

AIA SINGAPORE PRIVATE LIMITED REVOCATION OF APPOINTMENT OF TRUSTEE NOTICE OF DEATH OF TRUSTEE APPOINTMENT OF NEW OR ADDITIONAL TRUSTEE(S) (S73 CLPA POLICY)

Particulars of Insured and Policy Owner			
Name of Insured			NRIC/Passport/FIN No.
Name of Policy Owner (if different from Insured)			NRIC/Passport/FIN No.
Name of surviving/continuing Trustee(s) (if different from Policy Own	ner) #		NRIC/Passport/FIN No.
# For additional surviving/continuing Trustees, please insert partic	culars in additional s	sheets to be attached	to this Form
To additional surviving/continuing Trustees, please insert partic	culais ili additional s	sneets to be attached	to this rolli.
Policy Number			
A. Notice of Revocation of Appointment of Trustee			
I, the abovenamed Policy Owner, of the above Policy, hereby give notice to revoke the appointment of the person(s) named in Section B as Trustee(s) as previously appointed in accordance with Section 73 of the Conveyancing and Law of Property Act, Chapter 61, Singapore ("CLPA") for the above Policy ("Outgoing Trustee(s)").			
Please tick one of the boxes below.			
As there are remaining Trustee(s) in this Policy, I do not v	wish to appoint a ne	ew Trustee(s) in place	of the Outgoing Trustee(s).
By this memorandum, following the revocation of appointment of Trustee(s) named in Section B below, I, hereby appoint the person(s) named in Section E as the new Trustee(s) of the above Policy, such appointment to take effect immediately following the revocation, with similar powers as granted to Trustees previously appointed under Section 73 of the CLPA.			
B. Signature and Name(s) of Trustee(s) Whose Appoi	intment is Revoked	d	
I/We hereby agree to the revocation of appointment of myself/our			
Signature of Trustee 1 or whose appointment is hereby revoked	Si	ignature of Trustee 2 of	or whose appointment is hereby revoked
	Γ		
Date		Date	
Name of Outgoing Trustee 1	N:	ame of Outgoing Trus	tee 2

	C. Notice of Death of Trustee		
I, the a	abovenamed Policy Owner, hereby give notice of the death of the trustee whose particulars appear	ar as follows:	
(Please	insert particulars and attach supporting documents such as Death Certificate or certified extract.)		
Name	of Deceased Trustee	Date of Death	
Name	(s) of Administrator or Executor of Estate of Deceased Trustee (if applicable)		
Please	e tick one of the boxes below.		
riease	e tick one of the boxes below.		
	As there are remaining Trustee(s) in this Policy, no new Trustee will be appointed in place of the deceased Trustee.		
П	By this memorandum, the surviving or continuing Trustee(s) or their personal representative(s) h	ereby appoint(s) the new Trustee(s), whose	
ш	particulars and signature(s) appear in Section E and signature(s) below in place of the decease	ed Trustee, such appointment to take effect	
	immediately following the death of the deceased Trustee.		
	D. Appointment of New or Additional Trustee(s)		
		- · · · · · · · · · · · · · · · · · · ·	
Ш	By this memorandum, I hereby appoint the person(s) named in Section E as the additional or new Trustee(s) of the above Policy, such appointment to take effect as of the date of the Consent of the new or additional Trustee(s) as specified next to their respective signatures,		
	with similar powers as granted to trustees previously appointed under Section 73 of the CLPA.		
[]	E. Consent of New Trustee(s) to be Appointed		

I/We, expressly consent to act as trustee(s) in respect of the above Policy. I/We further:-

- 1) 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.
- 2) agree and consent to furnish any information and/or document(s) requested for by AIA Singapore for the purpose of processing this form, including but not limited to information and/or document(s) in connection with the paragraph above on Prohibited Persons, and further understand and agree that AIA Singapore is entitled not to accept or process this form should such information or document as required be withheld or is not furnished; and
- 3) 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 Personal Data Policy ("PD Policy"), 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 PD Policy, including where such PD Policy 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 PD Policy. 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 PD Policy. 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.

