

2. Funeral costs

I, am the named Executor/ Personal Representative and I confirm & agree;

- I am legally entitled to administer the estate of the late customer, and in the instance that there are other Executors/ Personal Representatives entitled to administer the estate, I have their consent to request funds from the account(s) for funeral costs,
- To indemnify Harpenden Building Society against any loss, claim, damages or expenses which may arise as a consequence of them acting on my instruction.

The cost to be paid for the funeral is £

Please mark ✓ in the appropriate box below to detail how you wish for the funeral to be paid,

The funeral costs should be paid by cheque,

Made payable to;

OR

The funds should be transferred by Faster Payment to the below account;

Bank	<input type="text"/>
Account Name	<input type="text"/>
Sort Code	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Account Number	<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"/>
Ref/Roll Number	<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"/>

We will require sight of the original funeral invoice together with this form prior to any payment being made.

I do solemnly and sincerely declare that I am the Personal Representative/ Executor and am entitled to request this payment from the late customers account(s).

Signature of Personal Representative / Executor
PLEASE SIGN WITHIN THIS BOX

PLEASE PRINT NAME

DATE Please write INSIDE the box

3. Inheritance Tax costs

I, am the named Executor/ Personal Representative and I confirm & agree;

- I am legally entitled to administer the estate of the late customer, and in the instance that there are other Executors/ Personal Representatives entitled to administer the estate, I have their consent to request funds from the account(s) for inheritance tax costs,
- To indemnify Harpenden Building Society against any loss, claim, damages or expenses which may arise as a consequence of them acting on my instruction.

The cost to be paid for inheritance tax is £

Please mark ✓ in the appropriate box below to detail how you wish for the inheritance tax to be paid,

The inheritance tax should be paid by cheque,

Made payable to;

OR

The funds should be transferred by Faster Payment (if the total is of £100,000.00 or below) or CHAPs (if the total exceeds £100,000.00) to the below account.

Bank	<input type="text"/>
Account Name	<input type="text"/>
Sort Code	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Account Number	<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"/>
Ref/Roll Number	<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"/>

For CHAPS only, I authorise £11.00 to be deducted from the total balance in order to process this payment.

We will require sight of the original inheritance tax IHT423 form, along with this form, prior to any payment being made.

I do solemnly and sincerely declare that I am the Personal Representative/ Executor and am entitled to request this payment from the late customers account(s).

Signature of Personal Representative/ Executor
PLEASE SIGN WITHIN THIS BOX

PLEASE PRINT NAME

DATE Please write INSIDE the box

4. Probate fees

I, am the named Executor/ Personal Representative and I confirm & agree;

- I am legally entitled to administer the estate of the late customer, and in the instance that there are other Executors/ Personal Representatives entitled to administer the estate, I have their consent to request funds from the account(s) for probate fees,
- To indemnify Harpenden Building Society against any loss, claim, damages or expenses which may arise as a consequence of them acting on my instruction.

The cost to be paid for the probate fees is £

Please mark in the appropriate box below to detail how you wish for the probate fees to be paid,

Probate should be paid for by cheque,

Made payable to;

OR

The funds should be transferred by Faster Payment to the below account.

Bank	<input type="text"/>
Account Name	<input type="text"/>
Sort Code	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Account Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Ref/Roll Number	<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"/>

We will require sight of the original invoice for probate prior to any payment being made.

I do solemnly and sincerely declare that I am the Personal Representative/ Executor and am entitled to request this payment from the late customers account(s).

Signature of Personal Representative / Executor

PLEASE SIGN WITHIN THIS BOX

PLEASE PRINT NAME

DATE Please write INSIDE the box

Date received

Date sent to MST

Staff initial

Member Services use only

Date received

Documentation attached

Signature verified

Actioned by

Date actioned

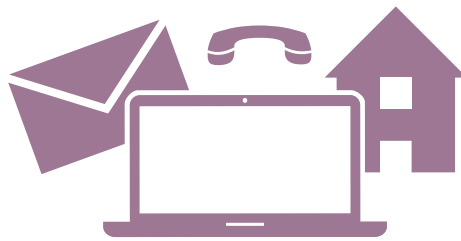
Guidance for completing this form

Section	Details	✓
Section 1	This section will capture to details of the late customer, please state all known accounts of the customer.	
Section 2	This section is the indemnity required to in order to pay any funeral expenses. Please clearly state how you wish for the payment to be made.	
Section 3	This section is the indemnity required in order to pay any inheritance tax. Please clearly state how you wish for the payment to be made.	
Section 4	This section is the indemnity required in order to pay for any probate fees. Please clearly state how you wish for the payment to be made.	

If you require any assistance completing this form, please contact our Savings Team on 01582 765411 or email them at memberservices@harpendenbs.co.uk.

Once this form is completed please forward it to our Savings Team using the enclosed prepaid envelope or using our freepost address;

Harpenden Building Society
FREEPOST
SB165
14 Station Road
Harpenden
Hertfordshire
AL5 4BR



Contact us by post • phone • online • in branch
harpendenbs.co.uk

Harpenden

Aberdeen House
14 Station Road,
Harpenden
Hertfordshire AL5 4SE

Tring

38 High Street
Tring
Hertfordshire HP23 5AA

Radlett

341 Watling Street
Radlett
Hertfordshire WD7 7LB

Leighton Buzzard

22 Market Square
Leighton Buzzard
Bedfordshire LU7 1HE

Head Office: Mardall House, 9–11 Vaughan Road, Harpenden, Hertfordshire AL5 4HU
Tel: 01582 765411 Email: enquiries@harpendenbs.co.uk



Supporting our local communities to create a better future

Harpenden Building Society is authorised for investments by Trustees and is a member of the Building Societies Association. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and Prudential Regulation Authority. Firm reference number: 157260.