



ALTERATION TO APPLICATION FORM
(New Business - Individual Life and Health)

B58

A. Particulars of Life Assured / Assured

Name	:	_____
NRIC/ Passport No.	:	_____
Contract No.	:	_____

B. Amendments

*I / We hereby request that *my / our application dated _____ be altered as follows:

1. [] Change Payment Frequency
 Monthly Quarterly Half-Yearly Yearly
2. [] Change of Initial Premium Payment Method to:
 Cash / Cheque
 Credit Card (To complete the section on Visa / Mastercard Authorisation of the application form)
3. [] Change of Subsequent Premium Payment Method to:
 Cash / Cheque
 Interbank GIRO (To submit duly signed Interbank GIRO Form)
 Credit Card (To submit duly signed Credit Card Authorisation Form)
 UK Direct Debit (To submit duly signed Direct Debit Instruction Form)
4. [] Change Policy Commencement Date to : _____
5. [] Change of Monthly Benefit to : _____
6. [] Change of Benefit Payout duration to : _____
7. [] Change of Premium Payment term to : _____
8. [] Increase / Decrease of Single Premium to: _____
9. [] Increase / Decrease of Basic Sum Assured to: _____
10. [] Addition / Deletion of Supplementary Benefit(s): _____
(Please specify benefit name(s) and sum assured(s), if applicable)
11. [] Change Investment Choices(s) before commencement of policy: _____

(Please specify fund code, name(s) and allocation percentage totaling 100%)

12. [] Other Change(s), please specify: _____

C. Declaration

*I / We declare that there has been no change of *my / our health conditions and that *I / We have received no medical attention, consultation or examination whatsoever, since the date of completion of the said application.

*I / We also declare that all *my / our answers as written in the said application for life assurance are still true and
*I / We agree that the above alteration(s) and declaration(s) shall form part of *my / our application for the life assurance.

Signature of Assured

NRIC / Passport No:

Date:

** Delete as appropriate*

Signature of Life Assured / Joint Life Assured

NRIC / Passport No:

Date: