

APPLICATION OF SECONDARY LIFE ASSURED



YOUR POLICY DETAILS

Policy Number(s)

Name of Assured/Assignee

NRIC/FIN/Passport No.

TYPE OF REQUEST

- Appointment/Change of Secondary Life Assured (Please complete Section B, C and D)
- Removal of Last Appointed Secondary Life Assured (Please complete Section D)
- Effecting of Secondary Life Assured to take over as Life Assured upon Death of Life Assured (Please complete Section A, B, C and D)

SECTION A: PARTICULARS OF LIFE ASSURED

Name of Life Assured

Date of Death (DD/MM/YYYY)

Country and Place of Death (Please specify the name of hospital in the event death occurred in hospital)

Please submit a copy of Death Certificate and/or Letter from ICA (Immigration and Checkpoint Authority) on the invalidation of Deceased's Singapore NRIC/Passport in the event death occurred overseas.

SECTION B: PARTICULARS OF SECONDARY LIFE ASSURED

(AS PER LAST APPOINTMENT DURING LIFE ASSURED LIFETIME FOR EFFECTING OF SECONDARY LIFE ASSURED)

Full Name (as in NRIC/Passport)
(Please underline surname)

Salutation Mr Mrs Mdm Miss Dr

NRIC/FIN/Passport No.

Date of Birth (DD/MM/YY)

Nationality

Country of Birth

Gender Male Female

Race Chinese

Malay

Indian

Others

Marital Status

Relationship to Assured

Residential Address

Employment Status Employed

Self-employed

Unemployed/Retired

Occupation

Exact Duties

Name of Employer

Nature of Business

Annual Income

SGD

SECTION B: PARTICULARS OF SECONDARY LIFE ASSURED (continued)
(AS PER LAST APPOINTMENT DURING LIFE ASSURED LIFETIME FOR EFFECTING OF SECONDARY LIFE ASSURED)

Are you a member of senior management or a dealer/trader/counter staff/casino dealer/debt collector in the following industries? Yes No

- a. Casino or other types of gaming or gambling operations
- b. Precious metals or precious stones
- c. Money services business (excluding banks) including moneylenders, pawnbrokers, money-changing, credit loans, remittance, etc.
- d. Oil or petroleum
- e. Virtual or digital currencies

If you answered 'Yes', please complete B66 - Enhanced Customer Due Diligence Questionnaire.

SECTION C: POLITICALLY EXPOSED PERSON ("PEP") - to be completed by secondary life assured

Are you a politically exposed person (PEP) or is a **Family Member** or a **Close Associate** of a PEP? Yes No

If you have ticked 'Yes', please provide the following details.

Name of PEP

Relationship with PEP

"PEP" refers to a natural person who holds or has held prominent public functions, whether locally or internationally, which includes the roles held by a head of state, a head of government, government ministers, senior civil or public servants, senior judicial or military officials, senior executives of state owned corporations, senior political party officials, members of the legislature and senior management of international organisations.

"Family Member" refers to a parent, step-parent, child, step-child, adopted child, spouse, sibling, step-sibling and adopted sibling of the PEP.

"Close Associate" refers to a natural person who is closely connected to a PEP, either socially or professionally.

SECTION D: DECLARATION AND AUTHORISATION

Declaration of Appointment, Removal and Effecting of Secondary Life Assured

I hereby request that the person identified above be appointed the Secondary Life Assured under my Basic Policy. I hereby declare and accept that:

- a) I am the Policy Owner;
- b) I am appointing the person named above as Secondary Life Assured in his lifetime and good health and such appointment is made during the current Life Assured's lifetime;
- c) the details furnished on this form (including but not limited to those concerning the proposed Secondary Life Assured) are full, complete and accurate;
- d) this appointment shall supersede any and all prior appointments of the Secondary Life Assured;
- e) there is no coverage on the life of the Secondary Life Assured until upon the death of the Life Assured, where:
 - a. Singapore Life Ltd. ("Singlife") will determine whether or not the Secondary Life Assured will become the new Life Assured in accordance with our prevailing rules and guidelines, and if such change is approved and effected by Singlife, no death benefit shall be payable and the Basic Policy shall continue to be in force and provide cover on the life of the Secondary Life Assured; and
 - b. if Singlife does not approve and effect the change in life assured persons, the Policy shall terminate as of the death of the Life Assured and the death benefit will be paid in accordance with the Policy;
- f) my proposed appointment of the above named Secondary Life Assured is subject to Singlife's approval and the terms and conditions of the Policy; and
- g) the appointment of a Secondary Life Assured (and in the event that the Secondary Life Assured becomes the Life Assured, as the case may be) does not result in a change or transfer of policy ownership in any way.

