



INTERBANK GIRO APPLICATION FORM

Please remember



- to countersign any amendments
- that the use of correction fluid/tape is not allowed
- · to return the original form to Singapore Life Ltd.
- to provide a copy of the Accountholder's identification document if Account Holder is not the Policy Owner
- For POSB/DBS Account Holders, you can apply for GIRO via IBanking. For more details, please visit <u>www.singlife.com/premium-payments</u>.

√ Authorisation and Declaration

- 1. I/We hereby instruct and authorize Singapore Life Ltd. ("Singlife") to debit my/our bank account to pay for my policy/policies.
- 2. I/We authorise the Bank to reject Singlife's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this. The Bank may also at its discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.
- 3. I/We consent to this authorisation being in force until terminated by me/us or upon receipt of my/our written revocation to Singlife.
- 4. I/We consent to Singlife (and Singlife related group of companies) collecting, using and/or disclosing my/our personal data for the processing of the above transaction and such other purposes ancillary or related to the administering of the policy(ies), account(s) and/or managing my/our relationship with Singlife.
- 5. I/We also consent to Singlife (and Singlife related group of companies) disclosing and transferring my/our personal data to Singlife (and Singlife related group of companies) and their respective third-party service providers, reinsurers, suppliers or intermediaries, whether located in Singapore or elsewhere, for the above purposes.
- 6. On behalf of myself and all proposed insured lives, I/we consent to Singlife disclosing and transferring my/our personal data to a new insurer selected by Public Service Division (PSD), Prime Minister's Office, MINDEF or MHA for the purpose of facilitating and/or administering insurance coverage with the new insurer.
- 7. I/We have read and understood Singlife's Data Protection Notice which may be found at www.singlife.com/pdpa. Singlife's Data Protection Notice may be updated from time to time without notice. I am/We are aware that I/we should visit your website regularly to ensure that I am/we are well informed of the updates.

informed of the updates.					
1. For Applicant's Completion					
Date (dd/mm/yyyy):		Billing Organisation: Singapore Life Ltd. (Please tick where applicable)			
		,			
			MINDEF & MHA Group Insurance Scheme		
			Public Officers Group Insurance Scheme		
Bank Name (please tick one bank below):			Signature(s) / Thumbprint(s) ^ (as in Bank's Record):		
POSB/DBS OCBC UOB					
Citibank Maybank Standard Chartered					
HSBC Others:					
Bank Account Holder's Name(s): Mr/ Mdm/ Ms/ Dr					
		^For thumbprint, please visit bank's branch with your identification documents for verification.			
Bank Account Number:		Account Holder's NRIC(s):			
Name of Policy Owner	Policy Owner's	Relationship to		Reason if Account Holder	
Name of Policy Owner	NRIC No.	Account Holder		is not Policy Owner	
2. For Our Completion					
SWIFT BIC	Singapore Life Ltd.'s Bank Account No.		Singapore Life Ltd.'s Customer Reference No.		
DRCCCCCAAAA	002001006	PG			
DBSSSGSGXXX	0039001886		0686		
3. For Bank's Completion					
To: Singapore Life Ltd.					
This application(s) is hereby REJECTED (please tick) for the following reason(s):					
Signature/Thumbprint# differs/irregular# from bank's records			Wrong account number		
Signature/Thumbprint# is incomplete/unclear# Account operated by Signature/Thumbprint#					
# please delete where applicable			Outers		
piease delete wriere applicable					
Name of Approving Officer A			orised Signature	 Date	
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