

Prudential ISA

Bereavement Claim Form

V2-08-21



How to fill in this form

You can use this form to sell the deceased's investment held with Link Financial Investments.

The claim form should be completed by all of the Executors/Administrators named on the Grant of Representation or, if applicable, the Small Estates Form.

WHAT YOU NEED TO DO

- Complete section 1 and 2. Section 2 must be completed and signed by all Executors/Administrators.
- Complete and sign section 3 to let us know how you would like the cash from the investment to be released. Verification of bank details is required for electronic bank transfers.
- Provide the documentation referred to in the Executor/Administrator guide (e.g. Grant of Probate).

Please send the completed documentation to:

Link Financial Investments
PO Box 384
Darlington
DL1 9RZ

If you have any questions about how to fill in the form, please call **0344 335 8936**.

VERIFICATION

IMPORTANT: INFORMATION TO BE PROVIDED TO ALL EXECUTORS/SOLICITORS DEALING WITH THE ESTATE

Please note that in accordance with our obligations under UK legislation, we are required to seek evidence of the Executor/Administrator's(s) identity and address. To do so, we will undertake a search with Experian for the purpose of verifying the identity and address of an Executor or Administrator. Experian will check the details we hold about them and which you have supplied against any particulars on the database (public or otherwise) to which Experian may have access. Experian may also use their details in the future to assist other companies for verification purposes; a record of the search will be retained. We also reserve the right to request additional evidence. If this is necessary, we will write to you explaining our requirements and the documents that should be provided.

Your attention is drawn to the above disclosure, which explains we may undertake a search with Experian to verify the identity of an Executor. This applies to all Executors and this notice is deemed to be service of our intent in this regard.

If evidence of identity and address is required, please refer to **A Guide to the Verification of Identity and Address** for acceptable documentation. Should you wish to provide certified copies, our standards of certification are also explained here.

1. Details of the Deceased

To be used for all individual investment applications.

NAME OF DECEASED

| | | | | | | | | | | | |
|----------------------------|--|----------|----------------------|---|---|---|---|---|---|---|---|
| Title (Mr/Mrs/Miss/Other): | <input type="text"/> | Surname: | <input type="text"/> | | | | | | | | |
| Middle name(s): | <input type="text"/> | | | | | | | | | | |
| Forename(s): | <input type="text"/> | | | | | | | | | | |
| Date of death: | <table border="1" style="border-collapse: collapse; text-align: center;"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> | | | D | D | M | M | Y | Y | Y | Y |
| D | D | M | M | Y | Y | Y | Y | | | | |

ADDRESS

| | |
|-----------------|----------------------|
| Address line 1: | <input type="text"/> |
| Address line 2: | <input type="text"/> |
| Town or city: | <input type="text"/> |
| County: | <input type="text"/> |
| Country: | <input type="text"/> |
| Postcode: | <input type="text"/> |

Account number:

Fund name:

| | |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |

2. Executor/Administrator Declaration

We the undersigned declare that:

- We wish to sell all the units in the account(s) and thereby relinquish any interest in the units. The proceeds from the sale are to be provided in accordance with the payment instructions provided in this document.
- This document is signed by all of the Personal Representatives named on the Grant of Probate (or equivalent) or on the Small Estates Form.
- We have read Link Financial Investment Limited's verification disclosure on page 1.
- If section 3 has been completed to request payment electronically, the verification documents required are enclosed (or have previously been supplied).
- We have enclosed (or have previously provided) an original Grant of Probate (or equivalent) or Small Estates Form.

Print name

Signature of Executor/Administrator 1

Date signed

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
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Signature of Executor/Administrator 2

Date signed

| | | | | | | | |
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| D | D | M | M | Y | Y | Y | Y |
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Signature of Executor/Administrator 3

Date signed

| | | | | | | | |
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| D | D | M | M | Y | Y | Y | Y |
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Signature of Executor/Administrator 4

Date signed

| | | | | | | | |
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| D | D | M | M | Y | Y | Y | Y |
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3. Method of Payment (please select)

Please provide your bank/building society details to enable us to pay you the cash raised from the sale of the investment. Payment can only be made to an account in the name of the Executor/Administrator named in the Grant of Probate (or equivalent)/Letters of Administration, or a practising Solicitor.

For electronic payments we require evidence of the bank account. This can be an original/certified copy of:

1. A bank statement (not more than three months old)
2. A void cheque or paying-in slip

Bank/building society
account number:

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Sort code:

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Payee name:

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Bank/building society
reference (If applicable):

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Bank/building society name:

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If you do not wish for the payment to be made electronically, please complete the cheque details below:

PAYEE NAME (TO RECEIVE PROCEEDS OF CHEQUE)

Title (Mr/Mrs/Miss/Other):

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Surname:

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Middle name(s):

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Forename(s):

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ADDRESS TO WHICH PAYMENT SHOULD BE SENT

Address line 1:

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Address line 2:

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Town or city:

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County:

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Country:

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Postcode:

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