The Momentum Malta Retirement Trust

Member Notification of Death Form

Momentum

Momentum Pensions Malta Limited is the Retirement Scheme Administrator of the Momentum Malta Retirement Trust, which is registered as an approved Personal Retirement Scheme. Momentum Pensions Malta Limited is authorised and regulated by the Malta Financial Services Authority under Company Registration Number C 52627. Momentum Pensions Malta Limited has its registered office at Ground Floor, Crown Marina, Ta' Xbiex Seafront, Ta' Xbiex, XBX1027 - Malta.

Momentum Pensions Scheme Member Notification of Death Form

At Momentum Pensions, we understand that dealing with a bereavement can be a difficult time. We are committed to providing you with the support and assistance you need while managing the financial arrangements that follow.

To assist with notifying us of the death of a member of the Momentum Malta Retirement Trust and the processing of the deceased member benefits, please complete this form in full and email it, together with all the supporting documents listed in Section 4, to retirements@momentumpensions.com.

The form should be completed by the person notifying us of the member's death. This will usually be a close family member, appointed adviser, executor, personal representative or solicitor.

Providing all the required information and supporting documents in one email will help us process the notification efficiently and minimise the need to contact you for further information during this difficult time.

If you require any assistance with completing the form or would like to discuss the process, please contact our Retirement Team on +356 2787 7677.

01. Deceased Member Details

Full Name

Date of Birth (DD/MM/YY)

Date of Death (DD/MM/YY)

UK National Insurance number and/or Tax Number for current tax residency

Momentum Scheme Reference Number

Last Residential Address

02. Details of notifier and anyone else involved in the process

	Full Name	Relationship to Deceased	Email Address	Phone
Family member				
Executor *				
Adviser				
Administrator *				
Personal Representative*				
Solicitor				
Other				

**Where you provide details of more than one Executor, Administrator or Personal Representative or any combination, you confirm that you have individual's consent to share their details with us and you allow us to correspond with all named parties as Joint Executors.*

03. Potential Beneficiaries

Please provide details of the surviving spouse, civil partner, any financial dependents with their age or any other potential beneficiaries for consideration by the Trustees.

Full Name	Relationship to Deceased	Date of Birth	Email Address	Phone Number	Additional details we need to know

04. Document Checklist (please tick)

For the deceased Momentum Pensions member, please provide:

- ☐ Original Certified copy of Death Certificate (including translation if not in English)
- ☐ Original Certified copy of the Will (if applicable) (including translation if not in English)
- ☐ Or, if no Will exists then written signed and dated confirmation from the next of kin of such and a statement setting out the member's personal circumstances (in respect of marriage, all children and any other financial dependents). We will require a proof of identity of a person signing such letter.
- ☐ A copy of the adviser's original fact find, as this sometimes also sheds light on members with potentially complex personal circumstances.

*Please ensure any documents requiring certification are certified with the relevant Malta certification requirements.

Information on who can certify the documents and what is acceptable as proof of address is available here.

05. Processing Fees

Processing Momentum Pensions Malta Limited scheme member death claim including processing of the documents, decision and the distribution of death benefits fall outside of the standard annual pension administration fees.

There is a minimum charge of £750 (or equivalent member policy currency) that will be applied by Momentum prior to the distribution of benefits to the beneficiaries. The Fee will be greater where there are multiple beneficiaries or the identification of beneficiaries is more complex.

06. Declaration

I confirm that the information I have provided within this form is accurate and complete to the best of my knowledge.

Signature	Printed Name
Signing in Capacity As	Date

Submission Details

Please email this completed form and all supporting documents to retirements@momentumpensions.com

If you have any questions or difficulty in completing this form, please contact our customer services team on +356 2787 7677.