

## Nomination of beneficiary for the payment of death grant

Please read the following notes before completing the form.

This form enables a member of the Local Government Pension Scheme (LGPS) to nominate a beneficiary or beneficiaries of any death grant payable in the event of their death. It must be witnessed at the time of signing by someone who is not a beneficiary.

Please note, a death grant isn't payable if you're aged 75 or over, if you have been receiving your pension for five years or more (if you left the LGPS between 1 April 1998 and 31 March 2008), or if you have been receiving your pension for ten years or more (if you left the scheme after 31 March 2008).

A death grant is also unlikely to be payable if you have been receiving your pension and left the scheme before 1 April 1998.

This form has space for you to nominate up to four beneficiaries. However, should you wish to nominate more beneficiaries please attach another form. Please ensure that any additional forms are also signed and witnessed, and that your total nominations equal 100%.

The nomination made on this form will be treated as not being in force at the time of the member's death if a subsequent nomination form has been received.

If any part of the death grant has not been paid within two years of the date of death it will be paid to the member's personal representatives (which may incur tax charges).

The nomination made on this form may be cancelled or amended by the completion of another nomination form.

Whether a nomination is made or not, the Pension Fund retains absolute discretion in respect of to whom the death grant is paid but takes due regard of any wish expressed by a member.

You can view and amend your nominated beneficiaries via PensionPoint, your secure online account. To register or log in to PensionPoint, simply visit: members.lppapensions.co.uk

For more information, questions or queries, visit our Help Hub: lppapensions.co.uk/help-hub

We will not normally send an acknowledgement of this form, but if you wish to receive one please state your email address in the Your details and declaration box on page two.

Titles:	First name(s):										Address:		
Surname:													
Date of birth:													
NI number:											Postcode:		
Name of employer:													
Email:													
2 Spouse / partner details (This will only be used in the event of bereavement)													
Forenames:								Surname:					
Email:													
Phone number:													
I have read and understood the notes above and hereby nominate the beneficiary or beneficiaries below to receive payment of any death grant payable in the event of my death. I have signed below in the presence of the witness detailed below.													
Signed:	igned:							Date:					
3 Witness details and declaration													
I declare that this form has been signed in my presence by the person detailed above.													
Signed:								Date:					
Full name:													
Address:													
									Postcode:				

1 Your details and declaration

Beneficiary	
Full name:	
Address:	
Date of birth:	Relationship to you (if any):
Percentage share:	
Beneficiary	
Full name:	
Address:	
Date of birth:	Relationship to you (if any):
Percentage share:	
Beneficiary	-
Full name:	
Address:	
Date of birth:	Relationship to you (if any):
Percentage share:	
Beneficiary	
Full name:	
Address:	
Date of birth:	Relationship to you (if any):
Percentage share:	
Please post your completed form to:	•
LPPA PO Box 1383	

LPPA PO Box 1383 Preston PR2 0WR