

Language Written

O English

O Chinese

O Malay

○ Tamil ○ Other Language

NTUC Income Insurance Co-operative Limited

Income Centre 75 Bras Basah Road Singapore 189557
Tel: 6788 1777 • Fax: 6338 1500
Email: csquery@income.com.sg • Website: www.income.com.sg



an NTUC Social Enterprise

Change of Personal Particulars Form						
For any change in Name/NRIC/FIN/Passport/Biz Reg., please specify the old/previous details.						
	Customer Information *Compulsory detail. Please	e provide.				
Please attach a clear copy of I	NRIC/FIN/Passport (front & back) for update of Name, NRIC/FIN/Passp	oort, Nationality, D	ate of Birth & Gender for verification.			
Name#						
NRIC/FIN/Passport/Biz Reg.#		Date of Birth (dd/mm/yyyy)#				
Nationality#		Country of Birth				
Marital Status	○ Married ○ Single ○ Divorce ○ Widow ○ Other	Gender# OMale OFemale				
Education	on Primary Secondary O/N Levels A Levels Diploma Tertiary (Degree & Masters) Professional/Doc					
For th	e following sections on this page, please complete only the sections	which you will like	us to update.			
Address Details						
Please attach the latest copy - Telephone/Utility Bills	of any of the following supporting documents reflecting your name - Rental Agreement - Bank Statement - Government Agence		al address. LTA, IRAS, CPF Board etc.			
Address		Postal Code				
Does the new address apply t	to all existing policies?	Country				
If you have selected No above	e, please specify the Policy No. which you do not wish the new address	s to be affected on				
Policy No.						
	Contact Details					
Please indicate a (–) if you wish to remove any of the contact details. For overseas number, please indicate "+" sign, country code + area code + contact number (e.g. +1234567890).						
Mobile No.		Home No.				
Office No.		Fax No.				
Email Address		Other Contacts				
Marketing Consent/Withdrawal						
A. Marketing Consent						
I give my consent to Income to collect, use and disclose my personal data, and contact me via the selected channels, for both rewards and privileges, marketing and promotional purposes.						
I agree that Income will use the contact particulars, including any update that I have given to Income, to contact me.						
B. Withdrawal of Marketing Consent						
I withdraw my consent to Income to collect, use and disclose my personal data, and contact me via the selected channels, for both rewards and privileges, marketing and promotional purposes.						
☐ Call ☐ Email ☐ Post ☐ Text Messages/SMS Please allow up to 30 days for your option to take effect.						
Other Preferences						
E-Statement Yes No						
	If you opt for e-statement, you will receive an email notification to view your statements (Annual Policy statement, Bonus statement, ILP statement or Loan statement) when they are available via me@income.					
Language Spoken	○ English ○ Chinese ○ Malay ○ Tamil ○ Other Languag	je				



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Tax Residency Declaration "Compulsory detail. Please provide.							
Are you solely a tax resident of Singapore? Yes, I am solely a tax resident in Singapore and do not have a foreign tax residency. My Singapore TIN is my NRIC or FIN. If your TIN is not your NRIC or FIN, please specify your TIN:							
☐ No, I am currently a tax resident in the following list of countries/jurisdictions (include Singapore, if applicable):							
No.	No. Country(ies)/Jurisdiction(s) of tax residence^		TIN	If TIN is not available, please select on the reason code (Refer to Table 1 below)			If reason B has been selected, please indicate why TIN is not available
1				ОА	ОВ	\bigcirc c	
2				ОА	ОВ	Ос	
3				ОА	ОВ	Ос	
4				ΟA	ОВ	Ос	
5				○ A	ОВ	Ос	
^ If you	are a Uni	ted States (U.S.) citizen or U.S. resident for to	ax purposes, you are requ	ired to subr	nit Form	W-9.	
Table 1							
Reason code Description							
	A This country/jurisdiction where the account holder is resident does not issue TINs to its residents.						
	The account holder is otherwise unable to obtain a TIN or equivalent number. (Please explain why you are unable to obtain a TIN if have selected this reason)				are unable to obtain a TIN if you		
	C No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not req TIN issued by such jurisdiction)			ot require the collection of the			
Please refer to the OECD website for more information on tax residency: http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency/							
		Country of Address Out	side Country of Tax F	Residency	(wher	e relevant)
Please help us to understand why your country of address indicated under Address Details is different from the country(ies) of tax residency indicated under Tax Residency Declaration.							
Tick (✓) ONE only and submit relevant supporting documents:							
No	n Reason			Tick (✓) ONE only			
1	1 Student at an education institution in the country of residential			0			
2 Working in the country of residential for less than 6 months				0			
3 On an educational or cultural exchange visitor program in the country of residential for less than 6 months					0		
4	4 Regular travel between jurisdictions for work and home					0	
5	5 Others – Please specify:				0		



