



# AIA SINGAPORE PRIVATE LIMITED

## RELEASE OF ASSIGNMENT / REASSIGNMENT

### Particulars of Insured and Assignee

Name of Insured

NRIC/Passport/FIN No.

Name of Assignee

NRIC/Passport/FIN/Entity Registration No.

### Policy Number

### Particulars of Policy Owner (also the Assignor)

Name of Policy Owner

NRIC/Passport/FIN/Entity Registration No.

Contact No.

(Country Code)

(Area Code + Telephone Number)

Mailing Address

Foreign Permanent Residence Address (If not applicable, please state "Nil")

### Declaration on U.S. Person Status

I/We hereby declare and agree that I am/we are not a "U.S. person" for U.S. federal income tax purposes and that I am/we are not acting for, or on behalf of a U.S. person. I/We understand that AIA Singapore, believing this statement to be true, will rely on it and act on it. In the event this statement is false, AIA Singapore reserves the right and shall be entitled to cancel or terminate this Policy/Policies and pay reasonable compensation to me/us in consideration of such cancellation or termination as may be required under Singapore laws.

I/We agree to notify AIA Singapore within 30 days of any change in my/our status as a U.S. person for the purposes of U.S. federal income tax. I/We agree to indemnify AIA Singapore in respect of any false or misleading information regarding my/our "U.S. person" status for U.S. federal income tax purposes.

I/We hereby declare and agree that I am/we are a "U.S. person" for U.S. federal income tax purposes.

I/We agree to notify AIA Singapore within 30 days of any change in my/our status as a U.S. person for the purposes of U.S. federal income tax. I/We agree to indemnify AIA Singapore in respect of any false or misleading information regarding my/our "U.S. person" status for U.S. federal income tax purposes.

Note: Please submit W-9 form to us.

PT0011008 (01/2022, 02/2023, 05/2024)



\* P 1 5 0 5 2 4 0 1 0 2 0 8 \*

**Declaration On Common Reporting Standard [This section is to be completed by Policy Owner/Assignor]**

I/We acknowledge that AIA Singapore Private Limited (AIA Singapore) is a reporting Singaporean financial institution as defined in the Income Tax (International Tax Compliance Agreements)(Common Reporting Standard) Regulations 2016 with reporting obligations to the Comptroller of Income Tax (Comptroller) under the Income Tax Act 1947, Singapore, and its regulations. I/We warrant that the information provided in this form is true, complete and correct and understand and agree that AIA Singapore will rely on such information given by me/us in fulfilling its reporting obligations to the Comptroller.

Where I/we have furnished information concerning a third party (including but not limited to a Controlling Person), I/we confirm that such information has been provided to me/us directly or indirectly by the third party, and I/we know or have reason to believe that such information is not false or misleading in any material particular.

I/We understand and accept that should any information furnished by me/us be known to be false or misleading in any material particular, I/we may be prosecuted under the Income Tax Act for an offence which carries a penalty of a fine of up to S\$10,000 and/or imprisonment of up to two (2) years or such other penalties as may be prescribed under the Income Tax Act or its regulations, or any re-enactment or replacement thereof, at the time of commission of the offence.

(For individuals)

I/We further undertake to notify AIA Singapore within 30 days of any change to my/our country of residence for tax purposes or TIN (if any), and to complete, sign and submit to AIA Singapore my/our relevant particulars in the format prescribed by AIA Singapore in order for it to fulfil its reporting obligations under the Income Tax Act. I/we further undertake to provide AIA Singapore any documents and information that may be reasonably required in relation to the change of my/our country of residence for tax purposes.

(For entities and other non-individuals)

I/We further undertake to notify AIA Singapore within 30 days of any change to the Policy Owner's or a Controlling Person's country of residence for tax purposes or TIN (if any) and to complete, sign and submit to AIA Singapore the relevant particulars of the Policy Owner or Controlling Person relating to such change in the format prescribed by AIA Singapore in order for it to fulfil its reporting obligations under the Income Tax Act. I/we further undertake to provide AIA Singapore any documents and information that may be reasonably required in relation to the change of the Policy Owner's or Controlling Person's country of residence for tax purposes.