Signat	ure of NEW Trustee 1		
Date			
Partic	ulars of NEW Trustee 1		
Name	of new Trustee		NRIC/Passport/FIN No.
Occup	ation	Contact No.	
		(Country Code)	(Area Code + Telephone Number)
Addres	ss of new Trustee		
	- Developed Devidence Address (f. 17. 17. 17. 17. 17. 17. 17. 17. 17. 17		
Foreigi	n Permanent Residence Address (If not applicable, please state "Nil")		
<u>Declar</u>	ation on U.S. Person Status		
	I/We hereby declare and agree that I am/we are not a "U.S. person" for U.S. federa or on behalf of a U.S. person. I/We understand that AIA Singapore, believing this s this statement is false, AIA Singapore reserves the right and shall be entitled to compensation to me/us in consideration of such cancellation or termination as materials.	tatement to be tancel or termina	rue, will rely on it and act on it. In the event ate this Policy/Policies and pay reasonable
	I/We agree to notify AIA Singapore within 30 days of any change in my/our status tax. I/We agree to indemnify AIA Singapore in respect of any false or misleading i federal income tax purposes.		
	I/We hereby declare and agree that I am/we are a "U.S. person" for U.S. federal in	ncome tax purp	oses.
	I/We agree to notify AIA Singapore within 30 days of any change in my/our status tax. I/We agree to indemnify AIA Singapore in respect of any false or misleading i federal income tax purposes.		

Declaration On Common Reporting Standard

Note: Please submit W-9 form to us.

I/We acknowledge that AIA Singapore Private Limited (AIA Singapore) is a reporting Singaporean financial institution as defined in the Income Tax (International Tax Compliance Agreements)(Common Reporting Standard) Regulations 2016 with reporting obligations to the Comptroller of Income Tax (Comptroller) under the Income Tax Act, Chapter 134, Singapore (Income Tax Act), and its regulations. I/We warrant that the information provided in this Application Form is true, complete and correct and understand and agree that AIA Singapore will rely on such information given by me/us in fulfilling its reporting obligations to the Comptroller.

Where I/we have furnished information concerning a third party (including but not limited to a Controlling Person), I/we confirm that such information has been provided to me/us directly or indirectly by the third party, and I/we know or have reason to believe that such information is not false or misleading in any material particular.

I/We understand and accept that should any information furnished by me/us be known to be false or misleading in any material particular, I/we may be prosecuted under the Income Tax Act for an offence which carries a penalty of a fine of up to \$\$10,000 and/or imprisonment of up to two (2) years or such other penalties as may be prescribed under the Income Tax Act or its regulations, or any re-enactment or replacement thereof, at the time of commission of the offence.

I/We further undertake to notify AIA Singapore within 30 days of any change to my/our country of residence for tax purposes or TIN (if any), and to complete, sign and submit to AIA Singapore my/our relevant particulars in the format prescribed by AIA Singapore in order for it to fulfil its reporting obligations under the Income Tax Act. I/we further undertake to provide AIA Singapore any documents and information that may be reasonably required in relation to the change of my/our country of residence for tax purposes.

I/We acknowledge and accept that AIA Singapore will rely on the self-certification relating to the Policyholder's country of tax residence contained in this Application as applicable to all policies and products issued to the same person(s), and any information in any earlier self-certification inconsistent with the information provided above will be disregarded for the purposes of fulfilling its reporting obligations to the Comptroller.

Note: Do note that a separate Self-Certification Form is required for the Trustee.



Signa	ture of NEW Trustee 2		
Date			
Partic	ulars of NEW Trustee 2		
Name	of new Trustee		NRIC/Passport/FIN No.
Occup	ation	Contact No.	(Area Code + Telephone Number)
Addre	ss of new Trustee	(**************************************	
Foreig	n Permanent Residence Address (If not applicable, please state "Nil")		
<u>Decla</u>	ration on U.S. Person Status		
	I/We hereby declare and agree that I am/we are not a "U.S. person" for U.S. federa or on behalf of a U.S. person. I/We understand that AIA Singapore, believing this s this statement is false, AIA Singapore reserves the right and shall be entitled to compensation to me/us in consideration of such cancellation or termination as materials.	tatement to be tancel or termina	true, will rely on it and act on it. In the even ate this Policy/Policies and pay reasonable
	I/We agree to notify AIA Singapore within 30 days of any change in my/our status tax. I/We agree to indemnify AIA Singapore in respect of any false or misleading i federal income tax purposes.		
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* If insufficient space because more than 2 new/additional Trustees are appointed, please use additional sheets to be attached to this Form.