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Income recognises its obligations under the Personal Data Protection Act 2012 (PDPA) which includes the collection, use and disclosure of personal data for the purpose for which an individual has given consent to.

The personal data collected by Income includes all personal data provided in this form, or in any document provided, or to be provided to us by you or your insured persons or from other sources, for the purpose of this insurance application or transaction. It includes all personal data for us to evaluate or administer this application or transaction. For example, if you are applying for an insurance policy, in addition to the personal data provided in the application form, the personal data will also include any subsequent information we collect on health or financial situation, or any information that is necessary for us to decide whether to insure and on what terms to insure, such as test results, medical examination results, and health records from medical practitioners or other insurance companies. You may not alter any of the wordings in this 'Personal data collection statement'. Any attempt to do so will be of no effect.

Purpose of collection

We may collect and use the personal data to: (a) carry out identity checks; (b) communicate on purposes relating to an application or policy; (c) provide ongoing services and respond to your inquiries or instructions; (d) make or obtain payments; (e) recover any debt owed to us; (f) conduct research and statistical analysis; (g) coach employees and monitor for quality assurance; (h) comply with all applicable laws, including reporting to regulatory and industry entities; and (i) inform you of our philanthropic and charity initiatives, i.e. OrangeAid, including soliciting donations, acknowledging donations, and facilitating tax exemption.

Disclosure of personal data

We may disclose personal data belonging to you and your insured persons for the purposes set out in Section 1 above to these parties: (a) your financial advisers, insurance broker, association, employer or group policyholder; (b) local or overseas service providers to provide us with services such as printing, mail distribution, data storage, data entry, marketing and research; (c) debt collection agencies; (d) financial institutions; (e) industry associations; and (f) regulators, law enforcement and government agencies.

Consequence of withdrawing consent to the collection, use and disclosure of personal data

You may refuse or withdraw your consent for us to collect, use or disclose your personal data and your insured persons' personal data by giving us reasonable notice so long as there are no legal or contractual restrictions preventing you from doing so. For example, you may withdraw your consent for your personal data to be used for marketing purposes, and this withdrawal will not affect our ability to provide you with the products and services that you asked for or have with us.

But if you withdraw your consent for us to use your personal data for your insurance matters, this will affect our ability to provide you with the products and services that you asked for or have with us, including preventing us from keeping your insurance cover in force or properly assessing and processing your claim. Withdrawing such consent will require you to surrender or terminate all your policies with us.

Access and correction rights

You can request access to any personal data of yours that we have, and request to know how it is being used and disclosed for the last 12 months to the extent your right is allowed by law. If we allow you access, we may charge you a reasonable fee. You also have the right to request correction of your personal data. You may make your request to access or correct your personal data by writing to: The Data Protection Officer, Income Centre, 75 Bras Basah Road, Singapore 189557. Alternatively, you can email to: DPO@income.com.sg

Your Declaration and Agreement						
I confirm that I understand and agree to the 'Personal Data Collection Statement'.						
Name of Policyholder Signatur	e and Date					
Parental Permission						
If you are below 18 years old, your Parent/Legal Guardian must complete this section. I give permission for my child/ward to: 1. change the Personal Particulars; 2. agree and consent to the 'Personal Data Collection Statement'; and 3. select the preferred option under 'Marketing Consent'						
Name of Parent/Legal Guardian	NRIC No.					
Relationship to Child Parent (Please send a copy of your NRIC) Legal Guardian (Please provide legal documents showing proof as Legal Guardian)	Signature of Parent/Legal Guardian and Date					