

NOMINATION FORM

(Applicable only for policy effected by Policy Owner upon his/her own life)

Policy No : _____

Policy Owner : _____

Policy Owner's IC No. : _____

Please tick wherever is applicable.

Policy Owner's Religion: Muslim Non-Muslim

Policy Owner's Marital Status: Single Married Divorced Widow/ Widower

Do you have any living child? Yes, no. of children _____ No

IMPORTANT NOTES FOR NOMINATION AND TRUST:

- (a) A trust in favour of the nominee(s) is created under Section 130 of the Financial Services Act 2013 (Schedule 10), if the nominee(s) of the Policy Owner (other than a Muslim Policy Owner) named herein shall be one or more individuals in the following categories:
 - Spouse
 - Child
 - Parent (where there is no spouse or child living at the time of making this nomination)
- (b) A Policy Owner should appoint a Trustee for the policy moneys and in the event of failure to do so, the competent Nominee or where the nominee is incompetent to contract, the parent of the incompetent nominee other than the policy owner and where there is no surviving parent, the Public Trustee or a trust company nominated by the policy owner, shall be the Trustee.
- (c) The Policy Owner may appoint any person, other than himself/herself, to be trustee(s) for the policy moneys by completing the details for trustee.
- A nomination by a Muslim Policy Owner shall not create a trust in favour of the nominee of the policy moneys payable upon death of such Muslim policy owner. A nominee of a Muslim Policy Owner upon receipt of the policy moneys shall distribute the policy moneys in accordance with Islamic Laws.
- For nominees other than those described in item no. 1(a) above, the nominee shall receive the policy moneys in the capacity as an executor and not solely as a beneficiary. If the Policy Owner's intention is for such nominee to receive the policy benefits beneficially and not as an executor, the Policy Owner must assign the benefits of the policy to such person.
- The latest submission and endorsement of a nomination by the Company will supersede any previous nomination made.
- Please inform your nominee(s) or trustee(s) about the nomination pursuant to this application.

SECTION A – NOMINATION

I, the above named hereby nominate the following as nominee(s) for the above application/policy.

Nominee(s) Details			
	Nominee I	Nominee II	Nominee III
Name *			
Gender *	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
ID Description * ID Number * (Old IC/ Birth Cert./ Army ID/ Police ID/ Passport/ MyPR)	ID Desc. : ID No. :	ID Desc. : ID No. :	ID Desc. : ID No. :
New I.C. Number *			
Date of Birth (dd/mm/yyyy)*	__ / __ / ____	__ / __ / ____	__ / __ / ____
Nationality (for Non-Malaysian only) *			
Occupation (State the exact duty)			
Name of Employer			
Nature of business, if self employed			
Relationship to Policy Owner *			
Current / Savings Account Number			
Bank Name			
Share (%) *			

to be continued



Policy No : _____

Nominee(s) Details (continued)			
	Nominee I	Nominee II	Nominee III
Mailing Address *			
Residential Address* (if different from mailing address)			
Contact Number *	Home : Office : Mobile :	Home : Office : Mobile :	Home : Office : Mobile :
Note: - * Mandatory fields to be completed. - Submission of a copy of the nominee(s) NRIC/Passport/Birth Certificate is/are encouraged. - If there are more than 3 nominees, please submit an additional form.			

Revocation of Existing Nominee(s) or Trustee(s)

I wish to make the changes as following *(Please tick the boxes accordingly, can select more than one):*

Revoke all existing nominee(s)

Revoke all existing nominee(s) and nominate new nominee(s) as stated in Section A

Revoke all existing trustee(s) and appoint new trustee(s) as stated in Section B

Statement of Declaration

I, the Policy Owner, make this nomination/appointment and/or revocation of nominee(s)/trustee(s) after having read and understood the Important Notes for Nomination and Trust above.

