

## INSTRUCTIONS FOR FILLING UP THE PRESCRIBED STATUTORY FORMS

With effect from 2 Jan 2024, the nomination of beneficiaries' framework is governed by the Insurance Act and Insurance (Nomination of Beneficiaries) Regulations 2009.

The prescribed statutory forms must be completed in full in order to be valid and duly registered by us. Any statutory form that is not properly filled up and completed in full will be rejected. You are therefore advised to read the instruction notes set out in each statutory form. We would also highlight and draw to your attention our following instruction notes for your reading before filing up the statutory form.

- 1 Policy owner who has attained the age of 18 years may make a nomination.
- 2 Nomination must be submitted on the relevant statutory form. The statutory form must be properly filled up and completed in full.
- 3 The statutory form must clearly state the policy number. Where the policy number is not available, you can provide the plan name and basic sum insured of the plan.
- 4 A new statutory form must be completed in the event that there is any amendment and/or alteration. Initialling against an amendment/alteration is not allowed.
- 5 Statutory Form 1 must be signed by the policy owner in person in the presence of 2 appropriate signatories (who must make the declarations in Part 3). The date of signing this Form by policy owner and 2 appropriate signatories must be the same date.
- 6 Statutory Form 2 must be signed:
  - (a) by the policy owner;
  - (b) by either:
    - (i) any trustee of the policy moneys payable under the relevant policy specified in Part 1 (not being the policy owner); or
    - (ii) each nominee who attained age of 18 years and a parent or legal guardian (not being the policy owner) of each nominee who is below age of 18 years; and
  - (c) by 2 appropriate signatories, both of whom must either:
    - (i) witness the signing of this Form by the policy owner and each of the persons mentioned in (b)(i) or (b)(ii) (as the case may be) in person or by means of any audiovisual link, and make the declarations in Part 3 (date specified in this part must have same signed date as policy owner); or
    - (ii) without witnessing the signing mentioned (c)(i) and make declarations in Part 3 (date specified in this part must be within 7 calendar days starting on the signed date of the policy owner).

Note: Currently, electronic nomination form submission is not available. The option for "without witnessing" is not applicable for hard copy form submission.

- 7 Statutory Form 3 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 declarations in Part 3 (date specified in this part must have same signed date as policy owner); or
    - (ii) without witnessing the signing mentioned in (b)(i) and make the declarations in Part 3 (date specified in this part must be within 7 calendar days starting on the signed date of the policy owner).

Note: Currently, electronic nomination form submission is not available. The option for "without witnessing" is not applicable for hard copy form submission.

- 8 The statutory form must clearly state the full address and at least 1 contact number of each appropriate signatory.
- 9 Each appropriate signatory must have attained the age of 21 years. An appropriate signatory must not be a nominee or the spouse of a nominee.
- 10 The total shares of all nominees must add up to 100%.
- 11 If a policy owner wishes to name more than 4 nominees, additional copies of the statutory Form 1 (trust nomination) to cover all nominees must be submitted. The additional Form 1 must be completed in full by the policy owner and signed by the same 2 appropriate signatories. Attachment in any other form will be rejected.
- 12 A policy owner must appoint at least 1 trustee. However, if the policy owner wishes to appoint more than 2 trustees for a trust nomination, statutory Form 3 must be submitted. Form 3 must be completed in full and signed by the policy owner and, if submitted together with Form 1, witnessed and signed by the same 2 appropriate signatories as Form 1. Attachment in any other form is not allowed.
- 13 You cannot make a nomination if your policy falls into any of the following categories.
  - (i) Your policy is an annuity purchased under the Minimum Sum Scheme (MSS).
  - (ii) The life insured under your policy is not the same person as the policyholder.
- 14 With effect from 1 Jan 2017, Trustee(s) and Nominee(s) in a trust nomination(s) must complete and submit FATCA & CRS SELF-CERTIFICATION FORM FOR INDIVIDUAL ACCOUNT HOLDER. The form can be downloaded and printed from via <https://www.income.com.sg/policy-downloads-and-forms>. One form is required for each trustee/nominee named in the Trust Nomination Form.