Note: The term "Controlling Person" has the meaning given to it in the Common Reporting Standard in the Schedule to the Income Tax Act (International Compliance Agreements)(Common Reporting Standard) Regulations 2016.

I/We acknowledge and accept that AIA Singapore will rely on the self-certification relating to the Policy Owner's/Controlling Persons' country of tax residence contained in this form as applicable to all policies and products issued to the same person(s), and any information in any earlier self-certification inconsistent with the information provided above will be disregarded for the purposes of fulfilling its reporting obligations to the Comptroller.

Have you declared your tax residency with AIA before?

- No. Please complete a Self-Certification Form.
- Yes, but there are changes to my tax residency. Please complete a Self-Certification Form.
- Yes, but there are no changes to my tax residency.

*Note: Do note that a separate Self-Certification Form is required for each Policyowner/Trustee.*

**Section 1: Policies Owned by Individual [This section is compulsory for an INDIVIDUAL who owns policies.]**

Please complete Parts A and B. If there is a beneficial ownership arrangement, please provide details on the beneficial owner(s).

**Part A: Employment Details**

Occupation	Employer's Name	Nature of Business
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Annual Income (SGD)**

<input type="checkbox"/> < SGD 30,000	<input type="checkbox"/> SGD 100,001 to SGD 150,000
<input type="checkbox"/> SGD 30,001 to SGD 50,000	<input type="checkbox"/> SGD 150,001 to SGD 250,000
<input type="checkbox"/> SGD 50,001 to SGD 100,000	<input type="checkbox"/> > SGD 250,000

**Business Address**

**Part B: Declaration on Beneficial Owner(s)**

A “Beneficial Owner” means the natural person who ultimately owns or controls the customer or the natural person on whose behalf business relations are established, and includes any person who exercises ultimate effective control over a legal person or legal arrangement.

Please declare if there is a beneficial ownership arrangement:  Yes  No

Please note that a beneficiary under the policy is not a beneficial owner.

If YES, please provide the particulars of the beneficial owner(s) in the table below, as well as clear photo identification document(s) of the beneficial owner(s). We are required by law to request for the same. **Please note that the following is NOT a nomination of beneficiary(ies) under the policy.**

Name (as shown on NRIC/ FIN/ Passport)	NRIC/ FIN/ Passport No.	Date of Birth (DD/MM/YY)	Relationship to Policy Holder	Gender (M/F)	Nationality (if not Singaporean)

**Section 2: Policies Owned by Entity [This section is compulsory for an ENTITY that owns policies.]**

Please complete Parts A, B and C.

In addition to the information to be provided in Parts A, B and C (which should accord with the information lodged with registries such as the Accounting and Corporate Regulatory Authority and the Registry of Societies), please also submit the following supporting documents listed in the table below.

For changes relating to trusts, please also submit the Verification of Trust Form.

Parties Identified in this section	Documents Required for Verification Purposes
Business Entity (Policy Holder)	<ul style="list-style-type: none"> <li>Business registration information, i.e. ACRA Bizfile or Certificate of Incumbency; or</li> <li>For clubs / societies, please provide the registration document and independent documentary evidence reflecting the list of board members' names (or equivalent); or</li> <li>For charities, please provide the registration document and independent documentary evidence reflecting the list of board members' and trustees' names (or equivalent)</li> <li>Please submit a clear photocopy of the NRIC/FIN/Passport/Long Term Pass or other relevant identification documents of the beneficial owners of the Business Entity</li> </ul> <p><i>* A copy of business registration information or Certificate of Incumbency of the director / shareholder is required if the director / shareholder is not a natural person, down to the ultimate individual director / shareholder.</i></p>
Beneficial Owner / Shareholders *	
Connected Parties – Directors *	
Connected Parties – Natural Person having Executive Authority	<ul style="list-style-type: none"> <li>Independent documentary evidence (e.g. company resolution) reflecting the appointment of the natural person having executive authority</li> </ul>
Authorised Signatories	<ul style="list-style-type: none"> <li>Copy of the NRIC / FIN / Passport containing a clear photograph of the authorised signatories; <b>and</b></li> <li>Documentary evidence (e.g. list of authorised signatories) reflecting the appointment of the authorised signatories; <b>and</b></li> <li>Specimen signatures of the authorised signatories</li> </ul>



