

Information about you

Surname



Wincanton plc Pension Scheme

Date

Nomination of beneficiary form

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ıll name and addresses of person or people chosen	Relationship to you (optional)	Percentage you would like the beneficiary to rece
Name:		
Address:		
Postcode:		
Name:		
Address:		
Postcode:		
Name:		
Address:		
Postcode:		
Name:		
Address:		
Postcode:		
		Total 100%

I acknowledge that I have been informed how the Trustee will use my personal information. I consent to the processing of the information given above to assist the Scheme with locating my nominee(s) and assessing their eligibility to receive benefits. I also agree to obtain my nominee(s)' express consent to the Scheme's use of the above information for this purpose. I acknowledge that this consent can be withdrawn at any time and agree to inform my

Date of birth

nominee(s) of the same.