

Deed of Revocation

(FOR SECTION 73 CLPA – CONSENT BY TRUSTEE & BENEFICIARY)

This Deed of Revocation is made on _____ (dd/mm/yyyy).

	Name (as in NRIC/Birth Certificate/Passport)	NRIC/Birth Certificate/Passport No.
Policyholder		
Trustee(s)	(i)	
	(ii)	
	(iii)	
	(iv)	
Beneficiary(ies)	(i)	
	(ii)	
	(iii)	
	(iv)	
	(v)	

Policy No: _____, Plan Name: _____ issued by NTUC Income Insurance Co-Operative Limited.

The above Parties agree as follows:

1. The Policyholder wishes to revoke the trust created on _____ (dd/mm/yyyy) under Section 73 of the Conveyancing and Law of Property Act, Singapore (“the Trust”), of the Policy and all monies assured or payable under the Policy (“the Trust Property”) in favour of the Beneficiary(ies).
2. The Beneficiary(ies), being of full legal age and capacity, and the Trustee(s) of the Trust Property, consent to the revocation of the Trust.
3. The Beneficiary(ies) absolutely renounces, disclaims and divests all rights, interests, and title to the Trust Property (“the Beneficial Interests”), and absolutely assigns the Beneficial Interests to the Policyholder.
4. The Trustee(s) absolutely assigns all rights, interests, and title to the Trust Property (“the Legal Interest”) to the Policyholder.
5. The Beneficiary(ies) further consent to the release and discharge of the Trustee(s) upon the absolute assignment of the Legal Interests to the Policyholder.

IN WITNESS WHEREOF the above parties have set their hands and seals on the date first written above.

Part 1: The Policyholder

Name of Policyholder (as in NRIC/Passport)	Signature
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Part 2: The Trustee(s)

(i) Name of Trustee (as in NRIC/Passport)	Signature
(ii) Name of Trustee (as in NRIC/Passport)	Signature
(iii) Name of Trustee (as in NRIC/Passport)	Signature
(iv) Name of Trustee (as in NRIC/Passport)	Signature

Part 3: The Beneficiary(ies)

(i) Name of Beneficiary (as in NRIC/Passport)	Signature
(ii) Name of Beneficiary (as in NRIC/Passport)	Signature
(iii) Name of Beneficiary (as in NRIC/Passport)	Signature
(iv) Name of Beneficiary (as in NRIC/Passport)	Signature
(v) Name of Beneficiary (as in NRIC/Passport)	Signature

Part 4: The Witnesses

- a. There must be at least 2 witnesses;
b. Each witness must have attained the age of 21 years

(i) Name of Witness (as in NRIC)	NRIC No. of Witness	Home No. Mobile No.
Address of Witness		Signature I confirm that Parts 1, 2 and 3 (where applicable) of this Form were signed in my presence.
(ii) Name of Witness (as in NRIC)	NRIC No. of Witness	Home No. Mobile No.
Address of Witness		Signature I confirm that Parts 1, 2 and 3 (where applicable) of this Form were signed in my presence.

Disclaimer:

This is a specimen form. Income does not accept any liability or responsibility arising from the use or reliance of this form, or for the validity or legality of this renunciation. It is recommended that you consult a lawyer if you have any doubt as to the use of this form or as to the suitability of the form in your particular case.

Deed of Release & Indemnity

(FOR SECTION 73 CLPA – RELEASE AND INDEMNITY BY BENEFICIARY AND TRUSTEE, TO BE USED WITH DEED OF REVOCATION)

This Deed of Release and Indemnity is made on _____ (dd/mm/yyyy).

	Name (as in NRIC/Birth Certificate/Passport)	NRIC/Birth Certificate/Passport No.
Trustee(s)	(i)	
	(ii)	
	(iii)	
	(iv)	
Beneficiary(ies)	(i)	
	(ii)	
	(iii)	
	(iv)	
	(v)	

Policy No: _____, Plan Name: _____ issued by NTUC Income Insurance Co-Operative Limited.

The above Parties agree as follows:

1. By a Deed of Revocation dated _____ (dd/mm/yyyy), (“the Revocation”) the Beneficiary(ies), being of full legal age and capacity, and the Trustee(s), consented to the revocation of a trust created under Section 73 of the Conveyancing and Law of Property Act, Singapore (“the Trust”), of the Policy and all monies assured or payable under the Policy (“the Trust Property”) in favour of the Beneficiary(ies) by the Policyholder, _____ (Name of Policyholder).
2. Under the Revocation:
 - a. the Beneficiary(ies) absolutely renounced, disclaimed and divested all rights, interests, and title to the Trust Property (“the Beneficial Interests”), and absolutely assigned the Beneficial Interests to the Policyholder, and consented to the release and discharge of the Trustee(s) upon the absolute assignment of the Legal Interests to the Policyholder;
 - and
 - b. the Trustee(s) absolutely assigned all rights, interests, and title to the Trust Property (“the Legal Interests”) to the Policyholder;
3. The Beneficiary(ies) and Trustee(s) agree to release Income from all liabilities, actions, proceedings, accounts, claims and demands for or in respect of the Trust Property under the Trust.
4. The Beneficiary(ies) and Trustee(s) jointly and severally agree to keep Income fully indemnified against all liabilities, actions, proceedings, accounts, claims, demands, costs and expenses whatsoever, including all legal costs on a full indemnity basis, which may be made against or become payable by Income in relation to or arising out of the Revocation or the assignment of the Beneficial and Legal Interests to the Policyholder.

IN WITNESS WHEREOF the above parties have set their hands and seals on the date first written above.

Part 1: The Trustee(s)

(i) Name of Trustee (as in NRIC/Passport)	Signature
(ii) Name of Trustee (as in NRIC/Passport)	Signature
(iii) Name of Trustee (as in NRIC/Passport)	Signature
(iv) Name of Trustee (as in NRIC/Passport)	Signature

Part 2: The Beneficiary(ies)

(i) Name of Beneficiary (as in NRIC/Passport)	Signature
(ii) Name of Beneficiary (as in NRIC/Passport)	Signature
(iii) Name of Beneficiary (as in NRIC/Passport)	Signature
(iv) Name of Beneficiary (as in NRIC/Passport)	Signature
(v) Name of Beneficiary (as in NRIC/Passport)	Signature

Part 3: The Witnesses

a. There must be at least 2 witnesses; b. Each witness must have attained the age of 21 years		
(i) Name of Witness (as in NRIC)	NRIC No. of Witness	Home No. Mobile No.
Address of Witness		Signature I confirm that Parts 1 and 2 (where applicable) of this form were signed in my presence.
(ii) Name of Witness (as in NRIC)	NRIC No. of Witness	Home No. Mobile No.
Address of Witness		Signature I confirm that Parts 1 and 2 (where applicable) of this form were signed in my presence.