**Policies Owned by Entity (continued)**

**Part A: Declaration on Beneficial Owner(s) / Trustee(s) / Shareholder(s) of the Business Entity**

A “Beneficial Owner” means the natural person who ultimately owns or controls the customer or the natural person on whose behalf business relations are established, and includes any person who exercises ultimate effective control over a legal person or legal arrangement.

A “Trustee” means a person or firm that holds and administers property or assets for the benefit of a third party.

A “Shareholder” means a person or a company that holds at least 25% shares in a company.

For charities, please include the Trustee’s information here.

Full Name (including alias / former name)	NRIC/ FIN/ Passport No.	Date of Birth (DD/MM/YY)	Gender (M/F)	Nationality

**Part B: Declaration on Connected Parties of the Business Entity**

A “Connected Party” in relation to a company (other than a partnership) means any director and/or any natural person having executive authority in the company, and in relation to a partnership means any partner and/or manager. Examples of natural persons with executive authority include the Chairman and Chief Executive Officer of a company, and the partner and/or manager in a partnership.

**(i) Directors of the Business Entity**

Full Name (including alias / former name)	NRIC/ FIN/ Passport No.	Date of Birth (DD/MM/YY)	Gender (M/F)	Nationality

**(ii) Natural Persons having Executive Authority in the Business Entity**

Full Name (including alias / former name)	NRIC/ FIN/ Passport No.	Date of Birth (DD/MM/YY)	Gender (M/F)	Nationality	Designation

**Part C: Authorised Signatories of the Business Entity**

Full Name (including alias / former name)	NRIC/ FIN/ Passport No.	Date of Birth (DD/MM/YY)	Gender (M/F)	Nationality	Residential Address

A “Authorized signatory” means an individual or entity that has the power of signing on behalf of the business entity. Identify all individuals who are authorized to sign on behalf of the business entity.

**Declaration on Source of Wealth [This section is to be completed by Policy Owner/Assignor]**

**It is compulsory to declare the Source of Wealth for all transactions.**

<p><b>Source of Wealth</b> <i>(where your wealth is derived from)</i></p> <p>(You may tick more than 1 box)</p>	<p><input type="checkbox"/> Employment / Trade Income</p> <p><input type="checkbox"/> Investment Income</p> <p><input type="checkbox"/> Rental Income</p> <p><input type="checkbox"/> Other, please specify: <input style="width: 300px;" type="text"/></p>
---	---

**Declaration on Politically Exposed Person (PEP)\* [This section is to be completed by Policy Owner/Assignor]**

Are you a PEP or related^ to a PEP?  Yes  No

If YES, please complete a to d below.

- a. What is the name of the PEP? \_\_\_\_\_
- b. What is your relationship to the PEP? \_\_\_\_\_
- c. What official position does the PEP hold? \_\_\_\_\_
- d. During what time period was that position held? \_\_\_\_\_

# PEP means an individual who is or has been entrusted with prominent public functions in Singapore, a foreign country or an international organisation, which includes the roles held by a head of state, a head of government, government ministers, senior civil or public servants, senior judicial or military officials, senior executives of state owned corporations, senior political party officials, members of the legislature and senior management of international organisations.

^ By "related", we mean that you, or the insured, beneficiary or beneficial owner are closely connected to a PEP either socially or professionally, or are a parent, step-parent, child, step-child, adopted child, spouse, sibling, step-sibling and adopted sibling of a PEP.



