Occupational Pension Schemes

Employee has died

AVIVA

Please fill in this form when an employee has died whilst still in your employment or an ex-employee with deferred benefits has died since leaving your employment.

1 Personal details

Pension scheme name

Scheme number

Employee's surname *Mr/Mrs/Miss/Ms/title*

Forename(s)

Employee's member number
See explanatory details – Note 1

Is the employee covered by any other Aviva Pension Policy connected with this employment? yes ☐ no ☐

Please list policy numbers

When did the employee die? *day* *month* *year*

2 Employee's contribution to the scheme

During the current scheme year, how much has been deducted from the employee's pay to contribute to the scheme?
Do not include voluntary contributions

£

3 Further information we require

The death certificate.
This is needed before settlement can be made. Have you enclosed the death certificate?
See explanatory details – Note 2

yes ☐ no ☐

If it is not enclosed, the reason is:

continued

4 Details of spouse/civil partner – *If widow(er)'s or civil partner's benefits are not provided, please ignore this section*

Please indicate the member's legal relationship status.

Single ☐ Married ☐ Civil Partnership ☐

Spouse's/civil partner's surname

Forename(s)

Spouse's/civil partner's date of birth *day* *month* *year*

Have you seen the spouse's/civil partner's birth certificate? *See explanatory details – Note 3* yes ☐ no ☐

Have you seen the marriage/civil partnership certificate? yes ☐ no ☐

If neither of these certificates can be produced for you to verify the spouse's/civil partner's date of birth, please enclose any relevant documentation as this may suffice.

Please list any documents enclosed

It is important that these details are provided as quickly as possible so that benefits can be set up accurately.

5 Please list the names and dates of birth of all dependent children *See explanatory details – Note 4*

Names	Dates of birth	Have you seen their birth certificates?
		yes ☐ no ☐
		yes ☐ no ☐
		yes ☐ no ☐
		yes ☐ no ☐

6 Declaration

I/We confirm that this member was in our employment at the time of death, or was an ex-employee entitled to deferred benefits.

Authorised and signed on behalf of the Employer/Trustees

Signature

Print name

Position

Date

continued

Explanatory details

Employee has died

You should complete this form when an employee, who was a member of the scheme, has died while in your employment or has subsequently died while entitled to deferred benefits. We will then assess the benefits due and send you the relevant quotation.

Please ensure that you fill in all the relevant boxes on the form and tick either the 'yes' or 'no' boxes whenever they occur; make sure too, that the form has been signed. This will help us to deal with your enquiry as rapidly as possible.

Please note for UK Schemes the survivor of a member or any other person entitled to information must receive a quotation of benefits within a reasonable period, normally 2 months of the trustees being notified of such member's death. Failure to meet this timescale may result in a report being made to The Pensions Regulator.

This does not apply for Schemes operating outside the UK.

Do not delay sending the form just because something is missing, or you cannot provide all the information that we have asked for.

Send the form explaining what is missing and why, as in most cases we can still advise you what benefits are available even though payment may have to be delayed until all the information is provided. Our quotation will enable you to advise dependants of the benefits that they can expect to receive, or the trustees can begin to consider what to do with any lump sum death benefit payable at their discretion.

1. Employee's member number

You can find this in the last renewal tabulation which we sent to you.

2. Death certificate

We will require the original death certificate.

3. Birth certificate

If for some reason, this cannot be produced, we can accept other documents in lieu, eg. a Passport or Certificate of Naturalisation.

4. Dependent children

Any child of a member at the date of the member's death. It includes any natural or adopted child, any child conceived before the death of the member and any child to whose maintenance the member was substantially contributing. It excludes any child aged 23 or over, unless they are dependant on the grounds of physical or mental impairment.

Aviva Life Services UK Limited. Registered in England No. 2403746. 2 Rougier Street, York, YO90 1UU.
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