

Income Insurance Limited | UEN: 202135698W Income Centre 75 Bras Basah Road Singapore 189557 Tel: 6788 1777 · Fax: 6338 1500

Tel: 6788 1777 · Fax: 6338 1500 Enquiries: www.income.com.sg/enquiry

GIRO cancellation form

For completion by applicant			
 Please fill in ALL fields in ink and in BLOCK letters. Please send the original form to us. If you make any changes, the policyholder, assignee or bank account holder must sign next to them. Do not use correction fluid or tape. This application will be rejected if any of the policy information provided below is incorrect. 			
Name of Policyholder/Insured/Assignee as per policy record		ID of Policyholder/Insured/Assign	ee as per policy record (Last 4 characters only)
		, , , ,	, , , , , , , , , , , , , , , , , , , ,
Policy Number For Investment-linked policies, please select Premium and/or Top Up		Bank Account Number	
1.	Premium Top up	Telephone Number	
2.	Premium Top up	(Mobile):	
3.	Premium Top up	(Work) :	
4.	Premium Top up	(Home) :	
5.	Premium Top up		
Please cancel the GIRO arr	angement for deduct	ion of premium for the abo	ove-mentioned policy
This section	is to be completed b	y Policyholder/Insured/As	signee
Signature of Policyholder/Insured/Assignee			
Signature of Policyholder/Insured/As:	signee		Date (dd/mm/yyyy)
			Date (dd/mm/yyyy)
		ted by Bank Account Holde	
		ted by Bank Account Holde	
	ction is to be comple	ted by Bank Account Holdo	
This se	Name and NRIC numbers of the request to be prosent may still take place until	er of Bank Account Holder t will cease once the GIRO arrange cessed. I the cancellation request is proces	Date (dd/mm/yyyy) ement is cancelled.
Signature of Bank Account Holder Notes: 1. If you have any existing policy loan repayment 2. Please allow sufficient lead time of 7 to 30 day 3. GIRO deduction from your existing bank account	Name and NRIC number via GIRO, this arrangements for the request to be prount may still take place untilinds in the existing bank according to the control of the control o	er of Bank Account Holder t will cease once the GIRO arrange cessed. I the cancellation request is proces	Date (dd/mm/yyyy) ement is cancelled.
Signature of Bank Account Holder Notes: 1. If you have any existing policy loan repayment 2. Please allow sufficient lead time of 7 to 30 day 3. GIRO deduction from your existing bank account	Name and NRIC number via GIRO, this arrangements for the request to be prount may still take place untill unds in the existing bank actions.	er of Bank Account Holder t will cease once the GIRO arrange cessed. the cancellation request is procest count for the premium deduction e use only	Date (dd/mm/yyyy) ement is cancelled. essed. until the GIRO cancellation letter is received.
Signature of Bank Account Holder Notes: 1. If you have any existing policy loan repayment 2. Please allow sufficient lead time of 7 to 30 day 3. GIRO deduction from your existing bank accoud 4. Policyholder is advised to maintain sufficient for this application cannot be processed (please tick) to be signature.	Name and NRIC number via GIRO, this arrangements for the request to be prount may still take place untill unds in the existing bank actions.	er of Bank Account Holder t will cease once the GIRO arrange cessed. the cancellation request is procest count for the premium deduction e use only	Date (dd/mm/yyyy) ement is cancelled.
Signature of Bank Account Holder Notes: 1. If you have any existing policy loan repayment 2. Please allow sufficient lead time of 7 to 30 day 3. GIRO deduction from your existing bank accoud 4. Policyholder is advised to maintain sufficient fuer the sum of the processed (please tick) is no signature No policy number	Name and NRIC number via GIRO, this arrangements for the request to be prount may still take place untill unds in the existing bank actions.	er of Bank Account Holder t will cease once the GIRO arrange cessed. the cancellation request is procest count for the premium deduction e use only	Date (dd/mm/yyyy) ement is cancelled. ssed. until the GIRO cancellation letter is received. Application PROCESSED
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