

# FORM OF NOMINATION – NORTHERN IRELAND

## *Slieve Gullion Credit Union Limited*

(To be completed only after admission to membership)

I, (print name) \_\_\_\_\_ Membership No: \_\_\_\_\_

Of, (address) \_\_\_\_\_ D.O.B: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_ Post code: \_\_\_\_\_

A member of Slieve Gullion Credit Union Limited, hereby revoke all previous nominations and nominate the following person(s):

Name: \_\_\_\_\_

Name: \_\_\_\_\_

D.O.B: \_\_\_\_/\_\_\_\_/\_\_\_\_

D.O.B: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

Membership No: \_\_\_\_\_

Membership No: \_\_\_\_\_

To become entitled to such property in the credit union ( whether in savings, loans,LP/LS insurance but totally excluding Death benefit rider if applicable or otherwise) not exceeding the limit of the amount - for the time being authorised by law – which I may at the time of my death.

The proceeds, if applicable of the Death Benefit Rider may be applied by the credit union towards my vouched funeral / bereavement expenses, and if not so applied shall be paid to the person(s) referred to above.

### NOTES:

This form should be completed only following admission to membership of the nominator.

This form should be adapted if specific property only to be nominated.

Under article 17(4) of the Credit Union (NR IRE) order 1985 a nomination is not revocable or variable by the will of the nominator or by any codicil to his/her will.

Under Rule 154(4) of the standard rules for Credit Unions (NR IRE) The marriage, civil partnership or divorce of a member of a credit union revokes any nomination made by him/her before his/her marriage, civil partnership or divorce.

Under Rule 154(5) of the standard rules for Credit Unions (NR IRE) a nomination shall be revoked by the death of the nominee / beneficiary before the death of the nominator.

Under article 17(1) of the Credit Unions (NR IRE) Order 1985 the credit union shall keep a book in which the names of all persons nominated under paragraph (1) and any revocation or variation of any nomination under that paragraph shall be recorded.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

WITNESSED: \_\_\_\_\_

Print Name of witness \_\_\_\_\_

(The witness shall not be a nominee / beneficiary)

Address of witness: \_\_\_\_\_

\_\_\_\_\_