

GUIDELINES FOR COMPLETION OF THIS DOCUMENT

Where the contract requires the payment to be made to the Grantee, or at the direction of the Grantee, the Grantee should complete sections A, B, D and E. Section C can be left blank.

Where the contract requires the payment to be made direct to the Designated Beneficiary, the Designated Beneficiary should complete sections A, C, D and E. Section B can be left blank.

DESIGNATED BENEFICIARIES UNDER 18 - If the Designated Beneficiary is under the age of 18, please contact Nordben using the details on the last page of this form before proceeding.

This document should be stapled, together with the requested accompanying documents, and sent by post to Nordben at the address given on the last page. Facsimile copies cannot be accepted.

To avoid delays in processing this document please write clearly and in English using block capitals.

A separate form is required for each Designated Beneficiary.

HOW WILL THIS DOCUMENT BE USED?

Nordben Life and Pension Insurance Co. Limited will use this document and other relevant details to decide whether and on what terms to accept the claim. For these purposes this document will be disclosed to relevant Nordben staff and may be disclosed to the Company's Consultant Medical Officer and to third party life reinsurers and their retrocessionnaires. It might also be necessary to obtain additional details from persons and companies, referred to in this document, for the purpose of reaching the claim decision. By signing the 'Declaration' on page 4, you will have given consent to our disclosing appropriate details from this document to them. No sensitive data is passed on to a third party unless the correct legal procedure is followed.

This document will be held on file and will be disposed of in accordance with the terms of the contract.

Nordben Life and Pension Insurance Co. Limited takes the privacy and security of data held on its clients very seriously. We have published a guide to ensure that our clients are informed about their rights and our obligations under The Data Protection (Bailiwick of Guernsey) Law. The guide is available on our website www.nordben.com/data-protection.

A. POLICY DETAILS

Grantee: _____	Policy number (if applicable) _____
Life assured/member: _____	Scheme/Group number (if applicable): _____
Type of benefit claimed:	
Lump sum on death (including Accumulated Account)	<input type="checkbox"/>
Lump sum on accidental death	<input type="checkbox"/>
Survivor's pension – payable monthly	<input type="checkbox"/>
Children's pension – payable monthly	<input type="checkbox"/>

B. GRANTEE DETAILS

Name of Grantee as specified under the contract: _____	
Address: _____	
_____	Telephone no: _____
_____	Facsimile no: _____
_____	E-mail: _____

Post code: _____	
Signature: _____ Date: (dd/mm/yyyy) _____	
If the Grantee is a corporate entity, please state: Name of signatory: _____ Status of signatory: _____	

C. DESIGNATED BENEFICIARY DETAILS

Name of designated beneficiary as specified under the contract: _____	
Address: _____	
_____	Telephone no: _____
_____	Facsimile no: _____
_____	E-mail: _____

Post code: _____	

F. ADDITIONAL DOCUMENTATION REQUIREMENTS

Please attach the following documents for verification purposes:

A certified copy of Designated Beneficiary's passport or national identity card

An original utility bill or bank statement confirming the Designated Beneficiary's residential address. (The document should be the latest available, but not more than 12 months old. An original must be supplied. It will be returned once it has been processed)

The above are not required if the payment is being made to the Grantee

Children's pension – payable monthly

A certified copy of Grantee's passport or national identity card, if Grantee is a private individual

An original utility bill or bank statement confirming the Grantee's residential address. If the Grantee is a private individual. (The document should be the latest available, but not more than 12 months old. An original must be supplied. It will be returned to you once it has been processed)

The original policy document (if applicable)

The original death certificate (this will be returned once the claim has been processed)

Where the benefit is to be paid as a pension, the following additional documents are required:

A certified copy of the Designated Beneficiary's birth certificate

A certified copy of the Designated Beneficiary's marriage certificate (where applicable)

Who can act as a suitable certifier?

- The Grantee
- An embassy, consulate or high commission of the country of issue of the documentary evidence of identity
- A lawyer or notary public
- A member of the judiciary or senior civil servant
- A serving police or customs officer