Declaration On Common Reporting Standard

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Where I/we have furnished information concerning a third party (including but not limited to a Controlling Person), I/we confirm that such information has been provided to me/us directly or indirectly by the third party, and I/we know or have reason to believe that such information is not false or misleading in any material particular.

I/We understand and accept that should any information furnished by me/us be known to be false or misleading in any material particular, I/we may be prosecuted under the Income Tax Act for an offence which carries a penalty of a fine of up to \$\$10,000 and/or imprisonment of up to two (2) years or such other penalties as may be prescribed under the Income Tax Act or its regulations, or any re-enactment or replacement thereof, at the time of commission of the offence.

I/We further undertake to notify AIA Singapore within 30 days of any change to my/our country of residence for tax purposes or TIN (if any), and to complete, sign and submit to AIA Singapore my/our relevant particulars in the format prescribed by AIA Singapore in order for it to fulfil its reporting obligations under the Income Tax Act. I/we further undertake to provide AIA Singapore any documents and information that may be reasonably required in relation to the change of my/our country of residence for tax purposes.

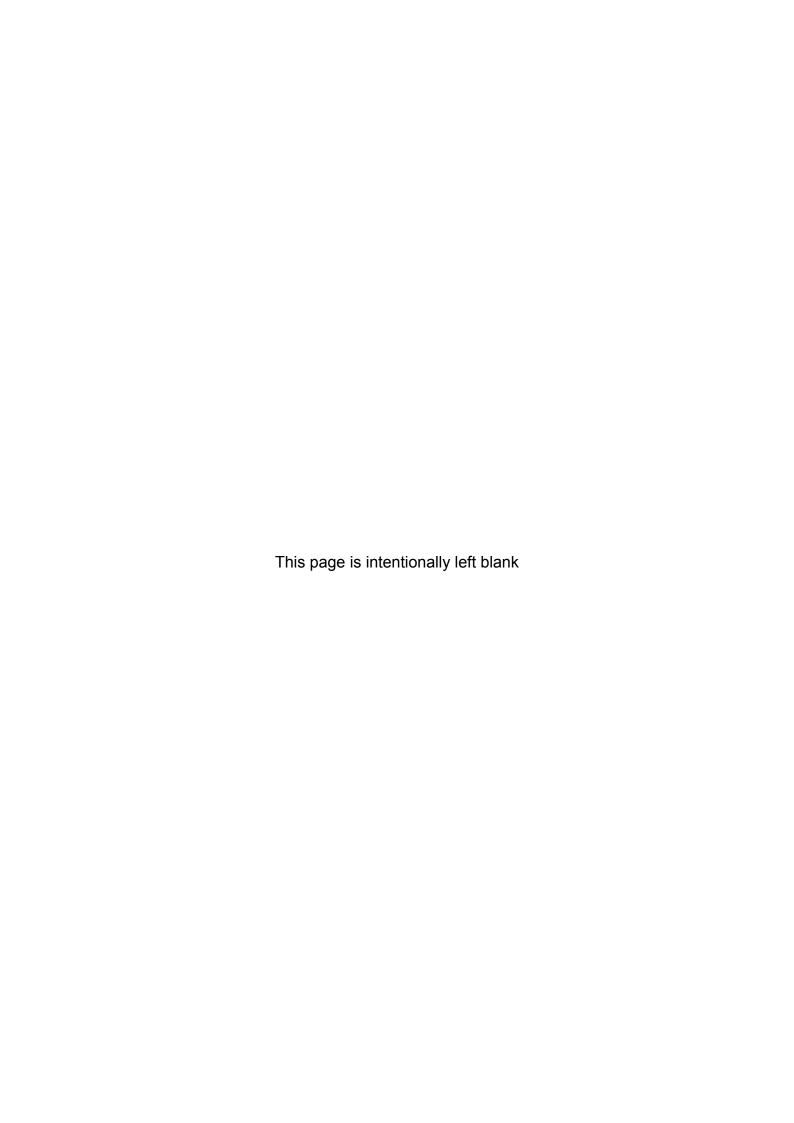
I/We acknowledge and accept that AIA Singapore will rely on the self-certification relating to the Policyholder's country of tax residence contained in this Application as applicable to all policies and products issued to the same person(s), and any information in any earlier self-certification inconsistent with the information provided above will be disregarded for the purposes of fulfilling its reporting obligations to the Comptroller.

