

NORTEL NETWORKS UK PENSION PLAN

Nomination of Dependant

TO BE COMPLETED BY THE MEMBER IN BLOCK CAPITALS

Surname: Title: *Dr/Mr/Mrs/Miss/Ms *please delete as appropriate

Forename(s):

Address:

..... Post Code

N.I. No:

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To: The Trustee, Nortel Networks UK Pension Plan

With regard to any pension benefit that may become payable on my death, in the absence of an Eligible Spouse,

I HEREBY NOMINATE:

Full Name of Dependant:

Address:

..... Post Code

Date of Birth:

DAY	MTH	YR

 *Male / Female

Relationship to member:

I HEREBY CERTIFY that the Dependant is, at the date of this nomination, wholly or mainly dependent on me for the provision of the ordinary necessities of life.

I give the following details in support of this nomination:

.....
.....

I AGREE to give such further information as may at any time be required by the Trustee in respect of this nomination. I appreciate that this nomination is subject to consideration by the Trustee both at the time of application and in the event of my death.

Signed: Date:

ALL INFORMATION WILL BE KEPT CONFIDENTIAL

Please return to the Pensions Dept: 5th Floor, Metropolitan House, Darkes Lane, Potters Bar Herts, EN6 1SZ