If the nominee is below 18 years old, Parent/Legal Guardian must complete the FATCA & CRS SELF-CERTIFICATION FORM FOR INDIVIDUAL ACCOUNT HOLDER on behalf of the nominee.

## **FATCA & CRS SELF-CERTIFICATION FORM FOR ENTITY/INDIVIDUAL ACCOUNT HOLDER**

Income Insurance Limited ("Income") is required to collect and report certain information about an account holder's tax residency in order to comply with the Singapore Income Tax Act 1947 and related regulations including Income Tax (International Tax Compliance Agreements) (United States of America) Regulations 2015 (FATCA) and Income Tax (International Tax Compliance Agreements) (Common Reporting Standard) Regulation 2016 (CRS).

We may be obliged to share information about the policy(ies) for which you are an Account Holder with the relevant tax authorities under certain circumstances.

### **Submission of Statutory Form**

The completed and signed original statutory form must be submitted by hand or post to Income Insurance Limited (Income) for our registration. Any statutory form that is submitted by fax or email attachment will be rejected.

### **Enquiry on Nomination Matters**

For enquiry on nomination matters, please submit via [www.income.com.sg/enquiry](http://www.income.com.sg/enquiry) or approach your Financial Consultant for assistance.

**INSURANCE ACT 1966**  
**INSURANCE**  
**(NOMINATION OF BENEFICIARIES)**  
**REGULATIONS 2009**

**FORM 3**

**APPOINTMENT, OR REVOCATION OF APPOINTMENT, OF TRUSTEE OF POLICY MONEYS**

**PLEASE READ THE FOLLOWING BEFORE COMPLETING THIS FORM**

- 1 This Form can only be used to appoint, or to revoke the appointment, of one or more trustees of policy moneys payable under one relevant policy.
- 2 Unless the context otherwise requires, Parts 1, 2A and 3 must be completed in full in order to appoint a trustee of policy moneys payable under a relevant policy.
- 3 Unless the context otherwise requires, Part 1, 2B and 3 must be completed in full in order to revoke the appointment of a trustee of policy moneys payable under a relevant policy.
- 4 Unless the context otherwise requires, Parts 1, 2A, 2B and 3 must be completed in full in order to revoke the appointment of a trustee of policy moneys payable under a relevant policy, and to appoint a new trustee for those policy moneys.
- 5 An appointment of a trustee of policy moneys payable under a relevant policy must comply with section 132(12) and (14) of the Insurance Act 1966 ("Insurance Act"), and must be made using this Form, in order for it to be valid.
- 6 The revocation of the appointment of a trustee of policy moneys payable under a relevant policy must comply with section 132(12) of the Insurance Act, and must be carried out using this Form, in order for the revocation to be valid.
- 7 The appointment, or the revocation of the appointment, of a trustee pursuant to this Form, 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.
- 8 A person must agree to be appointed as a trustee before the policy owner makes the appointment, and the person may only agree so after being informed by the policy owner of the details of the relevant policy in Part 1 (Policy No. or other reference and name of insurer).
- 9 If the policy owner wishes to amend Part 1 after obtaining a person's agreement to be appointed as a trustee, the policy owner must inform the person of the amendments to Part 1 and obtain the person's agreement again.
- 10 In order for the appointment or the revocation of the appointment, of any trustee of the policy moneys payable under a relevant policy, 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 3; or
    - (ii) sign this Form without witnessing the signing mentioned in sub-paragraph (i), and make the declarations in Part 3.
- 11 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 appointment, or the purported revocation of the appointment, of any trustee of policy moneys pursuant to this Form.

<b>Part 1: POLICY OWNER'S INSTRUCTIONS</b> In accordance with section 132(12) of the Insurance Act, I – (a) appoint each person specified in Part 2A as a trustee of the relevant policy specified below./; and* (b) revoke the appointment(s) of the trustee(s) specified in Part 2B.*	
<b>Policy No. or other reference of the relevant policy</b> Where the policy number or other reference is NOT available, please provide: (a) the Plan Name; and (b) the Basic Sum Insured.	
<b>Name of insurer</b>	<b>Income Insurance Limited</b>
<b>Name of policy owner</b>	
<b>NRIC or Passport No. of policy owner</b>	
<b>Signature<sup>^</sup> or right thumb print* of policy owner</b>	
<b>Email Address of policy owner</b>	
<b>Date (dd/mm/yyyy)</b>	

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

\* Please delete as appropriate.

