

## Nomination for Death Benefit

For members of the Research Councils' Pension Scheme (Classic version), and the following 'closed' Schemes: AFRC Superannuation Scheme, SERC Principal Superannuation Scheme, NERC Superannuation Scheme, ESRC Superannuation Scheme, NCC Superannuation Scheme and HRI Staff Pension Scheme.

**NOTES: Please read the following**

This nomination has the force of a legal document.

You can only nominate one person, or alternatively, one incorporated or unincorporated body (e.g. A bank or firm of solicitors or accountants).

The scheme must pay death benefits within two years of your death. If we are unable to trace any of your nominees, or there is no valid nomination, we will pay the benefit to your estate.

In a divorce settlement the court may order that all or part of any death benefit must be paid to your former husband or wife. If so, your nomination will only apply to the balance.

To be valid, nominations must be made on this form (or later issues). An individual nomination will not be valid, if a nominee has died, or the nominee was your husband, wife or civil partner at the time of the nomination and your marriage/civil partnership has since ended, or a nominee was convicted of your murder or manslaughter.

There is no restriction as to when you may change your nominee, however once you start drawing your pension, you will only be able to change your nominee within the first 5 years of payment of pension. This is because payment of 5 years worth of pension benefits will extinguish the availability of any Death Benefit Lump Sum.

JSS will acknowledge receipt of this form.

Please complete this form in **BLOCK** letters and send it to Membership Services at JSS.

**Your Name** \_\_\_\_\_

**National Insurance Number** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Your Address** \_\_\_\_\_  
(Include postcode)

**Place of Work** \_\_\_\_\_

### Your Nomination for Death Benefit

I revoke any previous nomination I may have made. I would like to nominate the person, named below, to receive any lump sum benefits which may be payable under the rules of the scheme when I die.

**Nominee**

**Full Name** (including title) \_\_\_\_\_

**Full Address** \_\_\_\_\_  
(Including postcode)

### Declaration

I understand that if my husband, wife or civil partner is nominated and the marriage/civil partnership subsequently comes to an end, the nomination will become void. I understand that I must inform JSS immediately.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Signature of witness** \_\_\_\_\_ **Date** \_\_\_\_\_  
(not your Nominee)

**Full Name of witness** \_\_\_\_\_  
(Please **PRINT** name)

**Home address of witness** \_\_\_\_\_  
(Including postcode)

Please return the completed form to

*JSS Pensions Administration*

Polaris House, North Star Avenue, Swindon SN2 1UY