

NHS Pensions - Lump sum on death benefit (DB1)

Instructions to pay your legal personal representative Cancellation of previous nomination / instruction

This form is for use by Scheme members who left before 1 April 2008 with deferred benefits.

This form enables you to:

- Instruct us to pay your lump sum on death benefit to your legal personal representative instead of your spouse or civil partner.
- Cancel a previous nomination for a person or organisation to receive your lump sum on death benefit.

Note: If you cancel a previous nomination to pay a named person or organisation your lump sum on death benefit will then be payable to your estate. You can only make a new nomination using form DB2 if you are a contributing Scheme member.

About yourself

Please type in the fields below then print off and sign, or print and complete in CAPITAL LETTERS using BLACK INK

Title (Mr, Mrs, Miss, Dr)

Surname

Other names

SD number

<input type="text"/>	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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National Insurance number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Date of birth

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Address

Post code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Contact telephone number

Email address

Gender

Male

Female

About your instructions (tick only one box below - A or B)

A. In the event of my death, I want my legal personal representative to receive any lump sum on death benefit payable instead of my spouse or civil partner.

Tick this box if you **do not** want your spouse or civil partner to receive the lump sum on death benefit.

Details of the spouse or civil partner you **do not** want to pay

Title (Mr, Mrs, Miss, Dr)

Full name

Date of birth

		/			/						
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Address

Post code

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B. I want to cancel a previous nomination or cancel a request not to pay my spouse or civil partner.

Tick this box if you **want to** cancel a previous nomination or cancel a request **not to** pay your spouse or civil partner. When you die, any lump sum on death benefit will go **automatically** to your legal personal representative if you are single, or to your spouse or civil partner if you are married or have formed a civil partnership.

About your signature and witness

Ask someone, other than any person named on this form, to witness your instructions and your signature below. Then ask them to complete their own details and sign and date the form.

Please sign this form in the presence of your witness.

Your signature

Date

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A witness must be an authorised Bank Official, Civil Servant, Doctor, Magistrate, Minister of Religion, Solicitor or other registered UK voter.

Witness details

Full name

Occupation

Home address

Post code

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Witness signature

Date

		/			/						
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Now send this form to the address below. We will send a copy of the form back to you.

NHS Pensions, PO Box 2269, Bolton, BL6 9JS