Note: Do note that a separate Self-Certification Form is required for the Trustee.



Remarks	
Declaration and Authorisation	
providers and its and their representatives, whether within or ou and/or process (collectively, "Use") all personal data and information Persons possess about me/us (whether from me/us or a third per ("PD Policy"), including but not limited to, processing of this Appthis Application/Policy/form/AIA Vitality Programme and/or any of AIA Singapore. Without prejudice to the foregoing, I/we agree to from time to time by AIA Singapore in accordance with its terms. warrant that I/we have obtained the consent of the individual coto collect such Personal Data; (ii) to disclose such Personal Data manner and for the purposes described in the PD Policy. I/We he and I/we represent and warrant that such other person has grante the AIA Persons in respect of any above-mentioned Use and/or a or in the PD Policy. I/We hereby agree to indemnify AIA Persons breach of any representation and warranty provided by me/us here	A Singapore, its associated persons/organisations, its and their third party service itside Singapore (collectively "AIA Persons") to collect, use, disclose, store, retain ation ("Personal Data") that had/has been provided to AIA Persons and/or that AIA arty), in the manner and for the purposes described in the AIA Personal Data Policy oblication/form and/or to provide subsequent advice or services to me/us in relation to the existing or future policy/policies/programmes that I/we may hold/participate with comply with the terms of the PD Policy, including where such PD Policy is amended Where Personal Data of another person is disclosed by me/us, I/we represent and incerned, except to the extent such consent is not required under relevant laws: (i) at the AIA Persons; and (iii) for the AIA Persons to Use such Personal Data in the preby specifically waive (on our own behalf and on behalf of each such other person, and me/us authority to so waive) any right to bring a claim of any nature against any of any Use of Personal Data in the nature of or for any of the purposes described above for all losses and damages that AIA Persons may suffer in the event that I/we are in erein. This authorisation shall bind my/our successors and assignees, and remains ur Application/form is accepted by AIA Singapore. A photocopy of this authorisation
Signature of Policy Owner	Signature of Surviving/Continuing Trustee(s) other than the Policy Owner
Date	Date
Signature and Particulars of Witness/FSC/IR	
I confirm that this form was completed and signed in my present	ce.
Signature of Witness/FSC/IR	
Date	
Name of Milinese	NDIO/D //FINN
Name of Witness	NRIC/Passport/FIN No.
Address of Witness	Contact No.
FSC Declaration (To be completed by FSC Only)	
roo beclaration (to be completed by 130 only)	
FSC/IR's Name FSC/IR's Code	FSC/IR Unit Name Mobile No.
This Form is provided for the convenience of policy owners on	y and AIA Singapore is not responsible for the validity, legality or sufficiency of this
Form. Policy Owners are advised to consult their own legal adv	

Page 5 of 6



r contract for a specimen of the original signature.	201
ni mrot noincras as our records. You may want to refer to the application form in	uvs
sht ni betures, please also enure that your signature is executed in the	Q_L
Obtained the name, I/C no, & signature of a witness who is not related to you?	
Serottol all forms/letters?	
Indicated your Policy No(s)?	
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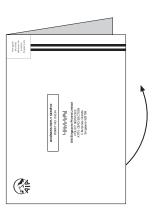
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AIA Singapore Private Limited

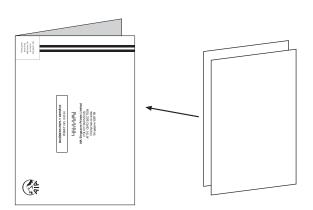
POLICY SERVICES
3 Tampines Grande #09-01
AIA Tampines
Singapore 528799

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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

