



## Application for #goCare Deferred Premium Scheme

KINDLY COMPLETE FULLY IN BLOCK LETTERS.

Policy Number(s)			
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### PARTICULARS OF POLICYHOLDER

Name of Policyholder (please underline Surname)	NRIC / Passport No.

Please provide the reason(s) for this application:

Notes:
<p>(1) Policyholders with financial difficulties due to Covid-19 may apply.</p> <p>(2) Applicable for Life policies which are in-force as at 31 March 2020. Group Insurance and Care &amp; Health policies are excluded.</p> <p>(3) Extension of premium grace period applies to premiums due from 1 April 2020 to 30 September 2020.</p> <p>(4) We reserve the right to request for further documents if necessary.</p> <p>(5) All requests will be subject to eligibility and approval by TMLS.</p> <p>(6) We will correspond with you after this request has been assessed.</p> <p>(7) Email the completed application form to <a href="mailto:CustomerCare@tokiomarine-life.sg">CustomerCare@tokiomarine-life.sg</a></p>

### Personal Data Notice

I / We agree and consent that Tokio Marine Life Insurance Singapore Ltd. may collect, use, process and disclose the personal data in accordance with the terms and conditions as stated in the insurance application form and/or the Tokio Marine Insurance Group's Data Protection Policy available at [www.tokiomarine.com](http://www.tokiomarine.com), which I / we have read, understood and agreed to the same.

<b>Signature of Policyholder</b>
<b>Date</b>

