

## Guide/FAQs on Submitting a Nomination Form for Registration

### 1. Who can make a nomination?

Only the policyowner of the insurance policy can make a Nomination.

Muslim policyowners **are not disallowed** from **making revocable nominations**. However, they should be made aware that such nominations are subject to Muslim law. The insurer would be discharged from all liabilities as long as it makes payment to the beneficiary recognized under the Insurance Act, but that beneficiary may be required to hold the monies in trust for the beneficiaries recognized under Muslim law.

### 2. What you need to do before making a nomination?

Before you make a nomination or create a trust or change or revoke them under the Insurance Act, please ensure that you have read and understood the information provided in **Your Guide to Nomination of Insurance Nominees 2015 (NOB Guide)**.

You can download the NOB Guide from:

- LIA website at <http://www.lia.org.sg>

### 3. How do you make a nomination?

**a) Making a nomination:** You must complete the prescribed nomination form and submit the original completed form to Prudential Assurance Company Singapore (Pte) Limited ("Prudential") for registration.

There are 6 forms prescribed under the Insurance Act, Insurance (Nomination of beneficiaries) Regulation 2009.

- Form 1 [Trust Nomination]
- Form 2 [Revocation of Trust Nomination]
- Form 3 [Appointment, or Revocation of Appointment, of Trustee of Policy Moneys]
- Form 4 [Revocable Nomination]
- Form 5 [Revocation of Revocable Nomination]
- Form 6 [Notice of Revocation of Revocable Nomination]

**Note:**

- You must read all instructions and notes stated in the nomination form before completing it with utmost due care.
- Only original copies of the nomination form can be registered.
- No amendments or corrections (e.g countersigning, correction tape, correction fluid) can be made on the form.

### 4. Where do you submit your nomination form?

You must submit the completed nomination form to Prudential Assurance Company Singapore (Pte) Limited via the following ways:

By Post to: Prudential Assurance Company Singapore (Pte) Limited  
Robinson Road P.O. Box 492 Singapore 900942

By Hand to: Prudential Customer Service Centre  
Prudential Tower #01-01, 30 Cecil St, Singapore 049712 (from 17 Mar 2025 onwards)

If you have any enquiry, please call our PruCustomer Line at 1800 333 0333 or you may also email us at [customer.service@prudential.com.sg](mailto:customer.service@prudential.com.sg)

The information above is for your reference only and should not be taken as legal advice. You are advised to seek independent legal advice on the effect of your Nomination.

**INSURANCE ACT 1966**

**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.

**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 \_\_\_\_\_(DD/MM/YYYY) 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 \_\_\_\_\_(DD/MM/YYYY) 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**

**Prudential Assurance Company Singapore (Pte) Ltd**

**Name of policy owner**

**NRIC or Passport No. of policy owner**

**Signature^ or right thumb print\* of policy owner**

**Email address of policy owner\*\***

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

^ “Signature”, in relation to a signatory of an electronic form, means the signatory’s secure electronic signature.

\* Please delete as appropriate.”.



\*\* Please indicate "NIL" if it is not available.

**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 \_\_\_\_\_(DD/MM/YYYY) made a will in 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 \_\_\_\_\_(DD/MM/YYYY) in respect of that relevant policy is deemed to be revoked on the date referred to in paragraph (a)

<b>Policy No. or other reference of the relevant policy</b>  Where the policy number or other reference is NOT available, please provide:  (a) the plan name; and  (b) the Basic Sum Insured.	
<b>Name of insurer</b>	<b>Prudential Assurance Company Singapore (Pte) Ltd</b>
<b>Name of policy owner</b>	
<b>NRIC or Passport No. of policy owner</b>	
<b>Signature^ or right thumb print* of policy owner</b>	
<b>Date (DD/MM/YYYY)</b>	

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

\* Please delete as appropriate."

**Please send us your application with this prepaid business reply folder.**

1. Fold along the dotted lines.
2. Fold and insert your application form and any other required document into this prepaid business reply folder.
3. Seal along the edges of this prepaid business reply folder with clear tape (do not staple).
4. Drop your sealed prepaid business reply folder into your nearest post box.

**BUSINESS REPLY SERVICE  
PERMIT NO. 00364**



**PRUDENTIAL ASSURANCE COMPANY SINGAPORE (PTE) LIMITED**  
Robinson Road P.O. Box 492  
Singapore 900942

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