## Release of Assignment

Date of Assignment to Assignee:

In consideration of all principal monies and interest due under the Assignment having been paid and satisfied (as the Assignee hereby acknowledges), I/we, the above named Assignee hereby re-assign all our/my benefits, rights, title and interest in and to the above Policy, which I/we had acquired by reason of an assignment by the Policy Owner, back to the Policy Owner. I/We hereby declare that:

- 1) as of the date of re-assignment, the Assignee shall cease to have any benefits, rights, title and interest in and to the above Policy;
- 2) I/we am/are not an undischarged bankrupt and to my/our knowledge, there are no current, pending or threatened bankruptcy proceedings against me/us (For individuals);
- 3) no winding up petition has been presented and that there are no winding up proceedings (whether voluntary or otherwise) or winding up order made in respect of us (For entities);
- 4) I/we acknowledge and accept that AIA Singapore Private Limited will deem the effective date of this Release/Reassignment to be the date of its receipt of this document, or the date inserted next to the signature of the Assignee, whichever is later.
- 5) I/We understand and agree that should a Relevant Person be found at any time to be a Prohibited Person, AIA Singapore is entitled, at its absolute discretion and without any liability to me/us, to (i) decline, block, suspend or cancel this application or any request, instruction, or transaction including any payment, transfer or receipt of money; (ii) decline to provide cover or to pay any claim or benefit under the Policy; and (iii) immediately terminate or void the Policy. AIA Singapore's decision in exercising this right shall be final. This right may only be waived in writing; no delay or failure in exercising this right shall be deemed as a waiver of the same. "Relevant Person" includes (a) persons and entities who are the policy holders, insured persons, beneficiaries, trustees, payees, or assigns; (b) their beneficial owners or affiliates; (c) (in the case of an entity) their directors, partners, or direct / indirect shareholders or persons having executive authority, or (d) natural persons appointed to act on their behalf. "Prohibited Person" includes a person or entity that is subject to any sanction, prohibition or restriction administered by any regulatory authorities in any country or jurisdiction, such that the provision of such cover, payment of such claim or provision of such benefit may in AIA Singapore's opinion expose it to any, or any risk of, sanction, prohibition or restriction. As an ongoing obligation, I/we will immediately inform AIA Singapore if there are any changes to the identities, status, constitution, establishment, particulars and identification documents of these Relevant Persons. I/we will indemnify AIA Singapore and hold it harmless from and against any and all related losses, damages, costs and/or expenses suffered and/or incurred, including but not limited to legal costs.
- 6) I/we agree and consent to furnish any information and/or document(s) requested for by AIA Singapore for the purpose of processing this form, including but not limited to information and/or document(s) in connection with the paragraph above on Prohibited Persons, and further understand and agree that AIA Singapore is entitled not to accept or process this form should such information or document as required be withheld or is not furnished; and
- 7) I/we authorise, agree and consent to AIA Singapore, its associated persons/organisations, its and their third party service providers and its and their representatives, whether within or outside Singapore (collectively "**AIA Persons**") to collect, use, disclose, store, retain and/or process (collectively, "**Use**") all personal data and information ("**Personal Data**") that had/had been provided to AIA Persons and/or that AIA Persons possess about me/us (whether from me/us or a third party), in the manner and for the purposes described in the AIA Personal Data Policy ("**PD Policy**"), including but not limited to, processing of this Application/form and/or to provide subsequent advice or services to me/us in relation to this Application/Policy/form/AIA Vitality Programme and/or any other existing or future policy/policies/programmes that I/we may hold/participate with AIA Singapore. Without prejudice to the foregoing, I/we agree to comply with the terms of the PD Policy, including where such PD Policy is amended from time to time by AIA Singapore in accordance with its terms. Where Personal Data of another person is disclosed by me/us, I/we represent and warrant that I/we have obtained the consent of the individual concerned, except to the extent such consent is not required under relevant laws: (i) to collect such Personal Data; (ii) to disclose such Personal Data to the AIA Persons; and (iii) for the AIA Persons to Use such Personal Data in the manner and for the purposes described in the PD Policy. I/We hereby specifically waive (on our own behalf and on behalf of each such other person, and I/we represent and warrant that such other person has granted me/us authority to so waive) any right to bring a claim of any nature against any of the AIA Persons in respect of any above-mentioned Use and/or any Use of Personal Data in the nature of or for any of the purposes described above or in the PD Policy. I/We hereby agree to indemnify AIA Persons for all losses and damages that AIA Persons may suffer in the event that I/we are in breach of any representation and warranty provided by me/us herein. This authorisation shall bind my/our successors and assignees, and remains valid, notwithstanding death, irrespective of whether or not my/our Application/form is accepted by AIA Singapore. A photocopy of this authorisation shall be valid and effective as the original.
- 8) I/We hereby acknowledge and accept that AIA Singapore Private Limited will take up to seven (7) business days to process a Reassignment, following the receipt of this Notice of Release/Reassignment. Therefore, I/We hereby hold AIA Singapore Private Limited free of any liability or responsibility for any payment made to the Assignee and for carrying out its other obligations to the Assignee before such Reassignment is processed.

