

### **INSURANCE ACT**

# **INSURANCE (NOMINATION OF BENEFICIARIES) REGULATIONS 2009**

#### FORM 2

# **REVOCATION OF TRUST NOMINATION**

### PLEASE READ THE FOLLOWING BEFORE COMPLETING THIS FORM

- 1. This Form can only be used to revoke a trust nomination made in respect of one relevant policy.
- 2. Unless the context otherwise requires, this Form must be completed in full in order for the revocation of a trust nomination to be valid.
- 3. The revocation of a trust nomination must comply with section 49L(7) of the Insurance Act 1966, and must be carried out using this Form, in order for the revocation to be valid.
- 4. The revocation of a trust nomination, if valid, will take effect from the date this Form is lodged with the registered insurer that issued the relevant policy specified in Part 1.
- 5. The revocation of a trust nomination, if valid, will apply to the entire trust nomination.
- 6. The policy owner and either of the following must sign this Form in the presence of 2 witnesses, in order for the revocation of the trust nomination to be valid:
  - a. any trustee of the policy moneys payable under the relevant policy specified in Part 1 (not being the policy owner); or
  - b. each nominee who has attained the age of 18 years and a parent or legal guardian (not being the policy owner) of each nominee who is below the age of 18 years.
- 7. This Form must be lodged with the registered insurer that issued the relevant policy specified in Part 1. Otherwise, the registered insurer will not be bound to give effect the purported revocation of the trust nomination by this Form.

Part 1 INSTRUCTIONS						
In accordance with section 49L(7) of the Insurance Act, I revoke the trust nomination which I had made on in respect of the relevant policy specified below:						
Policy No. or other reference of the relevant policy  Where the policy number or other reference is NOT available, please provide:  (a) the plan name; and	(a) (b)					
(b) the basic sum insured						
Name of Insurer	Etiqa Insurance Pte Ltd					
Name of policy owner						
NRIC or passport no. of policy owner						
Signature or right thumb print of policy owner						
Date						

Page 1 of 2 EIPL/POS/Form 2/07/2022

Part 2 CONSENT OF TRUSTEE, OR OF NOMINEE(S) AND PARENT(S) OR LEGAL GUARDIAN(S) OF NOMINEE(S)



Date

Note: In this Part, "licensed trust company	", "director" a	and "resident manager" h	ave the same meanings a	as in the Trust Com	panies Act 2005.	
In accordance with section 49L(7) o revocation of the trust nomination m	f the Insuran	ce Act, I/we expressly co	nsent / the named license in respect of the rele	ed trust company exertifie	pressly consents* to the d in Part 1.	
Name and NRIC or passport No. of trustee (if trustee is an individual), or of parent of legal guardian of nominee below age of 18 years; or Name and Unique Entity No. of trustee (if trustee is a licensed trust company)	Certificate nominee (	NRIC, Birth or Passport No. of not applicable if this npleted by a trustee)	Signature or right thumb print of trustee (if trustee is an individual), nominee who has attained age of 18 years, or parent or legal guardian of nominee below age of 18 years; or Signature, name and designation of authorised director or resident manager of trustee (if trustee is a licensed trust company)		Date (if there is more than one signatory, all signatories must sign on the same date)	
Part 3 WITNESSES						
Notes:  1. Each witness must have attained the age of 21 years. 2. A witness must not be a nominee or the spouse of a nominee 3. The date specified in this Part, the date specified in Part 1 and the specified in Part 2 must be the same date.						
Name of witness		(1)		(2)		
NRIC or passport no of witness						
Address of witness						
Contact no of witness						
•			confirm that Parts 1 and 2 of this Form was gned by the policy owner in my presence.		I confirm that Parts 1 and 2 of this Form was signed by the policy owner in my presence	

Page 2 of 2 EIPL/POS/Form 2/07/2022