

## CHANGE OF SERVICING REPRESENTATIVE

### Important Note:

- Your new servicing representative must be from a bank or financial advisory firm that has a valid distribution agreement with China Life Insurance (Singapore) Pte. Ltd. (“we”, “us”, “our”).
- This change request is subject to our approval, and we will process your request after we have received and verified the originally signed copy of this form.
- We have a Personal Data Protection Notice (“Notice”) that sets out the purposes for which personal data may be used and disclosed. You are advised to read and understand the Notice, which is available at [www.chinalife.com.sg](http://www.chinalife.com.sg), before completing this form.

### PARTICULARS OF POLICY OWNER

Name	NRIC / Passport / Unique Entity Number
<input type="text"/>	<input type="text"/>

### POLICY(IES) TO BE SERVICED BY NEW SERVICING REPRESENTATIVE

Please select only ONE of the following:

- All in-force policies
- Only the in-force policy(ies) as follows:

Policy Number(s)
------------------

### PARTICULARS OF NEW SERVICING REPRESENTATIVE

Name:	:
Representative Code:	:
Name of Bank/ Financial Advisory Firm:	:

### DECLARATION AND AUTHORISATION

I/We acknowledge that my/our application is subject to the acceptance and approval of China Life Insurance (Singapore) Pte. Ltd. (“CLIS”) and will be effective only upon issuance of a confirmation letter.

I/We agree to indemnify and hold CLIS harmless from and against all claims, losses, damages and legal costs that may arise from CLIS acting on my/our request as set out in this form.

I/We understand that CLIS has a Personal Data Protection Notice (available at [www.chinalife.com.sg](http://www.chinalife.com.sg)) which applies to the management of personal data held by CLIS, and I/we have read and understood the terms therein, and accept and agree to these terms without any limitation and qualification.

\_\_\_\_\_  
Signature of Policy Owner / Trustee / Assignee

\_\_\_\_\_  
Contact Number

\_\_\_\_\_  
Date