



Change of Personal Details

Part A Your details

Name of Assured / Assignee / Trustee _____ NRIC / Passport number _____ Policy number _____

Part B Alterations on Client's Personal Details

1. Correction / Change of Name / Identity Number / Nationality* to:

(Please enclose documentary evidence – photocopy of Deed Poll, Identity Card, Passport or Birth Certificate)

*For Change of Nationality: Please fill up the Declaration of US Indicia and Declaration of Tax Residency under the CRS

Declaration of US Indicia (This portion needs to be completed by Assured / Assignee / Trustee)	
Do you have one or more US Indicia*?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you give standing instructions to transfer funds to an account maintained in the US?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you give effective power of attorney or signatory granted to a person with a US address?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If **yes**, please complete the **United States of America (US) Person Declaration form** (available at <http://www.aviva.com.sg/fatca/resources-downloads.html>) and return to Aviva.

*US Resident / Citizen / Place of Birth / Taxpayer ID number / Mailing or Residential Address / Contact Number/US "in-care-of" or "hold mail" address

Declaration of Tax Residency under the Common Reporting Standard (This portion needs to be completed by Assured/Assignee/Trustee)	
Is there any change in the information that you have provided to Aviva Ltd that would result in a change in your tax residency status (for e.g. change in your residence/ mailing/in-care of address, telephone number)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If **yes**, please complete the **CRS Self-Certification Form for Individual/Entity/Controlling Person (whichever is applicable)** (available at <http://www.aviva.com.sg/CRS/resources-downloads.html>) and return to Aviva.

Signature of Assured(s)/Assignee(s)/Trustee(s)	Date
Name : _____	_____
NRIC/Passport No. : _____	
Mobile No. : _____	
Email Address : _____	

2. Change of Signature

(Please ensure that the previous signature is signed and it must be consistent with our record. Please come personally to Aviva if you are unable to sign the previous signature)

Name of Signatory	Previous Signature	New Signature	Date
NRIC/Passport No. : _____	_____	_____	_____
Mobile No. : _____			
Email Address : _____			

Note : Mobile number and email address provided above will replace our records accordingly