AIA SINGAPORE
REQUEST FOR SECONDARY INSURED TO TAKE OVER AS INSURED (DEATH OF INSURED)

Particulars of Insured and Policy Owner/Assignee

Name of Policy Owner/Assignee:	NRIC/Passport/FIN No.:

Policy Number

A) PARTICULARS OF INSURED

Name of Insured:	Date of Birth (dd/mmm/yyyy): NRIC No. (if deceased is not a Singapore Citizen, please provide Fin/Passport No.):
1. Country and Place of death. Please specify the name of hospital if death occurred in hospital.	
2. What is the date of death?	(dd/mmm/yyyy)

Please submit a copy of Death Certificate, and Letter form ICA (Immigration and Checkpoint Authority) on the invalidation of Deceased's Singapore IC/ Passport - if death occured overseas.

B) PARTICULARS OF SECONDARY INSURED (AS PER LAST APPOINTMENT DURING INSURED LIFETIME)

Name of Secondary Insured:	Date of Birth (dd/mmm/yyyy): NRIC/FIN/Passport No.:
Gender: ◯ Male ◯ Female	Relationship to Original Owner: ◯ Self ◯ Spouse ◯ Child
Contact Number:	Country of Residence:
Identification Document (ID) Expiry Date *(if available)*	Identification Document (ID) Issuing Country
Annual Income (S$): ◯ ≤ 30,000 ◯ 30,001 – 50,000 ◯ 50,001 – 100,000 ◯ 100,001 – 150,000 ◯ 150,001 – 300,000 ◯ > 300,000	Citizenship: *if not Singaporean*
Occupation:	Company Name:
Nature of Business:	

Notes:
1) Please submit a copy of Identity Card, Birth Certificate or Passport of Secondary Insured.
2) Please submit a copy of Marriage Certificate or Birth Certificate (whichever is applicable) for proof of relationship.

PT0022366 (04/2021 03/2023 08/2026)

* P B B 0 3 2 3 0 1 0 2 0 4 *

AIA Singapore Private Limited (Reg. No. 201106386R)
Postal Address: 3 Tampines Grande #09-01, Singapore 528799
Website: www.aia.com.sg
AIA Customer Care Hotline (SG): 1800 248 8000
AIA Customer Care Hotline (Overseas): +65 6248-8000

DECLARATION

Secondary Insured

Are you a Politically Exposed Person (PEP) or related to a PEP? **Yes** **No**
If yes, please give details.

* PEP means an individual who is or has been entrusted with prominent public functions in Singapore, a foreign country or an international organisation, 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.
By "related", we mean that you, the insured, beneficiary or beneficial owner are closely connected to a PEP either socially or professionally, or are a parent, step-parent, child, step-child, adopted child, spouse, sibling, step-sibling and adopted sibling of a PEP.

RESIDENCY – Please answer according to your Citizenship/Residency that you are holding.

A. For Singapore Citizen
- A.1 Have you resided outside of Singapore continuously for at least 5 years preceding the date of Application?
- A.2 Are you currently residing in Singapore?

B. For Singapore Permanent Resident & employment pass, work permit, dependant pass or other work pass holders
Have you resided in Singapore for a total of less than 183 days in the 12 months preceding the date of Application?

C. For student pass or long term visit pass holders
- C.1 Does your pass have a duration of less than 90 days?
- C.2 Have you resided in Singapore continuously for less than 90 days during the 12 months preceding the date of Application?

