Notice of bereavement form

Investec Private Banking

London Operations
Investec Bank Plc
30 Gresham Street
London
EC2V 7QP

Completing this form

Please complete the below form if you are notifying us of the death of a client.

Following completion, return this form to our address listed at the top of the page and enclose with it any additional required documents as detailed in our bereavement guide and below.

If you have any queries when filling out this form, please call on **0330 123 3655** (or **+44 20 7597 4131** if you're calling from outside the UK).

A. The Client's details

Please enclose the original or certified copy of the death certificate when sending this form.

Full name:

Last known address:

B. Accounts held with Investec Private Bank:

Please include details of any bank accounts and mortgages/loans the late client held with us. For mortgages, if you do not know the account number(s), please provide details of the address in the additional information box on the following page.

Account number 1:

Account Holder name(s):

Account number 2:

Account Holder name(s):

Account number 3:

Account Holder name(s):

Account number 4:

Account Holder name(s):

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C. Personal Representative(s) details

For all sole accounts, please provide details of the personal representative(s) with legal authority to deal with the deceased person's estate.

In addition, please enclose a copy of:

- the personal representative's proof of identity and residential address; and
- an original or certified copy of the Grant of Representation, if already obtained. Otherwise, please send to us once you have received this.

If the personal representative is a solicitor, please provide the name of the firm and details of the individual to contact.

For bank accounts, loans or mortgages held jointly, we typically do not require a Grant of Representation. Under some circumstances, we may still request this document.

Personal Representative 1 full name:	
Relationship to client:	
Contact number:	
Contact address:	
Contact email:	

Personal Representative 2 full name: (if applicable)	
Relationship to client:	
Contact number:	
Contact address:	
Contact email:	

Additional information