

POLICY LOAN REPAYMENT ARRANGEMENT

FOR COMPLETION BY APPLICANT

Policyholder's Name:	NRIC / Passport No.*:															
Policy No.: (Each form can only be used for loan repayment of one policy)																
Bank Accountholder's Name:	Bank Accountholder's NRIC / Passport No.*:															
Contact No.: _____ (Mobile) _____ (Home) _____ (Office)																
Name of Bank / Branch code:																
Bank Account No: (This bank account no. must be the same account as the GIRO arrangement for the policy premium payment.)																
<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td> </tr> </table>																
Please select only one of the following:																
<input type="checkbox"/> I authorise Income to DEDUCT THE POLICY LOAN REPAYMENT of the above policy from my existing GIRO account. Amount of loan repayment to be deducted: \$ _____ (Minimum \$50.00)																
<input type="checkbox"/> I authorise Income to CHANGE THE POLICY LOAN REPAYMENT AMOUNT of the above policy from my existing GIRO account. Current repayment amount: \$ _____ (Minimum \$50.00) New repayment amount: \$ _____ (Minimum \$50.00)																
<input type="checkbox"/> I authorise Income to CEASE THE POLICY LOAN REPAYMENT of the above policy from my existing GIRO account.																
_____ Policyholder's Signature	_____ Bank Accountholder's Signature(s) / Thumbprint(s) / Company Stamp* (if different from Policyholder)	_____ Date														

Note:

- a) The minimum loan repayment amount is \$50.00 and it will be deducted monthly via GIRO.
- b) If you have not received a confirmation letter within 30 days, please contact our Customer Service Officers at 6788 1122 or email us at csquery@income.com.sg.
- c) FAQ on Loan Repayment via GIRO can be found at www.income.com.sg.
- d) Please mail the original copy of the completed form to Income for processing. Photocopied forms or forms sent via email or fax will not be accepted.
- e) Any alteration of details on this form must be accompanied by a corresponding signature of the Bank Accountholder.

FOR COMPLETION BY NTUC INCOME INSURANCE COOPERATIVE LIMITED (FINANCE DEPARTMENT)

To: Applicant

This application is hereby REJECTED (please tick) for the following reason(s):

- No Signature / Thumbprint*
- No Policy No.
- GIRO account stated does not match our record
- Others: _____

Application PROCESSED (PLEASE TICK)

Name of staff	Signature of staff	Date
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