**Part 2A: APPOINTMENT OF TRUSTEE(S)**Notes:

- 1 A trustee who is an individual must have attained the age of 18 years.
- 2 A trustee appointed under this Part will be in addition to any trustee appointed earlier whose appointment has not been revoked.
- 3 The policy owner may be named as trustee. However, if the policy owner is named as a trustee:
  - (a) he or she will not be able to consent to the revocation of the trust nomination;
  - (b) he or she will not be able to consent to the variation of a term or condition of the relevant policy, or to the execution by the licensed insurer that issued the relevant policy of any instruction in relation to the relevant policy which may directly or indirectly alter the benefits payable under the relevant policy; and
  - (c) he or she will not be able to give a valid discharge to the licensed insurer that issued the relevant policy for any payment made, pursuant to the trust nomination, from the policy moneys payable under the relevant policy.
- 4 In this Part, “licensed trust company”, “director” and “resident manager” have the meanings given by section 2 of the Trust Companies Act 2005.

	(1)	(2)
<b>Name of trustee</b>		
<b>NRIC or Passport No. of trustee (if trustee is an individual) or Unique Entity No. of trustee (if trustee is a licensed trust company)</b>		
<b>Date of birth of trustee (if trustee is an individual) or date of incorporation of trustee (if trustee is a licensed trust company) (dd/mm/yyyy)</b>		
<b>Address of trustee</b>		
<b>Telephone No. of trustee</b>		
<b>Email Address of trustee</b>		
<b>Signature<sup>^</sup> of or right thumb print* of trustee (if trustee is an individual); or</b>  <b>Signature or right thumb print*, name and designation of authorised director or resident manager of trustee (if trustee is a licensed trust company)</b>	I agree/The abovenamed licensed trust company agrees* to be appointed as a trustee of the policy moneys payable under the relevant policy specified in Part 1.	I agree/The abovenamed licensed trust company agrees* to be appointed as a trustee of the policy moneys payable under the relevant policy specified in Part 1.
<b>Date (dd/mm/yyyy)</b>		

<sup>^</sup> “Signature”, in relation to a signatory of an electronic form, means the signatory’s secure electronic signature.

\* Please delete as appropriate.

**Part 2B: REVOCATION OF APPOINTMENT OF TRUSTEE(S)**Notes:

- 1 A policy owner may revoke the appointment of a trustee if, after the revocation of that trustee's appointment, there is at least one remaining trustee.
- 2 The revocation of the appointment of a trustee under this Part does not affect the appointment of any other trustee.
- 3 In this Part, "licensed trust company" has the meaning given by section 2 of the Trust Companies Act 2005.

<b>Name of trustee</b>	(1)	(2)
<b>NRIC or Passport No. of trustee (if trustee is an individual) or Unique Entity No. of trustee (if trustee is a licensed trust company)</b>		

**Part 3: 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 appointment/revocation of appointment of trustee(s) of policy moneys is witnessed, the date specified in this Part must be the same date as the date specified in Part 1.
- 4 Where the appointment/revocation of appointment of trustee(s) of policy moneys 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 appoint the trustee(s) or revoke the appointment of trustee(s) (as the case may be) as set out in Part 2A/Part 2B/Parts 2A and 2B\* of this Form.

<b>Name of appropriate signatory</b>	(1)	(2)
<b>NRIC or Passport No. of appropriate signatory</b>		
<b>Address of appropriate signatory</b>		
<b>Telephone No. of appropriate signatory</b>		
<b>Email Address of appropriate signatory</b>		
<b>Signature<sup>^</sup> of or right thumb print* of appropriate signatory who witnessed the signing of this Form (where applicable)</b>	I confirm that I witnessed the signing of this Form.	I confirm that I witnessed the signing of this Form.
<b>Signature<sup>^</sup> of or right thumb print* of appropriate signatory who did not witness the signing of this Form (where applicable)</b>	Not Applicable	Not Applicable
<b>Date (dd/mm/yyyy)</b>		

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

\* Please delete as appropriate.