KentReliance

Form to reclaim funds from a lost account

Please write in black ballpoint pen and complete both sheets in block capitals

Title Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other ☐

Forename(s)

Surname

What is your current address?

Postcode

Are you happy to receive correspondence by email? Yes ☐ No ☐ If **YES**, please give your full email address

Daytime telephone number (including dialling code)

Is the account you are enquiring about in your name? Yes ☐ No ☐

If **Yes**, please fill in sections **A** and **C**. If **No**, please fill in sections **B** and **C.**

SECTION A

Please list any other names by which you have been known (eg before marriage)

Date of birth ☐☐ / ☐☐ / ☐☐☐☐

What addresses have you lived at since the account opened (use a seperate sheet if necessary)?

Postcode

Date / / to / /

Postcode

Date / / to / /

SECTION B

What do you believe was the full name of the account?

Forename(s) Surname

If you do not know the exact name, please give as much information as possible, in particular first and middle names.

Date of birth ☐☐ / ☐☐ / ☐☐☐☐

What addresses has/had the account holder lived at since the account opened (use a seperate sheet if necessary)?

Postcode

Date / / to / /

Postcode

Date / / to / /

What is the connection between you and the account holder and on what basis are you making this claim?

Are you: (at least one must be selected) Partner/spouse ☐ Next of kin ☐ Beneficiary of will ☐

Executor of will ☐ Other ☐ (please specify)

Do you have authority by the account holder? Yes ☐ No ☐ Is the account holder still alive? Yes ☐ No ☐

If the account holder is deceased, please state the date of death ☐☐ / ☐☐ / ☐☐☐☐

and indicate whether you have: Death certificate ☐ Probate ('confirmation' in Scotland) ☐ Copy of will ☐

Lawyer's letter advising of the relevant will terms ☐ Other proof of being legal heir ☐

(please specify)

Section C - see next page

SECTION C

Name the branch you believe the account was held at

Name

Address

Postcode

Is the account in joint names? Yes ☐ No ☐ Don't know ☐

If **Yes**, please list any other names on the account

What is the account number? Don't know ☐

What type of account is it? Savings ☐ Other ☐ (please specify)

On what date do you estimate the account was opened? / / Don't know ☐

On what date was the account last used? / / Don't know ☐

What was the approximate balance in the account? £ Don't know ☐

Is there anything else you would like to add in support of your claim? Please state below. (use a seperate sheet if necessary)

To ensure that your claim is valid we need to check your identity and your claim on the account.

Do not send any documents or photocopies at this stage.

Please indicate which of the following you have showing your identity, by ticking the appropriate box(es):

Passport ☐ Birth certificate ☐ Utility bill ☐ Driving licence ☐ Marriage certificate ☐

Other ☐ (please specify)

Please indicate which of the following documents you have showing evidence of the account by ticking the approriate box(es):

Passbook ☐ Statement ☐ Letter from Bank/Building Society ☐

Other ☐ (please specify)

Once you have answered as many questions as you can and listed any relevant documentation, **please sign and date below.**

Signature Date / /

We can provide literature in large print, Braille and audio. Please let us know if you require an alternative format or any additional support with managing your account. You can contact us either by phone, in writing, visiting one of our branches or by visiting **kentreliance.co.uk/additional-support** for more information.

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883/HO/MKT000810-067