IN WITNESS WHEREOF, we, the Policy Owner/Assignor and the Assignee have set our hands on the date stated below.

Signature of Assignee  
(or authorised signatory(ies), if entity)

**Date (DD/MM/YYYY)**

Signature of Policy Owner/Assignor  
(or authorised signatory(ies), if entity)

**Date (DD/MM/YYYY)**

**Signature and Particulars of Witness/FSC/IR**

I confirm that this form was completed and signed in my presence.

Signature of Witness for Assignee

          <b>Date (DD/MM/YYYY)</b>
--

Name of Witness for Assignee

------

NRIC/Passport/FIN No.

------

Address of Witness for Assignee

------

Contact No.

------

Signature of Witness for Policy Owner/Assignor

          <b>Date (DD/MM/YYYY)</b>
--

Name of Witness for Policy Owner/Assignor

------

NRIC/Passport/FIN No.

------

Address of Witness for Policy Owner/Assignor

------

Contact No.

------

**FSC Declaration (To be completed by FSC Only)**

FSC/IR's Name

------

FSC/IR's Code

------

FSC/IR Unit Name

------

Contact No.

------

This form is provided by AIA Singapore Private Limited as a matter of courtesy, but AIA Singapore Private Limited assumes no responsibility or liability for the validity or legality of the reassignment.



## Release of Assignment/Reassignment Policy Checklist

Please check that you have included all the necessary documents. Any omissions may result in a delay of the processing of your Release of Assignment/Reassignment.

### Policy Owner/Assignor - Individual

S/N	Required Documents	Points to Note	Tick
1	Release of Assignment/Reassignment Form	All fields in this form must be completed (no blank fields)	
2	FATCA Declaration Form if Policy Owner/Assignor declares that he/she is a US Person, to complete:  - W9 if you are a U.S Person; or - W8BEN if you are not a U.S Person.	Completed by Policy Owner/Assignor	
3	ID/ Passport Copy (Policy Owner/Assignor)	Photocopy of NRIC/Passport/Long-Term Pass or other relevant identity documents (ID) with signature of an AIA Financial Services Consultant / Insurance Representative or an independent third party witnessing the assignor's signing on the photocopy	
4	Proof of Mailing Address (Policy Owner/Assignor)	Photocopy of NRIC/other relevant Identity documents (ID) or Letters from government or banks, or utility or telephone bills (dated within the last 6 months) Certified True Copy dated within the last 6 months	
5	Additional documents where policy is an <b>AIA Centurion PA</b> and insured is the parent of the policy owner	i. Photocopy of NRIC/Passport/Long-Term Pass or other relevant identity documents (ID) with (i) insured's signature; and (ii) signature of an AIA Financial Services Consultant / Insurance Representative or an independent 3rd party who is above age 21 and not a party to the policy witnessing the insured signing on the photocopy. ii. To indicate Insured's consent of Reassignment on the witnessed copy of NRIC/other relevant identity documents (ID). Refer to sample acknowledgement wordings as follows: "I <name> agree for Policy Number <number> to be assigned to <name of assignee> and request AIA Singapore Private Limited to process the assignment."	

