



Death Grant Expression of Wish Form

Please read these notes before you complete this form

- This form allows you to propose a person(s) to receive a lump sum death grant if you were to die in service. The amount of the grant is normally three times your annual pensionable pay at the time of death (or immediately before any period of absence without pay).
- This form applies only to members of the 2006 Scheme and 2015 Scheme. If you are a member of the 1987 Scheme and you die in service, the grant will be paid according to your surviving spouse or civil partner (if you have one) or otherwise to your personal representative (normally your estate).
- You may nominate anyone you like, including an organisation. You may also nominate as many people or organisations as you like. If you nominate more than one person or organisation, say what proportion (%) of the grant you would like each to receive. If you do not give a proportion, we will divide the grant equally between the people or organisations you have named.
- If you wish to nominate a 'Minor', please note that any payment in respect of this nominee will be made to a trust fund.
- The form asks you to state any nominated person's relationship to you. You do not have to give this if you do not wish to, but it will help us deal sensitively with matters if you die.
- A nomination will not be effective if at the time of your death you leave a surviving spouse, civil partner or unmarried partner who is entitled to benefits under the 2006 Scheme / 2015 Scheme. In these circumstances, the grant will be paid to that person.
- You may wish to consider changing your nomination if your personal circumstances change. It is your responsibility to keep it up to date, including the address of anyone you have nominated.
- If you wish to revoke your nomination you must do so in writing by completing another Death Grant Expression of Wish form or via the My Pension Online service.
- Your nomination is not binding on the Police Force. If for any reason we do not pay the grant to the person you have named, we will pay it to your personal representative.
- If more space is needed for more than three beneficiaries please enter their details on a separate sheet.
- If you have any queries or need further details, please contact Dyfed Powys Police.



Personal Details			
Name:			
National Insurance No:		Date of Birth:	
Home Address:			
		Post Code:	

Language Preference				(Please ✓ the appropriate box to indicate your election)	
As a member of the PPS, I wish to receive ALL future correspondence in:					
WELSH	<input type="checkbox"/>	ENGLISH	<input type="checkbox"/>	BILINGUAL	<input type="checkbox"/>

Expression of Wish (Beneficiary 1)			Proportion
Name:			%
Date of Birth:		Relationship:	
Address:			
		Post Code:	

Expression of Wish (Beneficiary 2)			Proportion
Name:			%
Date of Birth:		Relationship:	
Address:			
		Post Code:	

Expression of Wish (Beneficiary 3)			Proportion
Name:			%
Date of Birth:		Relationship:	
Address:			
		Post Code:	

Declaration	Please return this form to your Employer		
I have read the notes overleaf. I wish to nominate the beneficiary or beneficiaries as named here to receive, in the proportions shown, any death grant or balance of guaranteed pension payable upon my death as allowed under the PPS or in any similar provision under a subsequent Order. PLEASE NOTE that if you do not indicate your language preference above, all future correspondence will be sent to you a <u>bilingual format</u> .			
Signature:		Date:	