



HSBC Insurance (Singapore) Pte. Limited (Reg. No. 195400150N)
 21 Collyer Quay #02-01 Singapore 049320 Monday to Friday 9:30am to 5pm www.insurance.hsbc.com.sg
 Customer Care Hotline: (65) 6225 6111 Fax: (65) 6221 2188
 Mailing Address: Robinson Road Post Office P.O. BOX 1538 Singapore 903038

FlexiPay Surrender Form

NOTE: PLEASE SUBMIT A COPY OF YOUR NRIC/PASSPORT TOGETHER WITH THIS FORM.
SHOULD THERE BE ANY CHANGES TO YOUR PARTICULARS, PLEASE COMPLETE THE PERSONAL PARTICULARS UPDATE FORM AS ATTACHED.

Name of policyowner	Policy no.	
	NRIC / Passport no.	
	Contact no.	(+) Country Code

The personal data which you are submitting is being collected for the purposes stated in the HSBC Data Protection Policy. For more information on how we manage your personal data, please visit <http://www.hsbc.com.sg/1/2/miscellaneous/privacy-and-security>.

Due to US insurance regulatory requirements, you are not to enter the US or any territory subject to US jurisdiction at the time of considering or deciding relevant matters on the insurance product, otherwise the request effected hereunder may be void.

Part A: PAYMENT OPTION

(Not applicable for policies bought under CPF Investment Scheme and Supplementary Retirement Scheme Accounts)

Please indicate the option you wish to receive your payment. If no option is selected, a cheque will be sent to you.

Cheque Direct credit to my bank * Name of Bank: _____
 Account Number: _____

* For direct credit to non-HSBC bank account, bank charges (if applicable) will be borne by you.

When the direct credit option is selected, you will need to **submit a valid copy of your bank book / statement** for account verification. We will send a cheque to you if:

- 1) you have indicated a third-party bank account or a non-Singapore bank account number, or
- 2) the direct credit option is selected without submission of a valid copy of bank book / statement.

Part B: DECLARATION AND ACKNOWLEDGEMENT

I would like to surrender the FlexiPay of the above policy. I acknowledge that I have read the important notes below and have considered the implications of surrendering the FlexiPay.

Important notes:

- (1) Any withdrawal of FlexiPay will result in the interest earned to be less than the effective guaranteed interest rate.
- (2) An early withdrawal of the FlexiPay usually involves high costs and the FlexiPay Surrender Value payable may be less than the total FlexiPay premiums paid.
- (3) If your application to surrender the FlexiPay has been accepted by *the Company, the FlexiPay Surrender Value, if any, less any amount that is due and owing to us, will be payable to you, and the Policy continues to be valid and you will be required to resume payment of the Premiums in accordance with the terms of your Policy.
- (4) You may write to us to apply for a new FlexiPay. The new FlexiPay will be based on the prevailing interest rate and terms and conditions at the point of application. We have the right to require documents or information to be provided at your expense to support your request.
- (5) Compliance with US laws and regulations and other laws having extra-territorial effect:
 - I/We, the Policyowner and Assignee, are not physically present in the US when executing the policy servicing request;
 - I/We are aware of and understand the policy servicing restrictions* applicable to any and all persons residing temporarily and permanently in the US; and
 - I/We will inform HSBC Insurance (Singapore) should I/we decide to reside in the US either temporarily or permanently
 - List of policy servicing restrictions is set out in our website <http://www.insurance.hsbc.com.sg/1/2/sghi/customer-service>

Signature of policyowner/trustee/assignee

Date

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Personal Particulars Update Form

Name of Policyowner / Trustee / Life Insured

Policy No. NRIC / Passport No.

Please complete and mail the signed form with the required documents to us.

Please allow up to 5 business days from the date of receipt of the form and supporting documents, if any, for the changes to be effected. The personal data which you are submitting is being collected for the purposes stated in the HSBC Data Protection Policy. For more information on how we manage your personal data, please visit <http://www.hsbc.com.sg/1/2/miscellaneous/privacy-and-security>.

ALL FIELDS ARE MANDATORY

UPDATE OF PERSONAL PARTICULARS (RA1) (Please complete where applicable)

Change of Address

Note: * For Residential and Permanent Address, PO Box and C/O address is not allowed. If you reside in a country where complete legal addresses do not exist, please provide a description of the location of your property (which should include exact street/ building name, apartment/ villa number, city, country and the closest landmark, etc). As a precautionary measure, acknowledgement letters will be sent to both new and old mailing address.

* New Residential Address

Postal Code Country

At this Residential Address since (DDMMYYYY)

* New Permanent Address (For foreigners, please indicate your overseas permanent address as the permanent address)

(If different from residential address)

Postal Code Country

* Mailing Address

(If different from residential address)

Postal Code Country

Please update Mailing Address for:

- ALL my policies with HSBC Insurance (Singapore) Pte Limited Only the above policies

AND (where you are also a customer of HSBC Bank (Singapore) Limited)

- ALL my accounts, products & services with HSBC Bank (Singapore) Limited My Credit Card account only

(For Joint-AND account(s), signatures of ALL account holders are required)

Change of Name

Note: Please submit a copy of Deed Poll / NRIC / Passport as proof of change

Salutation Mr Mrs Madam Ms Others _____

Last Name / Surname

First / Given Name

Change of NRIC / Passport number / Nationality

Note: Please submit a copy of Deed Poll / NRIC / Passport as proof of change

Please also submit a copy of your old NRIC / passport if your current identification document is different from that on our records.

Identification Type NRIC Passport Malaysian IC

New NRIC / Passport No Passport Expiry Date (DDMMYYYY)

Country of Birth

Multiple Nationalities Yes No

Nationality 1 Nationality 2

Nationality 3

Change of Contact Detail (s)

Mobile No Country Area Code & Telephone

Home No Country Area Code & Telephone

Office No Country Area Code & Telephone

E-mail Address

Change of Employment Details

Self Employed Sole Proprietor Business Owner Not Employed

Employed Key Controller Employee Homemaker Retired Student (Course End Date: _____)

Job Title Employer / Business Name

Nature of Business / Industry Type

Work Address

Postal Code Country

Length of Employment Year(s) Month(s) Annual Income (SGD)

DECLARATION AND AUTHORISATION

I confirm that the information provided in this form is correct and complete. By providing my signature, I authorise HSBC Insurance (Singapore) Pte. Ltd to update my particulars according to this form and disclose my information to HSBC Bank (Singapore) Limited to update their records accordingly.

Signature of Policyowner / Trustee / Life Insured

Date (DDMMYYYY)