### Policy Owner/Assignor - Entity

S/N	Required Documents	Points to Note	Tick
1	Release of Assignment/Reassignment Form	All fields in this form must be completed (no blank fields)	
2	Proof of Mailing Address	Photocopy of NRIC/other relevant Identity documents (ID) or Letters from government or banks, or utility or telephone bills (dated within the last 6 months) Certified True Copy dated within the last 6 months	
3	A copy of Accounting and Corporate Regulatory Authority (ACRA) search or Certificate of Incumbency	Certified True Copy that is dated within the last 6 months	
4	FATCA Declaration Form if Policy Owner/Assignor declares that he/she is a US Person and complete:  - W9 if you are a U.S Person; or - W8BEN-E if you are not a U.S Person	Completed by Policy Owner/Assignor	
5	Authorised Signatory List (ASL) of entity	Certified True Copy dated within the last 6 months	
6	ID/ Passport Copy (Authorised Signatories of entity)	Photocopy of NRIC/Passport/Long-Term Pass or other relevant identity documents (ID) with signature of an AIA Financial Services Consultant / Insurance Representative or an independent third party witnessing the assignor's/assignee's signing on the photocopy	
7	Additional Documents for Private Investment Company	Certified True Copy of Accounting and Corporate Regulatory Authority (ACRA) search or Certificate of Incumbency (dated within 6 months)	
8	Additional Documents for Trust Entity/ Private Investment Company with overlaying trust	Verification of Trust Form	
		Trust Deed or 1st and last page of the Trust Agreement	
		Photocopy of NRIC/Passport/Long-Term Pass or other identity document (ID) of all settlor(s) & Trust Protector(s)	
9	Additional documents where policy is an <b>AIA Centurion PA</b> and insured is the parent of the policy owner	i. Photocopy of NRIC/Passport/Long-Term Pass or other relevant identity documents (ID) with (i) insured's signature; and (ii) signature of an AIA Financial Services Consultant / Insurance Representative or an independent 3rd party who is above age 21 and not a party to the policy witnessing the insured signing on the photocopy. ii. To indicate Insured's consent of Reassignment on the witnessed copy of NRIC/other relevant identity documents (ID). Refer to sample acknowledgement wordings as follows: "I <name> agree for Policy Number <number> to be assigned to <name of assignee> and request AIA Singapore Private Limited to process the assignment."	



*To avoid any delays, please also ensure that your signature is executed in the same manner as our records. You may want to refer to the application form in your contract for a specimen of the original signature.*

*Indicated your Policy No(s)?*  
 *Signed and dated all forms/letters?*  
 *Obtained the name, I/C no, & signature of a witness who is not related to you?*

*Have you*

Please fold along dotted line



**BUSINESS REPLY SERVICE**

PERMIT NO. 06134



**AIA Singapore Private Limited**

POLICY SERVICES

3 Tampines Grande #09-01

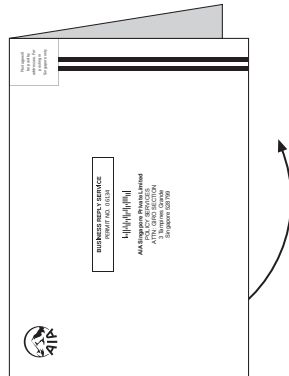
AIA Tampines

Singapore 528799

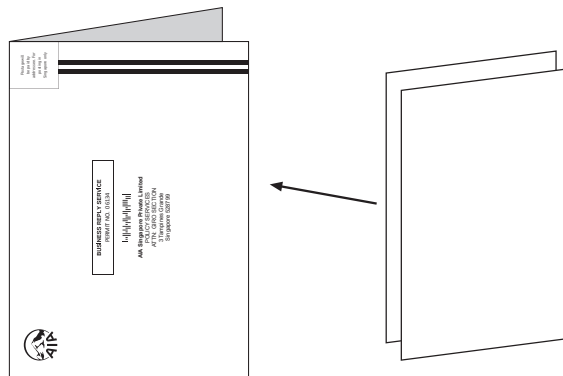
Postage will be paid by addressee. For posting in Singapore only.

## How to use this postage-paid return envelope:

- 1) Fold this in half with the mailing details exposed



- 2) Attach your supporting documents within



- 3) Seal all 3 sides with glue encasing your supporting documents and mail