Dated this day _____ of _____ year _____

Signature of Witness **

Name : _____

IC No. : _____

Address : _____

Tel. No. : _____

Signature of Policy Owner

Name : _____

IC No. : _____

Address : _____

Tel. No. : _____

Consent from existing Trustee(s)

<div style="border: 1px solid black; height: 30px; width: 100%;"></div>	<div style="border: 1px solid black; height: 30px; width: 100%;"></div>	<div style="border: 1px solid black; height: 30px; width: 100%;"></div>
Signature of Witness **	Signature of Existing Trustee	Signature of Existing Trustee
Applicable only for the purpose of changing/revoking the previous nomination of the Policy under Paragraph 5 of Schedule 10 of the Financial Services Act 2013		
Name : _____	Name : _____	Name. : _____
IC No. : _____	IC No. : _____	IC No. : _____

** Witness must be at least 18 years of age, of sound mind and cannot be a named nominee or trustee.

SECTION B – TRUSTEE(S)

(Applicable only for Non-Muslim Policy Owner and the policy effected upon his/her own life)

Policy No : _____

Date : _____

I, the Policy Owner understand that pursuant to Schedule 10 Paragraph 5(3) of Financial Services Act 2013, I shall not appoint myself as the Trustee to this policy. I hereby appoint the following person(s) to be my Trustee(s) in respect of the moneys payable under this policy(s) and the receipt of the policy moneys by the Trustee(s) shall be a discharge to the Company of all their liabilities under the policy. I hereby reserve the right to revoke the appointment of the Trustee(s) and substitute any other person thereof or to appoint additional Trustee(s). I further declare that I shall not deal with the policy by revoking a nomination, varying or surrendering and assigning or pledging the policy as security without the consent of the Trustee(s).

(i) Trustee(s) Details		
	Trustee 1	Trustee 2
Name*		
ID Description* ID Number* (Old IC / Army ID / Police ID / Passport / MyPR)	ID Desc. : ID No. :	ID Desc. : ID No. :
New IC Number (if any)*		
Gender Date of Birth (dd/mm/yyyy)*	<input type="checkbox"/> Male <input type="checkbox"/> Female __ / __ / ____	<input type="checkbox"/> Male <input type="checkbox"/> Female __ / __ / ____
Nationality (for Non-Malaysian only) *		
Occupation (State the exact duty)		
Name of Employer		
Nature of business, if self- employed		
Current / Savings Account No.		
Bank's Name		
Mailing Address*		
Residential Address (if different from Mailing Address)		
Contact Number*	Home : Office : Mobile :	Home : Office : Mobile :

Note:
 - * Mandatory fields to be completed if the trustee is an individual.
 - Individual Trustee(s) must be at least 18 years of age and of sound mind.
 - If a trust company is appointed, the mandatory fields to be completed are Name, ID Number (Company Registration Number) & Mailing Address.
 - Submission of a copy of the trustee's NRIC/Passport/Company Circular Resolution and Trustee Contract is/are **COMPULSORY**.

(ii) Declaration by Trustee(s)

I/We the undersigned hereby accept the appointment as Trustee(s) and undertake to carry out all my/our duties as Trustee(s) in accordance with the trust deed if any, or according to the provisions of the Trustee Act 1949 in relation to the said policy.

<div style="border: 1px solid black; height: 30px; margin-bottom: 5px;"></div> <p>Signature of Trustee 1 Name : _____ IC No. : _____</p>	<div style="border: 1px solid black; height: 30px; margin-bottom: 5px;"></div> <p>Signature of Trustee 2 Name : _____ IC No. : _____</p>
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<div style="border: 1px solid black; height: 30px; margin-bottom: 5px;"></div> <p>Signature of Witness ** Name : _____ IC No. : _____ Address : _____ _____ _____ Tel. No : _____</p>	<div style="border: 1px solid black; height: 30px; margin-bottom: 5px;"></div> <p>Signature of Policy Owner Name : _____ IC No. : _____ Address : _____ _____ _____ Tel No : _____</p>
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** Witness must be at least 18 years of age, of sound mind and cannot be a named nominee or trustee.