Help using this Veterans UK PDF form

About this form

- **You must download and save this form to your computer before using it**
- You can save data typed into this PDF form if you use the latest version of **Adobe Acrobat Reader**
- To download the latest version of Adobe Acrobat Reader free of charge go to the Adobe website
- This means that you do not have to complete this form in one session
- The form will not save in older versions of Adobe Acrobat Reader
- The form will not save in other pdf readers, for example Preview or Foxit on a PC

Emailing the form

- Email the form to: Veterans-UK@mod.gov.uk

Posting the form

- If you wish to post the form, please print after completion, and sign in black pen
- Post the form using the address given

We have been made aware of issues when using Apple products such as iPhone and iPad to complete this form.

You may be unable to save or re-open it due to updates to Apple products since this form was created.

Work is being undertaken to transform our forms and systems but until this is complete, we ask that you find an alternative device, if possible, or print the form and complete it by hand.

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Veterans UK
War Pension Scheme
Tomlinson House
Norcross
Thornton-Cleveleys
FY5 3WP

Freephone: 0808 1914 2 18
Overseas: +44 1253 866043
Email: Veterans-UK@mod.gov.uk

Claim for Funeral Expenses

Funeral Expenses are only payable if the claim is made within 3 months of the date of the funeral. We can only consider claims from the person who paid for the funeral, or the executor of the estate.

What you need to do

Where you are asked to provide information, please give as much detail as possible.

If you want to send us anything which you think may help your claim, please do so. We will return these things to you, but we cannot pay back any money you have spent to get this information.

Remember to send us the original death certificate or a certified copy. If you sent the original, we will send it back to you.

If you need any help completing this form Veterans Services (VS) can help. Please see our contact details above.

Help and advice

If you need any further help or advice, please let us know.

How the MOD collects and uses personal information

The Ministry of Defence (MOD) is committed to protecting the privacy and security of your personal data and the MOD Privacy notice explains your rights and provides information that you are entitled to under UK data protection legislation. It is important that you read this notice, together with any other privacy notice that may be provided when we collect or process personal information about you so that you are aware of how and why we are using such information. The MOD Personal information charter contains the standards you can expect when we ask for, hold, or share your personal information and your rights under the law.

Emailing the form

- Email the form to: Veterans-UK@mod.gov.uk

Posting the form

- If you wish to post the form, please print after completion, and sign in black pen
- Post the form to:

  Veterans UK
  Norcross
  Thornton-Cleveleys
  Lancashire
  FY5 3WP
  England

Part 1 - About you

Surname

Title

Other names

Full address

Postcode

Phone number

Date of birth

National Insurance number

Are you paying for the funeral? No Yes

How are you related to the person who died?

Are you the next of kin? No Yes

Part 2 - About the person who died

Surname

Title

Other names

Full address

Postcode

Date of birth

Date of death

National Insurance number

Part 2 - About the person who died continued

GP's name

Surgery address

Postcode

Surgery phone number

Has this person had any hospital treatment in the past 5 years? ☐ No ☐ Yes

If yes, please give details of any treatment below.

Hospital name and address	In-patient or Out-patient	Admission date	Discharge date

Part 3 - About the death

Please tell us below why you think their death was caused by service in HM Forces or war injuries

Part 4 - About the funeral

Do you know the date of the funeral? ☐ No ☐ Yes

If yes, please tell us the date

Has anyone made a claim from the Social Fund for this funeral? ☐ No ☐ Yes

If yes, what is their name and address?

Postcode

Who is paying the funeral costs?

Postcode

Part 5 - About payment

Should your claim be successful we will pay your expenses as a lump sum directly into your bank account. Please tell us your details below.

Payment details

What is the full name of you bank, building society or other account provider?

Whose name is the account in?

Sort code

Account number

Building society roll or reference number

Please complete below if your account is overseas

What is the full name of your bank?

Overseas bank sort code

Overseas account number

International Bank Account number (IBAN)

Bank Identifier Code (BIC)

Declaration

I confirm that the information I have given is accurate and complete to the best of my knowledge and belief.

I understand that the information and personal data I have provided on this form, and any information and personal data I provide subsequently may be:

- used by the MOD in connection with my claim, or subsequent reconsideration, review or appeal, under the AFCS or the Service Pensions Order (SPO) or any other schemes administered by Veterans UK.
- passed to any organisation contracted to provide medical services to the MOD and any qualified medical practitioner asked by the MOD to provide specialist advice.
- passed to the Department for Work and Pensions.
- used by the MOD and its agents in connection with all matters relating to this or future claims, or any subsequent reconsideration, review or appeal, under the AFCS or the SPO or other schemes administered by Veterans UK, and other claims against the MOD, and by other Government Departments, which have a legitimate interest in this information for example, for the prevention and detection of crime.

I understand that

- I must immediately tell the MOD of anything that may affect my entitlement to, or the amount of, an award under the AFCS, a war pension or a supplementary allowance or any survivors' benefits paid under the SPO, or an award paid under any other scheme administered by Veterans UK, including any changes of address.
- if I knowingly give false information, I may be liable to prosecution.
- the MOD and
- any doctor advising the MOD and
- any organisation contracted to provide medical services to the MOD and any doctor providing services to that organisation

may ask

- any doctor who has provided treatment and
- any hospital or similar place and
- anyone else who has provided treatment (such as a physiotherapist)

for copies of all medical records (including those in sealed envelopes) and any other information required to consider my claim, or any subsequent reconsideration, review or appeal, under the AFCS or SPO or any other schemes administered by Veterans UK.

And that the MOD may

disclose medical records, and any information about my claim, or subsequent reconsideration, review or appeal, under the AFCS or SPO or any other schemes administered by Veterans UK, to any organisation contracted to provide medical services to the MOD and any qualified medical practitioner or consultant asked by the MOD to provide specialist advice.
I understand that the information will be retained by the MOD, either as a written record, or on a secure database, and may be used in future if it is necessary to reconsider or review my claim and any award made.

I agree

- to refund any sum paid as a result of this claim in the event that an overpayment is made for any reason.

Remember
You must sign this form yourself if you can - even if someone else has filled it in for you. If a representative who acts as Power of Attorney or Appointee for the claimant is signing this form, they must enclose evidence to show that they are the legal representative.

Signature

Date