

# Bereavement Request to Close Form

This form is to be used to close a Savings account belonging to a deceased customer of Bath Building Society. Please read our [A Bereavement Guide](#) brochure for more information. You can find this on our website or at one of our Branches.

## Details for the Deceased

Title:	Forename(s):
Surname:	Date of birth:
Existing account numbers:	

You must complete all sections of this form which apply to you:

- Account details
- Where **Grant of Probate** has **not** been provided
- Where **Grant of Probate** has been provided

All personal representatives or executors must sign before we will release funds from the deceased's account.

## Account details

We can pay the funds by cheque or by faster payment. If sending the closing funds by faster payment, it should be sent to an account in the name of one or all of the executors of the estate.

If you wish us to pay the funds by faster payment, please fill out the details of the destination account below.

Sort code:	Account number:
Account title:	



**Bath Building Society**

We're different because you are

If you wish to send the funds by cheque, please fill out the details below. The account number will be for the Bath Building Society account where the funds are held. The cheque should be payable to one or more executors. If you need additional space for further cheques, please contact our Customer Support Department at [savings@bibs.co.uk](mailto:savings@bibs.co.uk)

Account number:	Cheque payable to:
Account number:	Cheque payable to:
Account number:	Cheque payable to:

## Grant of Probate not provided

Please read and sign to confirm your agreement and understanding of the declaration below if **Grant of Probate** has **not** been provided.

This declaration applies to each individual that signs this document.

I confirm and agree that no Grant of Probate or Letters of Administration have been granted to the deceased's estate.

I confirm that Bath Building Society has been provided with an original or certified copy of the deceased's Death Certificate.

I confirm I am legally entitled to administer the deceased's estate.

I confirm I am legally entitled to all monies which the deceased holds with Bath Building Society.

Executor name:	Executor name:
Signature:	Signature:
Date:	Date:

## Grant of Probate provided

Please read and sign to confirm your agreement and understanding of the declaration below if **Grant of Probate** has been provided.

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This declaration applies to each individual that signs this document.

I confirm and agree that I am a Personal Representative/Executor as named on the Grant of Probate document.

I confirm that Bath Building Society has been provided with an original or certified copy of the deceased's Death Certificate and the Grant of Probate.

Executor name:	Executor name:
Signature:	Signature:
Date:	Date:

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Please return the form to our Head Office address at Head Office, 15 Queen Square, Bath BA1 2HN. You can also return it to one of our Branches, or by email to [savings@bibs.co.uk](mailto:savings@bibs.co.uk)

For Office use:

Actioned by:	Checked by:
Date received:	Received at:

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