# **Death claim notification**

Please don't use this notification form if you are part of the Legal & General Mastertrust scheme. If you are part of the Mastertrust scheme, please use our 'Mastertrust Claim form' instead.

We need all the relevant fields on this form to be completed before we can make a payment. We will return the form for completion if any vital information is missing.

(Please complete in **BLOCK CAPITALS**)

#### 1 About the member

Policyholder (employer or trustees)	
Deceased's surname	
Deceased's forename(s)	
Date of birth	
Date of death	
Cause of death as shown on death certificate	
Date of entry into service	
Date the deceased was last actively at work	
Reason for any absence between date last actively at work and date of death	
Deceased's occupation	
Location of employer where deceased was last employed	Town
, ,	Postcode
Deceased's address	
Postcode	
Personal status at date of death (e.g. married, civil partner. single)	



1	About the member (continued)						
	You only need to complete this section if the death occurred overseas. Please ensure that you send the original death certificate along with an official translation otherwise the claim could be delayed. We may ask you to complete a death abroad questionnaire in order for us to process your claim.						
	Date of departure from the UK						
	Country where death occurred						
	Intended date of return to UK						
	Purpose of visit e.g. holiday/ business						
2	About the policy						
		Life assurance benefit	Dependants' pension				
	Policy number						
	Date the deceased became a member of the scheme						
	Membership category at date of death						
	Date of entry into category						
	Please send original certificates issued by a Registrar, for example birth and death certificates. These are protected by Crown copyright and cannot be lawfully copied without the consent of HMSO.						
	Please send us an original certificate confirming the death if:						
	The member died outside the UK.						
	You're sending us this form within 10 working days of the death being registered.						
	Only a coroner's interim certificate has been issued.						
	<ul> <li>Claims exceed £1.25 million.</li> <li>For most other circumstances we're able to confirm deaths without seeing the original death certificate. If we cannot, we'll ask you for the original certificate and explain why it's needed.</li> </ul>						
	For Dependants' Pension, we need to	he following:					
	Original birth certificate of each bene	ficiary, including children.					
		hip (if the birth name on the certificate is different from the enclosed, e.g. previous marriage certificate(s), deed poll)	nat on the beneficiary's birth certificate,				
	Confirmation of financial dependence	y (if applicable)					
	If the beneficiary is not the Spouse/ Registered Civil Partner or a Child (aged under 18) of the deceased, confirmation of financial dependency in the form of a statement signed by the policyholder is required.						

#### 3 Life assurance benefit

The benefit being claimed must be in accordance with the contract(s) of insurance. You'll need to make sure the deceased was eligible for cover and, the benefit claimed is calculated in accordance with the definition of Scheme Earnings agreed for insurance purposes. If this is the first claim under the policy or the Trustee bank details have changed, please provide the bank details on the policyholder's headed paper.

Life assurance benefit scheme earnings

Amount claimed

Trustee's bank account sort code

Trustee's bank account number

Trustee's bank account name

At date of death		At annual renewal date prior to date of death			
£		£			
£	Basis of calculation				
Benefit Direct to Beneficiaries					
Would you like to pay the benefit directly to the beneficiaries?					
Yes No					
If you ticked 'yes' please complete and return the 'Pay Direct to Beneficiaries Instruction' form.					

## 4 Dependant's pension

Name of dependant

Date of birth

Gender Address

Postcode

National Insurance number

Relationship to deceased Dependant's pension scheme earnings Amount claimed

Basis of calculation

Pension increase rate and, if separate rates apply to different portions of pension, the rate applicable to each e.g. £560.40 at 3%.

