

**Department** 

Home Address:

Postcode:

## Beneficiary Client Information

Matter

| completed. *Please be       | our legacy we are required to take a few details fro<br>assured your contact details will be kept entirely co<br>www.mogersdrewett.com/privacy-policy/ Paper cop | onfidential. Our full privacy policy |
|-----------------------------|--|--------------------------------------|
| Title                       | First Name   |                                      |
| Middle Name                 | Last Name  |                                      |
| Former Name (if applicable) | (Enclose certified copy marriage certificate or change   |                                      |

of name deed)

Email:

Telephone: Date of Birth:

National Passport Number (If Non-UK Resident):

Contact

Occupation: Marital Status:

All payments to beneficiaries are paid by via Bank Transfer. Please note that some banks do charge for this service but that this is out of our control.

For us to make this payment please confirm the following:

| Name of account holder:           |   | Name of Bank:     |  |
|-----------------------------------|---|-------------------|--|
| Address of Bank:                  |   | Account Number:   |  |
| Sort code:                        |   |                   |  |
| Foreign<br>beneficiaries<br>only: | <ul><li> Swift/BIC Number:</li><li> IBAN Number:</li><li> Currency in which transfer is</li></ul> | s to be remitted: |  |



## mogersdrewett.com Beneficiary Client Information

Once the funds have been transferred to your designated account, they become your responsibility. If you are in receipt of any means tested benefits it is your responsibility to notify any benefits agency of the funds due to you and any payments, you receive.

At Mogers Drewett we understand that receiving an inheritance can be life changing and sometimes overwhelming and so we offer a free, no obligation discussion with one of our financial planners to all our clients and beneficiaries of estates.

If you would like us to arrange for one of our financial planning team to contact you, to answer any questions you may have about your inheritance, or any other aspect of your finances then please let us know.

| l would | like a | call | from | a | financial | р | lanner | please |
|---------|--------|------|------|---|-----------|---|--------|--------|
|         |        |      |      |   |           |   |        |        |
|         |        |      |      |   |           |   |        |        |

I do not wish to be contacted by a financial planner

Please now sign, date, and return the completed form with two forms of identification. For information regarding why we need identification and which documents are acceptable please refer to the attached Anti-Money Laundering Requirements document.

Please note that we cannot proceed until we have seen the original identification documents in your presence or received certified copies. Please do not post original or uncertified copies of your passport or driving license to us.

Firm's Law Society number: 0005238

| Signa | ture | <br> |
|-------|------|------|------|------|------|------|------|------|------|------|------|------|------|
|       |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Date  |      | <br> |