I, the Secondary Life Assured, hereby declare that:

- a. I agree with the appointment as a Secondary Life Assured by the Policy Owner;
- b. I acknowledge that I will not be notified in the event that this appointment is revoked or when the coverage under the policy may be effected on my life upon the death of the Life Assured.

I am/We are aware that insurance is a long term commitment and I am/we are aware that I/we can seek advice from a licensed Financial Adviser Representative before I/we sign this application. Should I/we choose not to, I/we take sole responsibility to ensure that this application is appropriate to meet my/our financial needs and insurance objectives.

SECTION D: DECLARATION AND AUTHORISATION (continued)

I/We understand that by making changes to my/our policy, I/we may be losing valuable benefits and it may not be possible for me/us to obtain a similar level of protection on the same terms in the future. Buying another policy in the future could result in higher premiums and loss of specific policy features due to changes in age or health.

I/We further declare that I am/we are not an undischarged bankrupt and that I/we have committed no act of bankruptcy within the last twelve months and no bankruptcy application (including any statutory demand), receiving order or adjudication order in bankruptcy has been made against me/us during that period.

I/We have not been the subject of any proceedings of a criminal nature or have been notified of any potential proceedings or of any investigation which might lead to those proceedings, or have been convicted of a criminal offence, or is being subject to any pending proceedings which may lead to such a conviction, under any law in any jurisdiction.

Notwithstanding anything to the contrary, I/We agree at all times hereafter to indemnify and hold harmless Singlife and Singlife related group of companies (together with their respective officers, employees and agents) (each an "Injured Party") from and against all claims, losses, damages, actions, proceedings, costs, demands, liabilities (including full legal costs and expenses on a solicitor and client basis) which may be suffered or incurred by the Injured Party or asserted against the Injured Party by any person or entity whatsoever, as a result of acting in accordance with my/our instructions.

I/We acknowledge that Singlife may reject any of my/our instructions including, but not limited to, those that, in Singlife's sole and absolute discretion, are deemed incomplete, unclear or ambiguous, or if my/our signature(s) differ(s) from what was originally provided as a specimen to Singlife, and Singlife will not be responsible for any losses that may be incurred by me/us due to such rejection of any of my/our instructions.

I/We understand and agree that:

- (a) Singlife is entitled not to accept or process this application should I/we, or a person connected with the relevant Policy, be found to be a Prohibited Person. A Prohibited Person means a person or entity (including any director or direct/indirect shareholder or person having executive authority or natural persons appointed to act on my/our behalf, beneficiaries, or my/our beneficial owners or beneficiaries' beneficial owners) who is/are subject to any laws, regulations and/or sanctions administered by any regulatory authorities in any country, which have the effect of prohibiting Singlife from providing insurance coverage, transacting business with or otherwise offering any economic benefits to me/us or any other beneficiaries or assignees under the relevant Policy. As an ongoing obligation, I/we shall immediately inform Singlife if there are any changes to my/our or the identities, status/constitution/establishment, particulars and identification documents of these persons. If an application is accepted or processed by Singlife despite a person connected with the relevant Policy being a Prohibited Person, Singlife shall be entitled to block or terminate the relevant Policy at any time, whether with effect from inception of the relevant Policy or otherwise; and
- (b) Singlife shall act in accordance with the economic sanctions laws, regulations, prohibitions, resolutions, embargoes, restrictions or rules relating to individuals, entities and/or countries, that are applicable to its business operations, including but not limited to those imposed, enacted, administered or enforced by the United Nations, the United States, including without limitation, (i) the Office of Foreign Assets Control of the US Department of Treasury (**OFAC**); (ii) the United Nations; (iii) the European Commission; (iv) the United Kingdom including without limitation, His Majesty's Treasury (**HMT**); (v) Singapore, including but not limited to the Monetary Authority of Singapore (**MAS**); (vi) any other trade or economic sanctions authority or regime in any country that Singlife considers applicable; (together "**Sanctions**"). Accordingly, Singlife shall not enter into or continue with a contract or business arrangement that could potentially cause Singlife to incur risks of violating, or cause Singlife to violate, Sanctions. Singlife shall have the right to take all action that it deems appropriate to act in accordance with Sanctions, including but not limited to blocking, reporting, suspending and/or terminating Singlife's relationship with me/us and/or any sanctioned person connected with the relevant Policy, and not making or receiving payments under the relevant Policy, without any obligation to notify me/us and/or any sanctioned person under the relevant Policy in advance of taking such actions, or obtain licences from any government to enable the continuance of Singlife's relationship with me/us and or any such individual or entity.
- (c) Singlife's decision in sub-paragraphs (a) and (b) above shall be final.

