

Statutory Declaration of Beneficiary – Small Claims Form

FOR USE WHEN THE TOTAL BALANCE OF THE ACCOUNT(S) IS LESS THAN £15,000

Instructions:

- 1. This form should be completed in full by the beneficiary or the executor of the deceased member
- 2. Please delete as applicable all fields marked with an asterisk (*)
- 3. The Statutory Declaration of Beneficiary form must be signed in the presence of a Commissioner For Oaths or Solicitor
- 4. The Solicitors official stamp must be used to verify the form

Section 1			
Member Details			
Chorley Building Society Account No(s)			
Total Account Balances		Members Full Name	
Formally residing at	Postcode	Date of Death	
Beneficiary or Executor De	etails		
Beneficiary/Executor 1		Beneficiary/Executor 2	
Full Name(s) I/We*		Full Name(s) I/We*	
Residing at		Residing at	
	Postcode		Postcode
Relationship to deceased		Relationship to deceased	
Home telephone number		Home telephone number	
Mobile		Mobile	
Email address		Email address	
Beneficiary/Executor 3		Beneficiary/Executor 4	
Full Name(s) I/We*		Full Name(s) I/We*	
Residing at		Residing at	
	Postcode		Postcode
Relationship to deceased		Relationship to deceased	
Home telephone number		Home telephone number	
Mobile		Mobile	
Email address		Email address	

Section 2 (to be completed if a Will has been left by the deceased) I/We*, the named executor(s) do solemnly and sincerely declare that: a) The deceased named in Section 1 executed a Will and no Grant of Probate or Confirmation has been made to the estate. b) I/We* am/are* the executor(s) named to administer the estate under the Will I am/We are* the only person(s) entitled to administer the instructions of the Deceased's above numbered account(s) with the Chorley Building Society and action the closure requests as stated by myself/ourselves/the Executor(s) named in the Will of the Deceased. d) I/We* can confirm that the information in this form has been completed correctly and I acknowledge that the Society has agreed to act upon it in good faith and in reliance on the information provided. Accordingly, if I/We* or the Society become aware of any circumstances under which the payee(s) is/are* not entitled to receive the funds, I agree to return them in full. e) I/We* make the solemn declaration conscientiously believing the same to be true by virtue of the provisions of the Statutory Declarations Act 1835 Signed Signed (Executor 1) (Executor 2) Signed Signed (Executor 3) (Executor 4) Section 3 (to be completed if no Will was left by the deceased) I/We*, the named beneficiary(ies), do solemnly and sincerely declare that: a) The deceased died without leaving a Will (intestate) and that no Letters of Administration of Confirmation have been granted to the estate. b) I/We* are legally entitled, either solely or with others, to the balance in the deceased's accounts with Chorley Building Society and the closure cheque should be drawn in the favour of myself/ourselves I/We* can confirm that the information in this form has been completed correctly and I acknowledge that the Society has agreed to act upon it in good faith and in reliance on the information provided. Accordingly, if I/We* or the Society become aware of any circumstances under which the payee(s) is/are* not entitled to receive the funds, I agree to return them in full. d) I/We* make this solemn declaration conscientiously believing the same to be true by the virtue of the revisions of the Statutory Declarations Act 1835. Signed Signed (Beneficiary 1) (Beneficiary 2) Signed Signed (Beneficiary 3) (Beneficiary 4) Section 4 (to be completed in all cases by Commissioner for Oaths/Solicitor) Name and address of Commissioner for Oaths/Solicitor Postcode Telephone number Declared in the County of

V3-0321-SD-SmallClaim

On the date

Print Name

Signature

monitored for staff training.