D. If you do not belong to any of the above categories, please tick here

DECLARATION AND AUTHORISATION

1. I hereby request that the policy(ies) stated in this form be changed in accordance with the above application.
2. I understand and agree that application shall not be considered as effected by reason of any money paid or settlement made in payment of, or on account of any premium, until this form has been duly approved by the authorised Officer of AIA Singapore.
3. I/We understand and agree that there is no coverage on the life of the Secondary Insured until upon the death of the Insured, where:
   a. AIA Singapore will determine whether or not the Secondary Insured will become the new Insured in accordance with our prevailing rules and guidelines, and if such change is approved and effected by AIA Singapore, 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 Insured; and
   b. if AIA Singapore does not approve the change in insured persons (i.e. Secondary Insured becomes the new Insured), the Policy shall terminate as of the death of the Insured and the death benefit will be paid in accordance with the Policy.
4. I confirm that the above answers, given by me, are full, complete and true and agree that they form part of any policy issued, reinstated or amended, where these answers are, or may be, relied upon by AIA Singapore.
5. I understand and agree that the application of the Contracts (Rights of Third Parties) Act (Cap.53B) and any subsequent revision or replacement thereof is expressly excluded insofar as my policy is concerned.
6. I/We understand and agree that should a Relevant Person be found at any time to be a Prohibited Person, AIA Singapore is entitled, at its absolute discretion and without any liability to me/us, to (i) decline, block, suspend or cancel this application or any request, instruction, or transaction including any payment, transfer or receipt of money; (ii) decline to provide cover or to pay any claim or benefit under the Policy; and (iii) immediately terminate or void the Policy. AIA Singapore's decision in exercising this right shall be final. This right may only be waived in writing; no delay or failure in exercising this right shall be deemed as a waiver of the same. "Relevant Person" includes (a) persons and entities who are the policy holders, insured persons, beneficiaries, trustees, payees, or assigns; (b) their beneficial owners or affiliates; (c) (in the case of an entity) their directors, partners, or direct / indirect shareholders or persons having executive authority, or (d) natural persons appointed to act on their behalf. "Prohibited Person" includes a person or entity that is subject to any sanction, prohibition or restriction administered by any regulatory authorities in any country or jurisdiction, such that the provision of such cover, payment of such claim or provision of such benefit may in AIA Singapore's opinion expose it to any, or any risk of, sanction, prohibition or restriction. As an ongoing obligation, I/we will immediately inform AIA Singapore if there are any changes to the identities, status, constitution, establishment, particulars and identification documents of these Relevant Persons. I/we will indemnify AIA Singapore and hold it harmless from and against any and all related losses, damages, costs and/or expenses suffered and/or incurred, including but not limited to legal costs.

7. I/We hereby authorise, agree and consent to AIA Singapore, its associated persons/organisations, its and their third party service providers and its and their representatives, whether within or outside Singapore (collectively "AIA Persons") to collect, use, disclose, store, retain and/or process (collectively, "Use") all personal data and information ("Personal Data") that had/has been provided to AIA Persons and/or that AIA Persons possess about me/us (whether from me/us or a third party), in the manner and for the purposes described in the AIA Privacy Policy Statement ("Statement"), including but not limited to, processing of this Application/form and/or to provide subsequent advice or services to me/us in relation to this Application/Policy/form/AIA Vitality Programme and/or any other existing or future policy/policies/programmes that I/we may hold/participate with AIA Singapore. Without prejudice to the foregoing, I/we agree to comply with the terms of the Statement, including where such Statement is amended from time to time by AIA Singapore in accordance with its terms. Where Personal Data of another person is disclosed by me/us, I/we represent and warrant that I/we have obtained the consent of the individual concerned, except to the extent such consent is not required under relevant laws: (i) to collect such Personal Data; (ii) to disclose such Personal Data to the AIA Persons; and (iii) for the AIA Persons to Use such Personal Data in the manner and for the purposes described in the Statement. I/We hereby specifically waive (on our own behalf and on behalf of each such other person, and I/we represent and warrant that such other person has granted me/us authority to so waive) any right to bring a claim of any nature against any of the AIA Persons in respect of any above-mentioned Use and/or any Use of Personal Data in the nature of or for any of the purposes described above or in the Statement. I/We hereby agree to indemnify AIA Persons for all losses and damages that AIA Persons may suffer in the event that I/we are in breach of any representation and warranty provided by me/us herein. This authorisation shall bind my/our successors and assignees, and remains valid, notwithstanding death, irrespective of whether or not my/our Application/form is accepted by AIA Singapore. A photocopy of this authorisation shall be valid and effective as the original.

