



[You can now update your preferred payout through Great Eastern App.](#)

Simply go to Services > Payouts > Select the policy

POLICY NUMBER											DATE	
NAME OF LEGAL OWNER (1)											NRIC / FIN / PASSPORT NO.	
EMAIL ADDRESS											CONTACT NO.	
NAME OF LEGAL OWNER (2)											NRIC / FIN / PASSPORT NO.	
EMAIL ADDRESS											CONTACT NO.	

A	WHAT YOU SHOULD TAKE NOTE
1.	Form Usage and Validity <ul style="list-style-type: none"> This form is valid for one policy only. Please submit separate forms for each policy. Only exact duplicates of the original form (photocopied or downloaded) will be accepted.
2.	Signature Requirements <ul style="list-style-type: none"> Signature(s) of the Policyholder / Legal Owner(s) must match the records held by The Great Eastern Life Assurance Company Limited ("the Company").
3.	Company-Owned Policies <ul style="list-style-type: none"> Please provide a copy of the identity card or passport of the authorised signatory(ies), along with a copy of the latest ACRA Business Profile (or an equivalent document), dated within three (3) months from the date of submission. If there has been a change in authorised signatory(ies), please submit the Corporate Policyholder Authorised Signatory Form together with this request.
4.	PayNow Option <ul style="list-style-type: none"> Applicable only to SGD-denominated policies. You must have your Singapore NRIC/FIN linked to your bank account. By selecting PayNow, you also hereby authorise and instruct the Company to deposit the payment that is payable to you into your PayNow Account as well as consent to the participating banks disclosing any personal data as is reasonably required by the Company to verify your PayNow Account.
5.	Settlement Restrictions <ul style="list-style-type: none"> PayNow and Direct Crediting are not applicable for policies under CPF Investment Scheme, MediSave, or SRS Accounts. All transactions will be conducted in the policy currency. Policyholders will have to bear any charges incurred if the transacting bank is not of the same currency or if they request to transact in a different currency.
6.	If there are changes to your personal particulars, please submit the Update of Personal Particulars form together with this request.

1	PURPOSE OF PAYMENT
<input type="checkbox"/> CASH BONUS / SURVIVAL BENEFIT / MATURITY <input type="checkbox"/> ANNUITY <input type="checkbox"/> DIVIDENDS <input type="checkbox"/> OTHERS: _____	

2	MODE OF RECEIVING PROCEEDS
<input type="checkbox"/> ⁴ PayNow to Singapore NRIC / FIN linked bank account	
<input type="checkbox"/> Credit to SINGAPORE bank account - Bank Name _____ Account Number _____ <small>Attach bank statement/ passbook / e-statement showing your name and account number only (with transaction and other details blanked out) for verification.</small>	

3	DECLARATION
<p>I, the legal owner of the said policy, hereby authorise and instruct the Company to deposit the stated payment(s) that are payable to me from time to time into my Account stated above as well as to verify my Account with the respective Bank (where necessary). If the Account is denominated in a different currency from the currency of the monies payable under this policy, I understand that any amount to be credited into the Account will be subject to the bank's prevailing rates and charges.</p> <p>I undertake not to hold the Company liable for any costs, damages, losses and/or expenses that I may incur or suffer as a result of my foregoing instruction.</p>	
<div>Signature of Legal Owner (1)</div> <div>Signature of Legal Owner (2)</div>	