For and on behalf of myself and the Secondary Life Assured, I/we consent to Singlife collecting, using and/or disclosing my/our personal data (whether contained in this form or obtained from other sources; existing data in Singlife's record or to be collected in future) for the following purposes, where applicable:

- the processing of the above transaction for any such other purposes ancillary or related to the administering of the policy(ies), account(s) and/or managing my/our relationship with Singlife; and
- for statistical, research, compliance, audit and regulatory purposes.

For and on behalf of myself and the Secondary Life Assured, I/we consent to Singlife disclosing and transferring my/our personal data to Singlife related group of companies, third party service providers, reinsurers, suppliers and intermediaries (including my/our financial adviser, where applicable), whether located in Singapore or elsewhere, for the above purposes, and managing my/our relationship with Singlife related group of companies..

SECTION D: DECLARATION AND AUTHORISATION (continued)

Where applicable, for and on behalf of myself and the Secondary Life Assured, I/we confirm that for the personal data of the Life Assured (contained in this form) that I/we have disclosed to Singlife, that I/we have prior to disclosing such personal data to Singlife, obtained the appropriate consent to:

- permit me/us to collect, use and/or disclose the Life Assured's personal data to Singlife for the above purposes;
- permit Singlife to collect, use and/or disclose the Life Assured's personal data for the above purposes; and
- permit Singlife to disclose and/or transfer the Life Assured's personal data to Singlife related group of companies, third party service providers, reinsurers, suppliers an intermediaries (including my/our financial adviser, where applicable), whether located in Singapore or elsewhere, for the above purposes, and managing my/our relationship with Singlife related group of companies.

For and on behalf of myself and the Secondary Life Assured, I/we confirm that I/we have read, understood and agree to be bound by the terms of Singlife's Data Protection Notice (which may be found on <https://singlife.com/en/pdpa>) as may be amended, supplemented and/or substituted by Siglife from time to time, and confirm that I/we am/are aware that the latest version of such terms (amended, supplemented and/or substituted version) will be posted on Singlife's website and such version shall bind me/us upon posting and/or where I/we continue to use the relevant products and services offered by Singlife to which such terms relate to.

Signature of Assured/Assignee	Name (as in NRIC/Passport)	NRIC/Passport Number
	<input type="text"/>	<input type="text"/>
	Mobile Number	Email address
	<input type="text"/>	<input type="text"/>
Signature of Secondary Life Assured	Name (as in NRIC/Passport)	NRIC/Passport Number
	<input type="text"/>	<input type="text"/>
	Mobile Number	Email address
	<input type="text"/>	<input type="text"/>
Date (DD/MM/YYYY)	<input type="text"/>	

Note:

- a) Mobile number and email address provided above will replace our records accordingly.
- b) Both the Assured and the Secondary Life Assured above the age of 16 are to sign on this Application.
- c) The Assured will declare on behalf of the Secondary Life Assured below the age of 16.
- d) Signature of Assignee are required for policies under Assignment.
- e) Signature(s) must be consistent with our record.