				
Relationship (if any)	<input type="text"/>				
Address	<input type="text"/>				
	Town/City <input type="text"/>		County <input type="text"/>		
	Postcode <input type="text"/>				
Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Percentage of benefit	<input type="text"/>	%			

## B Nominee information continued

Full name	<input type="text"/>		
Relationship (if any)	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
Town/City	<input type="text"/>	County	<input type="text"/>
Postcode	<input type="text"/>		
Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>
Percentage of benefit	<input type="text"/>	%	

Full name	<input type="text"/>		
Relationship (if any)	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
Town/City	<input type="text"/>	County	<input type="text"/>
Postcode	<input type="text"/>		
Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>
Percentage of benefit	<input type="text"/>	%	

Full name	<input type="text"/>		
Relationship (if any)	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
Town/City	<input type="text"/>	County	<input type="text"/>
Postcode	<input type="text"/>		
Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>
Percentage of benefit	<input type="text"/>	%	

### Financial Crime

To verify your identity and prevent financial crime, your information may be used by any company within the Aviva group and may be shared with third parties who provide services to us, as well as other organisations where required to by law and regulatory requirements.

A record may be kept of any searches carried out and any suspicions of financial crime and related details may be retained and used to assist other companies for verification and identification purposes. The search is not a credit check and your credit rating should not be affected.

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## C Declaration

I understand that this nomination will not bind the scheme administrator but will assist them in paying the benefits as I would wish.

This notice supersedes any previous notice that I may have completed.

Note: If you are under the age of 18, this notice must be signed by your parent or guardian.

Signature

Print name

Date

#### Aviva Life & Pensions UK Limited.

Registered in England No. 3253947. Registered office: Aviva, Wellington Row, York, YO90 1WR.  
Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Firm Reference Number 185896.

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