

## DISABILITY INCOME / WAIVER OF PREMIUMS (DISABILITY) CLAIM FORM



Dear Claimant,

We are sorry to learn of your disability.

In order for us to process your claim, we require the following:

- 1) Claimant's Statement.
- 2) Clinical Abstract Application Form.
- 3) Doctor's Statement (refer to Note I below).
- 4) Copies of Payslips for the 12 months prior to the commencement of disability.
- 5) A copy of the Tax statement – IR8A form.
- 6) Copies of Medical Certificates.
- 7) Letter from employer to certify that the Claimant is not being paid during the period of disability.
- 8) A copy of the Termination Employment Letter from Employer (if available).
- 9) All available Laboratory and Test Results.
- 10) Authorisation Letter (refer to Note II below).

Once we have received all the above required documents, we will process your claim and inform you of the outcome as soon as possible.

If you need any help, please call our Customer Service hotline at 1800-248 2888 or email us at [wecare-sg@greateasternlife.com](mailto:wecare-sg@greateasternlife.com).

Note:

- I) The Doctor's Statement must be completed by your attending doctor and furnished at the expense of the claimant.
- II) Authorisation letter has to be submitted if you are authorising another party to handle the claim (including collection of cheque) on your behalf.
- III) Please continue to pay your premiums until we inform you that the claim is admitted.

Submission of Documents

Please submit all claim documents personally at our Customer Service Centre at the ground floor,  
Great Eastern Centre or, through your Distribution Representative or, by post to:

Claims Department  
The Great Eastern Life Assurance Company Limited  
1 Pickering Street  
Great Eastern Centre #01-01  
Singapore 048659