



FORM OF NOMINATION

To: The Trustees, Manager and Administrator (“the Trustees”) of:

- B&CE EasyBuild Stakeholder Pension
- Building & Civil Engineering Benefits Scheme
- Building & Civil Engineering Contracted out Pension Scheme
- (collectively, “the Schemes”)

From:

Title: (Mr/Mrs/Miss/Ms) Surname

Forenames (in full)

Address

Postcode

Telephone No Day Evening

National Insurance No Date of Birth

MY NOMINEE(S)

Name	Address	DOB	Relationship	Split*
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

* Enter % if more than one nominee

Your Declaration

I understand that certain benefits arising on my death may be payable to a person or persons who, in the opinion of the Trustees of the Schemes, were dependent upon me for financial maintenance on the date of my death. I request that consideration be given to the above named Nominees as beneficiaries of any benefits due from any or all of the Schemes but understand that this request does not impose any legal obligation upon the Trustees of the Schemes and serves only as an indication of my wishes.

Signed

Dated

Please note that you have the right to withdraw this Nomination at any time. You may also change your Nomination at any time and if you do so, it will supersede any previous Nomination recorded against your name.

Please return this form to the Insurance & Pensions Department at the address at the foot of the page