UPDATE OF PERSONAL PARTICULARS

Great Eastern
An OCBC Company

Important Notes:

1. The update of particulars will not be applicable to any Group Insurance corporate policy purchased by your employer. Please advise your Human Resource personnel to inform us of the required updates.
2. We will not accept any request to update to Financial Representative's address and/or contact details unless proof of relationship (spouse/ child/ parent), or proof of ID showing the new address is provided.
3. An acknowledgement letter will be sent to your latest address on your submitted request.
4. **Remember to sign and complete "Declaration and Authorisation by Policy Owner" on Page 3.**

YOUR PARTICULARS (Form is for 1 person only, please submit a separate form for additional request)

Policy No. (Please tick one)	☐ For **ALL** policies ☐ For specific policies :
Policy Owner's Name (as in NRIC/ Passport/ FIN)	
NRIC / Passport No. / FIN	

YOUR NEW ADDRESS

Please attach one of the below supporting documents with your name and new residential address printed on it with this request. Remember to indicate your name and ID number on this document. Please note that only the mailing address will be updated if the below supporting document is not received.

- Copy of Singapore NRIC with your new address (front and back)
- Utility Bill or Telephone Bill
- Bank Statement
- Rental Agreement
- Government Agency Letter (e.g. CPF Board, HDB, IRAS, LTA etc.)

The below address is applicable to ALL My Great Eastern Policies if policy number is not indicated.

Residential Address for the above-named policy owner

Block/ House No.		**Unit No.**		**Postal Code**	
Street					
City +					
Country	☐ Singapore ☐ Foreign, Please Specify:				
If your mailing address is different from your residential address, please provide reason below:					

Mailing Address (if different from Residential Address)

Block/ House No.		**Unit No.**		**Postal Code**	
Street					
City +					
Country	☐ Singapore ☐ Foreign, Please Specify:				

+ For foreign address only.

YOUR CONTACT DETAILS

Mobile No.	+ (Country Code) – (Area Code for foreign no.) + (Contact No.) ☐ Also use this mobile number for SMS token (for OTP)
Home No	+ (Country Code) – (Area Code for foreign no.) + (Contact No.)
Office No.	+ (Country Code) – (Area Code for foreign no.) + (Contact No.)
Email	

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YOUR PARTICULARS (Form is for 1 person only, please submit a separate form for additional request)

Policy No.	
Policy Owner's Name (as in NRIC/ Passport/ FIN)	
NRIC / Passport No. / FIN No.	

YOUR NEW SPECIMEN SIGNATURE

a. The new signature shall apply to all your policies under Great Eastern Life and Great Eastern General.
b. If you cannot recall your current signature or if your signature is a thumbprint, please visit our Customer Service Centre to request for this change. Please bring along your NRIC/ Passport for verification purpose.

Current Signature / Thumbprint (as per Great Eastern's records)	New Signature / Thumbprint

FOR OFFICIAL USE (FOR WALK-IN)

Great Eastern's Attending Officers:		Notary Public:
Name:	Name:	
Signature:	Signature:	.....
Date:	Date	Signature of Notary Public or other Officer empowered by law to administer Oaths, Affirmations or Affidavits Date:

CORRECTION / CHANGE IN PERSONAL PARTICULARS

Please attach one of the below supporting documents which reflect the detail(s) to be corrected/ changed printed on it. Remember to indicate your name and ID number on this document. For Policy Owners and Life Assured of SupremeHealth policies with premium paid using CPF Medisave Account, please maintain a valid Singapore ID number (i.e. NRIC/ FIN number) for the premium deduction from your CPF Medisave account.

Type of Change	**Acceptable supporting document.**
Name	Copy of IC (both front and back) or Copy of Passport
Date of Birth / Gender	Copy of Birth Cert, Copy of IC (both front and back) or Copy of Passport
Identification No.	Copy of IC (Singapore, Malaysia, Brunei) or Fin Card or Work Permit Card (both front and back) or Copy of Passport
Citizenship	Copy of Singapore NRIC(both front and back) or Copy of Passport

I wish to update the Personal Particulars for (please select **one**, use separate form each person):

☐ Myself ☐ My Life Assured

Name	**(Old)**			
	(New)			
DOB	DD / MM / YYYY	**Gender**	☐ Male	☐ Female
ID No.	**(Old)**			
	(New)			
Citizenship	☐ No Change	☐ My new citizenship is		

UPDATE OF PERSONAL PARTICULARS

Declaration and Authorisation by Policy Owner

I hereby confirm that the information provided by me is my own and is true, correct and accurate; and on this basis, give my authorisation to make the corrections/changes as indicated on this form.

This update does not supersede nor replace any other consents I may have previously provided to Great Eastern Persons to collect, use, and/or disclose of my/our Personal Data, with or without my/our consent, to the extent permitted under applicable law.

I agree that I will update the Company promptly of any change or addition to the information provided herein about me or the life assured, the beneficiary named in this proposal or of the policy and any other relevant persons (if any, and collectively with the life assured and the beneficiary the "Relevant Persons") as the Company may reasonably require

Signature of Policy Owner (Note: digital signature is not acceptable)	As per existing record (if any) If there is an update of your specimen signature, use your new signature. If Company, please place the company stamp and provide Name and ID No. of the authorised signatory below.	Contact No.	
		Date	
Name of authorised signatory:		ID No. of authorised signatory	

For Internal Use

Requesting Officer Name / Department/ Ext. / Signature Date: Remarks/ Instructions:	Department / Section Head Name / Department/ Ext. / Signature Date: Remarks/ Instructions:
CMDU Officer 1 Date:	CDMU Officer 2 Date: