

Name of deceased:	
Date of Death:	
Account Number(s):	
Details of informant:	<p>Name: _____</p> <p>Address: _____</p> <p>Relationship to the deceased: _____</p> <p>Contact Details: (telephone/email): _____</p> <p>Existing Customer Account No. (if applicable): _____</p> <p>Executor/Administrator? Yes <input type="checkbox"/> No <input type="checkbox"/></p>
Details of Executors/ Administrators dealing with the estate (not including informant detailed above if acting in this capacity)	
	<p>Name: _____</p> <p>Address: _____</p> <p>Relationship to the deceased: _____</p> <p>Contact Details: (telephone/email): _____</p>
	<p>Name: _____</p> <p>Address: _____</p> <p>Relationship to the deceased: _____</p> <p>Contact Details: (telephone/email): _____</p>
Grant of Probate/Letters of Administration being obtained? Yes <input type="checkbox"/> No <input type="checkbox"/>	
<p>In consideration of the Society releasing information on the accounts held by the deceased to the above-named executors/administrators, I/we agree to indemnify the Society in the event that the Society suffers any loss, damages, charges or fees or if the Society has to defend any claim on the basis that the data should not have been released.</p>	
Signed:	
Date:	
For Office Use Only Cust No. _____	
Requested: Death Certificate <input type="checkbox"/> Passbook/s <input type="checkbox"/> ID (if applicable) <input type="checkbox"/> Summary Privacy Notice provided <input type="checkbox"/>	
Total Holding: £	System updated <input type="checkbox"/> DEATHN / DEATHR / DECSIG <input type="checkbox"/> Input By: _____
	Checked By: _____