

Guide/FAQs on Submitting a Nomination Form for Registration

1. Who can make a nomination?

Only the policyowner of the insurance policy can make a nomination.

Muslim policyowners **are not disallowed** from **making revocable nominations**. However, they should be made aware that such nominations are subject to Muslim law. The insurer would be discharged from all liabilities as long as it makes payment to the beneficiary recognized under the Insurance Act, but that beneficiary may be required to hold the monies in trust for the beneficiaries recognized under Muslim law.

2. What you need to do before making a nomination?

Before you make a nomination or create a trust or change or revoke them under the Insurance Act, please ensure that you have read and understood the information provided in ***Your Guide to Nomination of Insurance Nominees 2015 (NOB Guide)***.

You can download the NOB Guide from:

- LIA website at <http://www.lia.org.sg>

3. How do you make a nomination?

a) Making a nomination: You must complete the prescribed nomination form and submit the original completed form to Prudential Assurance Company Singapore (Pte) Limited ("Prudential") for registration.

There are 6 forms prescribed under the Insurance Act, Insurance (Nomination of beneficiaries) Regulation 2009.

- Form 1 [Trust Nomination]
- Form 2 [Revocation of Trust Nomination]
- Form 3 [Appointment, or Revocation of Appointment, of Trustee of Policy Moneys]
- Form 4 [Revocable Nomination]
- Form 5 [Revocation of Revocable Nomination]
- Form 6 [Notice of Revocation of Revocable Nomination]

Note:

- You must read all instructions and notes stated in the nomination form before completing it with utmost due care.
- Only original copies of the nomination form can be registered.
- No amendments or corrections (e.g countersigning, correction tape, correction fluid) can be made on the form.

4. Where do you submit your nomination form?

You must submit the completed nomination form to Prudential Assurance Company Singapore (Pte) Limited via the following ways:

By Post to: Prudential Assurance Company Singapore (Pte) Limited
Privy Box No. 920427, Singapore 929292

By Hand to: Prudential Customer Service Centre
Prudential Tower #01-01, 30 Cecil St, Singapore 049712

If you have any enquiry, please call our PruCustomer Line at 1800 333 0333 or you may also email us at customer.service@prudential.com.sg

The information above is for your reference only and should not be taken as legal advice. You are advised to seek independent legal advice on the effect of your Nomination.

INSURANCE ACT 1966

INSURANCE (NOMINATION OF BENEFICIARIES) REGULATIONS 2009

FORM 5

REVOCATION OF REVOCABLE NOMINATION

PLEASE READ THE FOLLOWING BEFORE COMPLETING THIS FORM

1. This Form can only be used to revoke a revocable nomination made in respect of one relevant policy.
2. Unless the context otherwise requires, this Form must be completed in full in order for the revocation of a revocable nomination to be valid.
3. The revocation of a revocable nomination under section 133(4) of the Insurance Act 1966 ("Insurance Act") must comply with that provision, and must be carried out using this Form, in order for the revocation to be valid.
4. The revocation of a revocable nomination, if valid, will take effect from the date this Form is lodged with the licensed insurer that issued the relevant policy specified in Part 1.
5. The revocation of a revocable nomination, if valid, will apply to the entire revocable nomination.
6. In order for the revocation of the revocable nomination to be valid, this Form must be signed —
 - (a) by the policy owner; and
 - (b) by 2 appropriate signatories, both of whom must either —
 - (i) witness the signing of this Form by the policy owner in person or by means of any audiovisual link, and make the declarations in Part 2; or
 - (ii) sign this Form without witnessing the signing mentioned in sub-paragraph (i) and make the declarations in Part 2.
7. This Form must be lodged with the licensed insurer that issued the relevant policy specified in Part 1. Otherwise, the licensed insurer will not be bound to give effect to the purported revocation of the revocable nomination by this Form.

Part 1: POLICY OWNER'S INSTRUCTIONS In accordance with section 133(4) of the Insurance Act, I revoke the revocable nomination which I had previously made on _____ (DD/MM/YYYY) in respect of the relevant policy specified below.	
Policy No. or other reference of the relevant policy Where the policy number or other reference is NOT available, please provide: (a) the plan name; and (b) the Basic Sum Insured.	
Name of insurer	Prudential Assurance Company Singapore (Pte) Ltd
Name of policy owner	
NRIC or Passport No. of policy owner	
Signature^ or right thumb print* of policy owner	
Email address of policy owner**	
Date (DD/MM/YYYY)	

^ "Signature", in relation to a signatory of an electronic form, means the signatory's secure electronic signature.

* Please delete as appropriate.

** Please indicate "NIL" if it is not available.

Part 2: DECLARATIONS BY APPROPRIATE SIGNATORIES
Notes:

1. Each appropriate signatory must have attained the age of 21 years.
2. An appropriate signatory must not be a nominee or the spouse of a nominee.
3. Where the revocation of revocable nomination in Part 1 is witnessed, the date specified in this Part must be the same date as the date specified in Part 1.
4. Where the revocation of revocable nomination in Part 1 is not witnessed, the date specified in this Part must be within 7 calendar days starting on the date specified in Part 1.

Declaration:

By signing below: I confirm that to the best of my knowledge and belief —

- a. The policy owner completed and signed this Form;
- b. The policy owner understands the purpose of this Form and the effect of his or her completion and signing of this Form; and
- c. No Fraud or undue pressure has been used to induce the policy owner to revoke the nomination as set out in Part 1 of this Form.

Name of appropriate signatory	(1)	(2)
NRIC or Passport No. of appropriate signatory		
Address of appropriate signatory		
Telephone No. of appropriate signatory**		
Email address of appropriate signatory**		
Signature^ of or right thumb print* of appropriate signatory who witnessed the signing of this Form (where applicable)	<p>I confirm that I witnessed the signing of this Form.</p> <p>Wet-inked signature is required for hardcopy form.</p>	<p>I confirm that I witnessed the signing of this Form.</p> <p>Wet-inked signature is required for hardcopy form.</p>
Signature^ of or right thumb print* of appropriate signatory who did not witness the signing of this Form (where applicable)	Not Applicable	Not Applicable
Date (DD/MM/YYYY)		

^ "Signature", in relation to a signatory of an electronic form, means the signatory's secure electronic signature.

* Please delete as appropriate.

** Please indicate "NIL" if it is not available.

Do not staple. Glue all sides firmly

Please send us your application with this prepaid business reply folder.

1. Fold along the dotted lines.
2. Fold and insert your application form and any other required documents into this prepaid business reply folder.
3. Seal along the edges of this prepaid business reply folder with clear tape (do not staple).
4. Drop your sealed prepaid business reply folder into your nearest post box.

**BUSINESS REPLY SERVICES
PERMIT NO. 00364**



PRUDENTIAL ASSURANCE COMPANY SINGAPORE (PTE) LIMITED
Privy Box No. 920427
Singapore 929292

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paid by
addressee. For
posting in
Singapore only.**