CLAIMS 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/ Passport/ FIN Number: For Medical claims (GSH/GTC/PHP/HSP), Please state Date of Admission to Hospital: For Accident claims, please state Date of Accident: Details of Contact Person (if clarification is required by Heath Claim Services Department) Name of PolicyHolder /Financial Representative: Contact No. of Policyholder / Financial Representative: **Settlement Option** PayNow is the Default settlement option PayNow is the default settlement option for policyholder who has registered with PayNow and has linked his/ her Singapore NRIC/ valid FIN and with the same FIN number registered under the Great Eastern Policy, 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"). If you prefer to receive payment via direct credit, please indicate as follows: Credit into my personal bank account. Bank Account Number Name of Bank Branch of Bank Account Holder's Name 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) to a local bank account. Signature of Policyholder Date

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