Dependant's bank account

Dependant's bank account



Please photocopy this page or download the relevant form from our website if you're claiming benefit for more than one dependant. Please provide the following information to dependants' pension beneficiaries:

- To protect against financial crime, we may need to confirm the dependant's identity from time to time. We may do this by using reference
  agencies to search sources of information about the dependant (an identity search). This will not affect the dependant's credit rating. If
  this identity search fails, we may ask the dependant for documents to confirm their identity.
- Legal & General's Privacy Policy, which will help a dependant understand what we do with the information we collect. The Privacy Policy is available at: https://legalandgeneral.com/privacy-policy/

To avoid delays you need to accurately complete the dependant's full name, date of birth and address details. Incomplete details will result in delays and the need to request further information from the beneficiaries at a later stage to confirm their identity.

Male	Female					
Iviale	i emale					
£						
£						
£	at	%	£	at	%	
£	at	%	£	at	%	
If the sche payment a (Trustees s	If the scheme rules give you discretion to convert the dependants' pension to a one-off cash payment and if would you like us to provide a cash value to consider tick here.  (Trustees should check the scheme rules first to confirm they have discretion to convert to a lump sum)					
	_					

sort code

#### 5 Fraud prevention

The personal information Legal & General collects from you and/or your employer will be shared with fraud prevention agencies who will use it to prevent fraud and money laundering and to verify your identity.

If false or inaccurate information is provided and fraud is identified, details will be passed to fraud prevention agencies. Law enforcement agencies may access and use this information. We may also share information about you with other organisations and public bodies, including the police and we may check and/or file your details with fraud prevention agencies and databases.

If fraud is detected, you could be refused certain services, finance or employment. Further details of how your information will be used by us and these fraud prevention agencies can be found by accessing this link, **www.cifas.org.uk/fpn** Legal & General and other organisations may also access and use this information to prevent fraud and money laundering, for example, when:

- · Checking details on applications for credit and credit related or other facilities.
- · Managing credit and credit related accounts or facilities.
- · Recovering debt.
- · Checking details on proposals and claims for all types of insurance.
- · Checking details of job applicants and employees.

Legal & General and other organisations may access and use from other countries the information recorded by fraud prevention agencies. Please contact our Group Financial Crime department if you wish to receive the relevant details of the fraud prevention agencies: Group Protection, Legal & General Assurance Society Limited, Four Central Square, Cardiff, CF10 1FS Legal & General may also check the details of other parties related to your contract, including verification of identity. This includes beneficiaries, trustees, settlors, third party premium payers, executors or administrators of your estate, parties with power of attorney and any other beneficial owner.

#### 6 Declaration and undertaking by policyholder

The benefit claimed should be payable in accordance with the contract(s) of insurance.

I have checked to make sure the deceased was eligible for cover and any earnings-related benefits are calculated using the Scheme Earnings we agreed for insurance purposes.

I agree to provide 'Legal & General's Privacy Policy' to the beneficiaries of a dependant's pension.

Signature	×
Date (DD/ MM/ YYYY)	
Name	
Capacity in which signing e.g. Trustees, Scheme Administrator	
Phone number	
Email address	

### Important information

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It's important that this form is completed in full otherwise there could be a delay with the claim.

To help you, we've included the checklist below to make sure you've completed all the sections we need. Please make sure you can tick each section before the form is sent to us. Incorrect information on the claim form may delay the claim.

#### **LUMP SUM ONLY**

#### **DEPENDANT'S PENSION**

(please also ensure that the lump sum boxes are ticked)

Claim form fully completed

 $\checkmark$ 

Dependant's bank details (if applicable)

Policy number provided

Original marriage/ civil partnership certificate (if applicable)

Scheme details provided

Original birth certificate for each dependant

Original death certificate (see section 2)

Trustee confirmation of financial dependency (if applicable)

Trustee bank details provided

Amount claimed

Scheme earnings provided

Basis of calculation

Declaration signed by trustees/

scheme administrator



Occasionally we may ask for more details, for example medical or attendance records.

# **Contact us**



0345 026 0094

We may record and monitor calls. Call charges will vary.



group protection. benefits management @landg.com



legalandgeneral.com/employer/group-protection/



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