

Statutory declaration - Will attached

Instructions (only complete if a will has been left by the deceased):

1. This form should only be completed if the total balance, in all of the deceased's Coventry Building Society accounts at date of death, is below £30,000 and probate is not being obtained.
2. This form is for use by the executors of the will and must be completed by ALL executors.
3. NB: All executors are responsible for ensuring that the Closure mandate set out on page 4 of this form has been completed correctly.

If we have not already seen the original death certificate and a solicitor's certified copy of the will, these must accompany this declaration.

We collect and process the information on this form so that we can manage the probate process.

For more details on personal data privacy and retention, please view our Privacy Notice at www.coventrybuildingsociety.co.uk/privacy, or ask us for a copy.

Contact name
(in case of a query)

Telephone number
(in case of a query)

The schedule

The deceased

First name

Middle name(s)

Surname

Address

Date of death

Date of will

(this box must be completed)

Sole account number

Balance at date of death

Sole account number

Balance at date of death

Sole account number

Balance at date of death

Sole account number

Balance at date of death

Sole account number

Balance at date of death

Sole account number

Balance at date of death

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First executor

First name

Middle name(s)

Surname

Address

Telephone

I, the named executor, do solemnly and sincerely declare that:

- The deceased named in the Schedule above executed a will and no grant of probate or confirmation (Scotland) will be obtained.
- This will is, to the best of my knowledge and belief, the last will of the deceased.
- I am an executor named to administer the estate under the will.
- I can confirm that the Closure mandate set out on page 4 of 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 or the Society become aware of any circumstances under which the payee(s) is/are not entitled to receive funds, I agree to return them in full.
- I make this declaration conscientiously believing the same to be true and by virtue of the provisions of the Statutory Declarations Act 1835 (all executors must sign to agree to this).

Signature of executor

Date

Before me: signature of solicitor, Justice of the Peace, Commissioner for Oaths.

Print name

Firm

Address

Branch/Agency Manager/Deputy

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Second executor

First name

Middle name(s)

Surname

Address

Telephone

I, the named executor, do solemnly and sincerely declare that:

- The deceased named in the Schedule above executed a will and no grant of probate or confirmation (Scotland) will be obtained.
- This will is, to the best of my knowledge and belief, the last will of the deceased.
- I am an executor named to administer the estate under the will.
- I can confirm that the Closure mandate set out on page 4 of 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 or the Society become aware of any circumstances under which the payee(s) is/are not entitled to receive funds, I agree to return them in full.
- I make this declaration conscientiously believing the same to be true and by virtue of the provisions of the Statutory Declarations Act 1835 (all executors must sign to agree to this).

Signature of executor

Date

Before me: signature of solicitor, Justice of the Peace, Commissioner for Oaths.

Print name

Firm

Address

Branch/Agency Manager/Deputy

Continued on the next page

Closure mandate

The instruction below is in accordance with the agreement of all executors. Please note, all accounts will be closed to the same destination. Please complete either section a, b or c.

a) cheque payable to:

Name	<input type="text"/>	To close	£ <input type="text"/>
Address (including postcode)	<input type="text"/>		

b) or, by transfer to Coventry Building Society account number:

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"/>	To close	£ <input type="text"/>
Account name	<input type="text"/>		

c) or, by electronic payment to:

Bank/Building Society	<input type="text"/>	To close	£ <input type="text"/>
Bank sort code	<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"/>		
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"/>		
Name of account holder	<input type="text"/>		
Reference	<input type="text"/>		

For office use only - to be completed on receipt of the form

Branch no Cashier no

Signed: Branch/Agency Manager/Deputy
(for all branch withdrawals)