

**HEALTH CLAIM SERVICES DEPARTMENT
MEDICAL / ACCIDENT CLAIMS
SUBMISSION OF FURTHER ORIGINAL BILLS**



Important Notes: For bills with physical size that are smaller than A4, please paste the bills on a A4 size paper.

Please select type of claims

Medical Claim (GSH/GTC/PHP/HSP)

Accident claim

Policy No(s):

Name of Life Assured:

NRIC/ FIN No.:

For Medical claims (GSH/GTC/PHP/HSP), Please state Date of Admission to Hospital:

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

For Accident claims, please state Date of Accident:

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Details of Contact Person (if clarification is required by Health Claim Services Department)

Name of Policyholder /Financial Representative:

Contact No. of Policyholder / Financial Representative:

Settlement Option

PayNow is the default settlement option up to S\$200,000 per policy:

In line with the nation's initiatives to go cheque-free by 2025, PayNow is the default settlement option up to S\$200,000 for policyholder who has registered with PayNow and has linked his/ her Singapore NRIC/ foreigner FIN to the bank account ("PayNow Account"). You hereby authorise and instruct The Company to deposit the payment that is payable to you into your PayNow Account as well as verify your PayNow Account with the respective Bank ("where necessary").

In the event that the PayNow transaction is unsuccessful, a cheque for the payment will be issued to you (additional 7 to 14 working days would be required for cheque prepared and despatched).

If you prefer to receive payment via direct credit, please indicate as follows:

Credit into my personal bank account.

Name of Bank	Branch of Bank	Bank Account Number	Account Holder's Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Claim amounts will only be direct credited to the Policyholder's bank account. Please provide a copy of your recently issued bank statement/ passbook/ e-statement showing your full name, ID/ address, bank name, branch and account number (with transaction and other details blanked out) for verification. Direct crediting will only be applicable for claims (excluding reimbursement to CPF Board) up to S\$200,000 to a local bank account. A cheque will be issued if the requirement for direct crediting is not met, or if the amount is above S\$200,000.

Date

Signature of Policyholder

