



## Statutory Declarations of Personal Representative & Beneficiary

### 3. Declaration & Signature for closures under £5,000.00 (where Probate has not been obtained)

I, am the named Personal Representative and I confirm & agree;

- No Grant of Probate or Letters of Administration have been granted to the late customer's estate,
- I am legally entitled to administer the estate of the late customer, and in the instance that anyone else is entitled to administer the estate, I have their consent to close the account(s),
- To indemnify Harpenden Building Society against any loss, claim, damages or expenses which may arise as a consequence of them acting on my instructions.

Please mark **X** in the appropriate box below,

The funds from the accounts should be transferred to the following Harpenden Building Society account.

Roll Number 1

<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"/>	-	<input type="text"/>
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**OR**

The closure cheque should be made payable to

**OR**

The funds should be transferred by Faster Payment to the below account

Bank	<input type="text"/>
Sort Code	<input type="text"/>
Account Number	<input type="text"/>
Ref/Roll Number	<input type="text"/>
Account Name	<input type="text"/>

Signature of Personal Representative

PLEASE SIGN WITHIN THIS BOX

DATE Please write INSIDE the box

PLEASE PRINT NAME

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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### 4. Declaration & Signature for closures between £5,000.01 and £30,000.00 (where Probate has not been obtained)

I, am the named Personal Representative and I sincerely declare that:

- No Grant of Probate or Letters of Administration have been granted to the late customer's estate,
- I am legally entitled to administer the estate of the late customer, and in the instance that anyone else is entitled to administer the estate, I have their consent to close the account(s),
- To indemnify Harpenden Building Society against any loss, claim, damages or expenses which may arise as a consequence of them acting on my instruction.

Please mark **X** in the appropriate box below,

The funds from the accounts should be transferred to the following Harpenden Building Society account.

Roll Number 1

Grid of boxes for Roll Number 1, including hyphens.

OR

The closure cheque should be made payable to

OR

The funds should be transferred by Faster Payment to the below account.

Bank

Sort Code

Account Number

Ref/Roll Number

Account Name

If you have completed section 4 please make sure a Solicitor/ Commissioner for Oaths completes section 5.

I do solemnly and sincerely declare that I am the Personal Representative/ Executor and am entitled to claim the balance of the late customer under the Building Societies Act 1986 Section 22.

Signature of Personal Representative

PLEASE SIGN WITHIN THIS BOX

DATE Please write INSIDE the box

PLEASE PRINT NAME

DATE grid: D D M M Y Y Y Y

5. To be completed by a Solicitor/ Commissioner for Oaths if you have completed section 4

Declared at

Property Number

and/or Property name

Town

Postcode

Before me

(Name of Solicitors/ Commissioner for Oaths

Signature of Solicitor/Commissioner for Oaths

PLEASE SIGN WITHIN THIS BOX

OFFICIAL STAMP

PLEASE PRINT NAME

DATE Please write INSIDE the box

DATE grid: D D M M Y Y Y Y

## 6. Signature for closures over £30,000.01 or where Probate has been obtained for any amount

We will require sight of an original Grant of Probate or Letters of Administration together with this form in order to close any accounts.

Please mark **X** in the appropriate box below,

The funds from the accounts should be transferred to the following Harpenden Building Society account.

Roll Number 1

<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"/>	-	<input type="text"/>
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**OR**

The closure cheque should be made payable to

<input type="text"/>
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**OR**

The funds should be transferred by Faster Payment (if the balance is of £100,000.00 or below) or CHAPs (if the balance exceeds£100,000.00) to the below account.

Bank	<input type="text"/>
Sort Code	<input type="text"/>
Account Number	<input type="text"/>
Ref/Roll Number	<input type="text"/>
Account Name	<input type="text"/>

**For CHAPs only,** I authorise £15.00 to be deducted from the total balance in order to process this payment.

### Signature(s) of Executor or Administrator

1 Signature of Executor or Administrator

PLEASE SIGN  
WITHIN THIS BOX

PLEASE PRINT NAME

2 Signature of Executor or Administrator

PLEASE SIGN  
WITHIN THIS BOX

PLEASE PRINT NAME

3 Signature of Executor or Administrator

PLEASE SIGN  
WITHIN THIS BOX

PLEASE PRINT NAME

4 Signature of Executor or Administrator

PLEASE SIGN  
WITHIN THIS BOX

PLEASE PRINT NAME

DATE Please write INSIDE the box

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Scotland only – All Executors must sign**

### Documentation

Please tick if you require tax certificates for the accounts

## Internal use only

Date received	Date sent to MST	Staff initial
Date processed	Staff initial	

### Guidance for completing this form

Section	Details	✓
Section 1	This section will contain the details of the deceased customer, please note that only one account number needs to be provided in the specified box.	
Section 2	This section will contain the details of the person(s) acting as the Personal Representative/Executor	
Section 3	This section is for the indemnity to close total balances of up to £5,000.00; a method of closure must be clearly specified and this section must be signed by the Personal Representative/Executor	
Section 4	This section is for the indemnity to close total balances between £5,000.01 and £30,000.00; a method of closure must be specified and this section must be signed by the Personal Representative/Executor. If completed section 5 must also be completed.	
Section 5	This section must be signed and officially stamped by a Solicitor/Commissioner for Oaths after they have checked the contents of the form. This section must be completed in any case where the total balance is between £5,000.01 and £30,000.00 unless Grant of Probate or Letters of Confirmation/Administration have been applied for or obtained.	
Section 6	This section must be completed if an application for Grant of Probate or Letters of Administration has been obtained regardless of the balance. If Letters of Confirmation have been applied for we will require the signatures of all the executors in order to close the account(s) and release the funds.	

### Key

- **Executor** – A person or persons who have been named in a Will or Grant of Probate document and will be responsible for dealing with the affairs of a deceased person.
- **Personal Representative** – A person or persons who are representing the interests and affairs of the deceased.
- **Grant of Probate/ Letters of Administration/ Letters of Confirmation** – These are documents which will contain an official government seal which legally confirm that the person/persons named on the document are handling the interests and affairs of the deceased. In Scotland Letters of Administration will be referred to as Letters of Confirmation.

If you require any assistance completing this form, please contact Member Services on 01582 765411 or email them at [memberservices@harpendenbs.co.uk](mailto:memberservices@harpendenbs.co.uk).

Once this form is completed please forward it to Member Services using the enclosed prepaid envelope or using our freepost address;

Harpenden Building Society  
FREEPOST  
SB165  
14 Station Road  
Harpenden  
Hertfordshire  
AL5 4BR



Contact us by post • phone • online • in branch  
[harpendenbs.co.uk](http://harpendenbs.co.uk)

**Harpenden**

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14 Station Road, Harpenden  
Hertfordshire AL5 4SE  
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Radlett  
Hertfordshire WD7 7LB  
Tel: 01923 854457

**Tring**

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Tring  
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Leighton Buzzard  
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