

### Personal Details Change Request Form

**Warning: Pursuant to Section 25(5) of the Insurance Act (Cap 142), you are to disclose in this proposal form fully and faithfully, all the facts which you know or ought to know, otherwise the policy may be void.**

Name of Policy Owner	NRIC / Passport Number / FIN	Policy Number(s)
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#### A. Change of Personal Details (Please submit a copy of NRIC or Deed Poll)

<input type="checkbox"/> Name	
<input type="checkbox"/> NRIC / Passport Number	
<input type="checkbox"/> Nationality	
<input type="checkbox"/> Change of Marital Status	

#### B. Change of Contact Details

For overseas number, please indicate "+" sign, country code + area code + contact number (e.g. +1234567890).

<input type="checkbox"/> Mobile Number	<input type="checkbox"/> Office Number
<input type="checkbox"/> Home Number	<input type="checkbox"/> E-mail Address

#### C. Change of Address Details (Please attach proof of residence)

<input type="checkbox"/> Residential Address	Block / House No _____ Unit No # _____ - _____ Road / Building _____ Postal Code _____ Country _____
<input type="checkbox"/> Mailing Address (If different from residential address)	Block / House No _____ Unit No # _____ - _____ Road / Building _____ Postal Code _____ Country _____

New mailing address applies to all existing policies with Etiqa?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Specific Policy(ies) If you have selected No, please specify the Policy Number for new address to be applied on.	

#### Declaration - Personal Data Use

By providing the information in this application form and submitting this application, I further request for and consent to the collection, use and disclosure of my personal data by Etiqa and its related corporations, its agents and Etiqa sharing such personal data with Etiqa's business partners, marketing partners and the Co-Brand Partner (as may be relevant), as well as their authorised service provider, for the purpose of this form.

Name and Signature of Policy Owner
Date:

\* We will update our records upon receipt of this form. An acknowledgement letter/email will be sent to you upon completion of updating.