

- Before you complete this form, please see how Nationwide uses your information by visiting nationwide.co.uk/privacy
- This form will be scanned electronically; please write inside the boxes in BLOCK CAPITALS using black ink as this will help us to process your request faster
- Please DO NOT cross out any sections that you do not need to complete
- If you require assistance please contact us on 0800 464 3018
- If you require funds to cover costs for certain circumstances, please also fill in a copy of the IF21 form.

Office use only

Branch prefix	Employee number	CIS number	QL / MATS ref number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Deceased member's details

Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other <input type="text"/>
Please enter ALL forenames	<input type="text"/>				
Surname	<input type="text"/>				
Please specify the account number, including sort code if there is one, of any ONE Nationwide account held by the deceased					
Account number (including sort code if there is one)	Sort code <input type="text"/>	Account number <input type="text"/>			
Case Reference (if known)	<input type="text"/>				
Date of birth for the deceased	<input type="text"/>				

Personal Representative/solicitor details

Title (please mark X in the box that applies to you or state your title)	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other <input type="text"/>
Please enter ALL forenames	<input type="text"/>				
Surname	<input type="text"/>				
Name of Solicitor (if applicable)	<input type="text"/>				
Address	<input type="text"/>				
Property number	<input type="text"/>	and/or Property name	<input type="text"/>		
Street	<input type="text"/>				
Town	<input type="text"/>	Postcode	<input type="text"/>		
Home telephone number	<input type="text"/>	Extension if applicable	<input type="text"/>		
Mobile telephone number	<input type="text"/>				
Date of birth	<input type="text"/>				
Nationality	<input type="text"/>				
Country of Residence	<input type="text"/>				
Email Address	<input type="text"/>				

Information required

Please mark **X** in **ONE** box only to indicate the accounts for which you require balance(s) as at the date of death

None required Sole accounts only Joint and Sole accounts

Please mark **X** in **ONE** box only to indicate for which of the following you will be applying. If the total holdings is less than £50,000, we do not require probate.

Grant of Probate Letters of Administration Letters of Confirmation None of these

Please mark **X** in the appropriate box(es) to indicate if you will require release of funds from the deceased's account(s) to pay for any of the following:

Inheritance Tax Probate fees Funeral expenses

If you are NOT applying for Grant of Probate or Letters of Administration/Confirmation and you would like us to send you the appropriate form(s) to close the deceased's account(s), please mark X in this box

If applicable, please state the dates for which you require a tax deduction certificate (S352 certificate)

From

D	D	M	M	Y	Y	Y	Y
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 to

D	D	M	M	Y	Y	Y	Y
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How Nationwide uses your information

Nationwide may make searches about you at credit reference agencies who will supply us with information, including information from the Electoral Register, for the purpose of verifying your identity. The agencies will record details of the search. The searches will not be seen or used by lenders to assess your ability to obtain credit. This information may also be used for the prevention of money laundering. Alternatively, we may ask you to provide physical forms of identification. You can find out more about how Nationwide uses your information at nationwide.co.uk/privacy

Signature of Personal Representative

PLEASE SIGN WITHIN THIS BOX

Date (please write INSIDE the boxes)

D	D	M	M	Y	Y	Y	Y
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