# INSURANCE ACT 1966 Utmos INSURANCE (NOMINATION OF BENEFICIARIES) REGULATIONS 2009

FORM 6 NOTICE OF REVOCATION OF REVOCABLE NOMINATION

#### PLEASE READ THE FOLLOWING BEFORE COMPLETING THIS FORM

- 1. This Form can only be used to give notice of the revocation, under section 133(7)(a) or (b) of the Insurance Act 1966 ("Insurance Act"), of a revocable nomination made in respect of one relevant policy.
- 2. Part 1 must be completed in full, if a policy owner wishes to use this Form to give notice of the revocation, under section 133(7)(a) of the Insurance Act, of a revocable nomination made by him or her.
- 3. Part 2 must be completed in full, if a policy owner wishes to use this Form to give notice of the revocation, under section 133(7)(b) of the Insurance Act, of a revocable nomination made by him or her.
- 4. This Form must be lodged with the licensed insurer that issued the relevant policy specified in Part 1 or 2, as the case may be.

### INSURANCE ACT INSURANCE (NOMINATION OF BENEFICIARIES) REGULATIONS 2009 FORM 6 NOTICE OF REVOCATION OF REVOCABLE NOMINATION

PART 1: DECLARATION THAT RELEVANT POLICY OR INTEREST THEREUNDER HAS BEEN ASSIGNED, ENCUMBERED OR DEALT WITH	
For the purposes of section 134(3) of the Insurance Act and regulation 5(4) of the Insurance (Nomination of Beneficiaries) Regulations 2009, I declare that -	
a. I have on assigned, encumbered or otherwise dealt with the relevant policy specified below or an interest under that relevant policy; and	
b. accordingly, the revocable nomination which I had made on in respect of that relevant policy is deemed to be revoked on the date referred to in paragraph (a).	
Policy No. or other reference of the relevant policy	
Where the policy number or other reference is NOT available, please provide:	
a. the plan name; and	
b. the Basic Sum Insured.	
Name of insurer	
Name of policy owner	
NRIC or Passport No. of policy owner	
Signature <sup>^</sup> or right thumb print <sup>*</sup> of policy owner	
Email Address of policy owner	
Date	d d m m y y y y

^ "Signature", in relation to a signatory of an electronic form, means the signatory's secure electronic signature.

\* Please delete as appropriate.

#### INSURANCE ACT INSURANCE (NOMINATION OF BENEFICIARIES) REGULATIONS 2009 FORM 6 NOTICE OF REVOCATION OF REVOCABLE NOMINATION

PART 2: DECLARATION THAT POLICY OWNER HAS MADE WILL PROVIDING FOR DISPOSITION OF ALL DEATH BENEFITS UNDER RELEVANT POLICY	
For the purposes of section 134(3) of the Insurance Act and regulation 5(5) of the Insurance (Nomination of Beneficiaries) Regulations 2009, I declare that -	
a. I have on made a will in a	accordance with the Wills Act 1838 which –
i. provides for the disposition of all death benefits under the relevant policy specified below; and	
ii. specifies the particulars of that relevant policy referred to in regulation 5(3) of the Insurance (Nomination of Beneficiaries) Regulations 2009; and	
b. accordingly, the revocable nomination which I had made on in respect of that relevant policy is deemed to be revoked on the date referred to in paragraph (a).	
Policy No. or other reference of the relevant policy	
Where the policy number or other reference is NOT available, please provide:	
a. the plan name; and	
b. the Basic Sum Insured.	
Name of insurer	
Name of policy owner	
NRIC or Passport No. of policy owner	
Signature <sup>^</sup> or right thumb print <sup>*</sup> of policy owner	
Date	d d m m y y y y

^ "Signature", in relation to a signatory of an electronic form, means the signatory's secure electronic signature.

\* Please delete as appropriate.

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Calls may be monitored and recorded for training purposes and to avoid misunderstandings.

Utmost Wealth Solutions is a registered business name of Utmost International Isle of Man Limited Singapore Branch. Utmost International Isle of Man Limited Singapore Branch, 6 Battery Road #16-02, Singapore 049909.

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Authorised by the Monetary Authority of Singapore to conduct life assurance business in Singapore. Member of the Life Insurance Association of Singapore. Member of the Singapore Finance Dispute Resolution Scheme.

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Utmost Worldwide Limited (No. 27151) also trading as Utmost Corporate Solutions, is incorporated in Guernsey. It is authorised and regulated by the Guernsey Financial Services Commission to conduct long term business and general business. Registered Office: Utmost House, Le Truchot, St. Peter Port, Guernsey, GY1 1GR. T +44 (0) 1481 715 800 F +44 (0) 1481 712 424 E UWCustomerService@utmostworldwide.com

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