

Mitchells & Butlers Pension Plan



Partner Nomination Form

Personal details

Surname:	<input type="text"/>	Title:	<input type="text"/>
First names:	<input type="text"/>		
Date of birth:	<input type="text"/>	National Insurance No:	<input type="text"/>

Under the Plan the Trustees can pay a pension on your death to a person who meets certain criteria set out in the rules. The criteria are that:

- The person must be in a relationship with you when you die (and you must have been in that relationship for 12 months immediately prior to your death);
- That relationship must closely resemble a marriage;
- The person must have been dependent on your earnings (or both financially interdependent) to maintain his/her standard of living.

You must notify the Trustees of your partner.

Partner's details

Partner's full name (block letters):	<input type="text"/>	Title:	<input type="text"/>
Date of birth:	<input type="text"/>	National Insurance No:	<input type="text"/>
Date relationship started	<input type="text"/>		

Data Protection Act 1998

In accordance with the Data Protection Act 1998 I consent to the information on this Form being held and processed by the Trustees for the purpose of determining the recipients of and administering any benefits payable on my death.

Member's Signature _____ Date _____

PLEASE RETURN THIS FORM TO

Mitchells & Butlers Pensions, Mercer, Stratford Court, Cranmore Boulevard, Solihull, West Midlands, B90 4QT

If you do not want your wishes to be read until after your death, state clearly on the envelope:

'PARTNER NOMINATION FORM – ONLY TO BE OPENED IN THE EVENT OF MY DEATH', your name and NI number.

If you require acknowledgement of receipt of this form please enclose an addressed envelope.