Warning: If a material fact is not disclosed in this application form, any application may not be valid. If you are in doubt as whether a fact is material, you are advised to disclose it. This includes any information that you may have provived to the Financial Service Consultant/Insurance representative but was not included in this application, Please check to ensure you are fully satisfied with the information declared in this application. Additionally and without prejudice to the parties' right and abligations whether under law or otherwise, following the submission of your application, you must continue to diclose any and all material facts that may arise or which have changed from the information you had provided.

Signature of Secondary Insured
(not required for child age 15 and below)

Date

Signature of Policyowner*/Assignee

Date

*Contact No. :

*** We will call you at this number if we need any clarifications regarding your request. This contact number will not be updated into our records. If you wish to update your contact details, please complete the Update of Address & Contact Details form.**

AIA Consultant / Insurance Representative's Name

AIA Consultant / Insurance Representative's Code

AIA Consultant / Insurance Representative Unit Name

Mobile No.

AIA Singapore Private Limited (Reg. No. 201106386R)
AIA Customer Service Centre, 1 Finlayson Green, Singapore 049246
Monday – Friday: 8.45am – 5.30pm
AIA Customer Care Hotline: 1800 248 8000 AIA.COM.SG

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Have you

- ☐ *Indicated your Policy No(s)?*
- ☐ *Signed and dated all forms/letters?*
- ☐ *Obtained the name, I/C no, & signature of a witness who is not related to you?*

To avoid any delays, please also ensure that your signature is executed in the same manner as our records. You may want to refer to the application form in your contract for a specimen of the original signature.

Please fold along dotted line

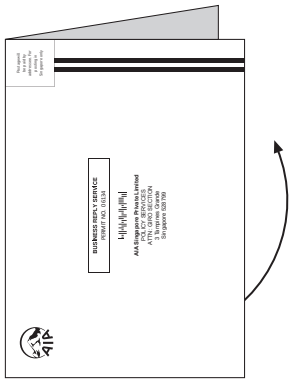
Postage will be paid by addressee. For posting in Singapore only.

BUSINESS REPLY SERVICE
PERMIT NO. 06134

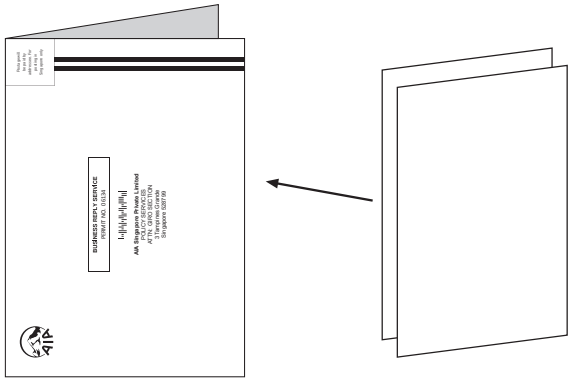
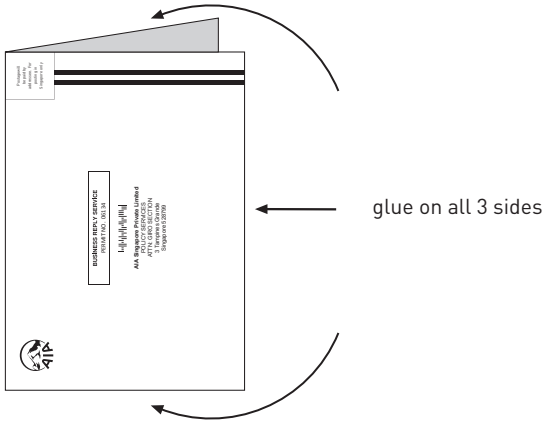
AIA Singapore Private Limited
POLICY SERVICES
3 Tampines Grande #09-01
AIA Tampines
Singapore 528799

How to use this postage-paid return envelope:

1) Fold this in half with the mailing details exposed



2) Attach your supporting documents within



3) Seal all 3 sides with glue encasing your supporting documents and mail