



Empowering disadvantaged children and youth

OrangeAid Donation Alteration Form

To : Life Insurance Department

Personal Particulars:

Name (as shown in NRIC) of Policyholder		
NRIC of Policyholder		
Policy Number		
Type of Request ¹	Details	For Official Use / Scan under CS Type
<input type="checkbox"/> To Change Donation Amount	Current Donation Amount : \$ _____ New Donation Amount : \$ _____	<i>Increase / Decrease Sum Assured</i>
<input type="checkbox"/> To Terminate Donation	To Discontinue Donation	<i>Precontract Termination Rider</i>
<input type="checkbox"/> Others	Please indicate your request here: _____ _____ _____ _____	<i>Premium Payment Term Change</i>

Policyholder's signature

Payor's signature²

Name of Payor : _____

NRIC of Payor : _____

Important Notes:

1. For all requests, the changes will take effect from the next premium due date.
2. Payor's signature is required for policies that are not paid by the policyholder.



Paste Here

Paste Here

ntuc
Income

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

BUSINESS REPLY SERVICE
PERMIT NO. 00893



NTUC INCOME
75 Bras Basah Road
NTUC INCOME Centre
Singapore 189557