

Name of Company in which Shares are held. The company name must be specified.



Name and Address of first named shareholder and names of all other shareholders

Account Designation (if any)

Company Code (if known)

Shareholder Reference Number (SRN)

SRN starts with 'C' 'I' or 'G' followed by 10 digits

## Small Estates Declaration and Indemnity form

**Kindly Note:** This form is issued only to the addressee(s) and is specific to the unique designated account printed hereon. This personalised form is not transferable between different (i) account holders; or (ii) uniquely designated accounts. The Company and Computershare Investor Services PLC accept no liability for any instruction that does not comply with these conditions.

### A. Executor(s) / Next of Kin Information - All legal representatives must sign the form.

To:

I/We, the undersigned, confirm and declare that:-

- I/We are entitled to administer the Estate of the deceased and act in accordance with the Will, if applicable
- The total value of the Estate of the deceased in the United Kingdom does not exceed the Inheritance Tax limit
- The total value of the shareholding does not exceed £20,000 at the date of death
- No Inheritance Tax is payable in respect of the Estate of the deceased
- I/We do not intend to apply for a Grant of Representation and as far as we are aware, no one else intends to apply for one.

If you decide to recognise my/our entitlement to administer the Estate of the deceased without production of a Grant of Representation, then I/we hereby agree to indemnify you from and against all claims, demands, losses, damages, costs and expenses which you may suffer, incur or be liable for as a result of acting on my/our instructions. I/We undertake to produce a Grant of Representation if required in the future.

Title, forenames & surname of first-named or sole executor

1.

Signature

Date

DD / MM / YY

Relationship to Deceased

Contact Telephone Number

Date of Death

DD / MM / YY

House Number

Post Code

Street/Road Name/City/County

Title, forenames & surname of other named executors

2.

Signature(s)

3.

4.

Please complete Section B on the reverse of this form





## B. Fees and Countersignature.

Tick option 1 or 2 - see 'How to complete this form' below

1

2

To be countersigned by a UK bank authorised by the Bank of England, or an insurance company that is a member of the Association of British Insurers.

Date

DD / MM / YY

We join in this indemnity and undertaking

Signature

Capacity

Bank or insurance company stamp

### How to complete this form

## A. Executor(s) / Next of Kin Information

### Next of Kin (No Will)

The Small Estates Declaration and Indemnity form must be signed by the next of kin. The next of kin must be related to the deceased by marriage or blood. The intestacy rules govern the order of priority in which relatives of the deceased are entitled to the deceased's Estate, as follows:

- Husband, wife or civil partner of the deceased
- Son or daughter of the deceased (including stepchildren if formally adopted)
- Parents of the deceased
- Brothers or sisters of the deceased

Kindly Note: All equal claiming next of kin must sign. It is not acceptable, for example, for one son or daughter to sign the form and exclude his/her brother or sister who has an equal claim to the estate.

- The first appointed next of kin must complete their full name, relationship to the deceased, contact telephone number and address (including post code) and then sign
- The date of death must also be completed
- Any other equal next of kin must complete their full name and sign the appropriate boxes
- We require either the original or an official copy of the Death Certificate to be submitted with the Small Estates Declaration and Indemnity form

### Executor (With Will)

- The first appointed executor in the Will must complete their full name, relationship to the deceased, contact telephone number and address (including post code) and then sign
- The date of death must also be included
- Any other named executors must complete their full name and sign the appropriate boxes
- This section must be completed in accordance with the Will

## B. Fees and Countersignature

