AUTHORISATION LETTER



For Claimant's completion :	
I would like the claim cheque (if claim is approved) to be :	
posted to me via my correspondence address.	
collected by my Distribution Representative	(NRIC No.:)
	, (
Signature of Claimant :	Policy No. :
Name of Claimant. :	NRIC of Claimant :
Handphone/ Contact No. of Claimant. :	Date:
(For Distribution Representative's completion (if Claimant has author	prised you to collect the cheque)
I would like the claim cheque to be: -	
Collected at Customer Service Reception Counter at Ground	Floor, Great Eastern Centre.
(Please note that the cheque will be posted to the Claimant if it is	not collected by the next working day after the collection date.)
Dropped into my Mail Box Noat GE@Changi.*	
Dropped into my Mail Box Noat GE House.*	
Dropped into my Mail Box Noat Nankin Row.*	
Dropped into my Mail Box No. ———at Westgate.*	
* Notes:- 1. Option is available only if there are no outstanding documents to be submitted.	tted. Cheque will be delivered to your Mail Box the next working day after 12pm.
2. For Distribution Representative who have opted for collection of cheques a will contact you when the cheque is ready	at Customer Service Reception Counter at Great Eastern Centre, Claims Department
Signature of Distribution Representative:	Agent No. :
Name of Distribution Representative:	Contact No. :
For Official Use :	
Claim Officer :	Extension No. :
Pending documents / comments :	
Observe (Letter released by	Observer / Letter reserved how
Cheque / Letter released by:-	Cheque / Letter received by:-
Signature :	Signature :
Name:	Name :
Date :	Date:

The Great Eastern Life Assurance Company Limited (Reg. No. 1908 00011G)
The Overseas Assurance Corporation Limited (Reg No. 1920 00011W)
Claims Department
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