

SUPPLEMENTARY FORM FOR NON-FACE-TO-FACE (NFTF) SUBMISSION FOR NEW BUSINESS

Proposer

Name:

NRIC / Passport Number / FIN:

Proposed Life Insured

Name:

NRIC / Passport Number / FIN:

Proposer / Life Insured Declaration

I hereby confirm and agree as follows:

1. This Supplementary Form is submitted together with the Application Form for an insurance product(s) provided by Life Insurance Corporation (Singapore) Pte. Ltd. ("LICS") on the same day as this Form is dated.
2. I have received and read through the full details of the suitable product(s) recommended to me by my Advisor after he/she has performed fact finding and needs-analysis on me before recommending the product(s) to me and I am satisfied and understand the benefits of the plan, the values, key benefits and information in the Cover page, Policy Illustration and Product Summary.
3. The information provided in my Application form and all relevant supporting documents are complete and accurate and I understand that any non-disclosure shall result in the Application being rendered void if any information provided by me was incomplete, changed or has become inaccurate or misleading or if I fail to update LICS if there were changes to such information and that LICS has the right to review my Application to continue or cancel the Policy after receipt of the updated information.
4. I have read and agreed to the declarations and authorisation (if any) as stated in the Application Form to be true and accurate.

Signature of Proposer / Life Insured

Signature of Life Insured (if different from Proposer)

Date (DD / MM / YYYY)

Date (DD / MM / YYYY)

Adviser's Declaration

1. I confirm that I have after conducting fact finding and needs-analysis, presented, and explained the Cover page, Policy Illustration and Product Summary in respect of the product(s) benefits and features to the Policy Owner.
2. I declare that to the best of my knowledge all the answers provided to me by the Proposer are declared in the Application form and I have not withheld any other information which may result in this Application Form being rendered void by Life Insurance Corporation (Singapore) Pte. Ltd.
3. I further confirm that the sales advisory was completed via Non-Face-to-Face, and the identity of the Proposer and Life Insured (if any) was verified by sighting the original identity document (e.g. NRIC / Birth Certificate / Passport / FIN).
4. I have solicited this insurance business in Singapore and that all related documents were confirmed in Singapore.

Name and Signature of Adviser

Date (DD / MM / YYYY)