

Insurance Policy Nomination Request Form

Plan Number

I/We hereby request that Metis Global (Singapore) Pte. Limited ("Metis SG"), as the trustee to my/our Trust Plan, be named as the beneficiary of the death benefits (via a revocable nomination) under the following Insurance Policy in accordance with the details as set out below.

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Note:

Please complete this form and send it to service.sg@metisgl.com using your registered email with Metis SG. Please fill in the details and if you make any amendments, please sign next to them.

Section A – Important Notes

1. Metis SG does not offer any financial advisory services. You are encouraged to seek advice from your Financial Adviser (if any) before naming Metis SG as beneficiary to any Insurance Policy. Your Financial Adviser should be able to explain the implications of your decision and provide appropriate recommendations to you, taking into account your investment objectives, financial situation, needs and any applicable fees and charges.
2. Metis SG reserves the right to reject this Request at its sole and absolute discretion and will not be required to disclose the reason(s) for its decision.
3. Your Trust Plan has to be in force for the death benefit payout to be received into the Trust Plan.
4. Any death benefits received by Metis SG for your Trust Plan will either be allocated to purchase Units in accordance with our latest record of your Asset Choice selection or be distributed to your beneficiaries in accordance with the Terms and Conditions of the Trust Plan.

Section B – Insurance Policy Details

1. Insurance Policy Details

Name of Insurer		Country of Insurer	
Policy Name			
Policy Number		Expected Payout	
		Currency	
Remarks			

2. Insurance Policy Owner Details

Is the Settlor the Policy Owner? Please skip to Section 3 if you have selected "Yes".

Yes No, please disclose Policy Owner's details:

Section B-2A

Policy Owner's Name <small>(As in NRIC/FIN/Passport including any alias and other names)</small>			
NRIC/FIN/ Passport		Nationality	
		Country of Birth	
Nature of Industry		Business Type	
Occupation			
Relationship to Settlor(s)	<input type="radio"/> Parent	<input type="radio"/> Spouse	<input type="radio"/> Child
	<input type="radio"/> Others		

Note: Documented proof of relationship will be required

3. Insurance Policy Owner Details

Is the Settlor/Joint Settlor the life insured?

Yes, for Settlor Yes, for Joint Settlor No for both

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Section C – Fees and Charges

1. An administration charge will be imposed by Metis SG on the death benefit received under the Insurance Policy into your Trust Plan. The current administration charge is 1 percent of the death benefit received, subject to a minimum of SGD300 and up to a maximum of SGD5,000.
2. Any fees or charges imposed by the insurer in relation to the death benefit under the Insurance Policy to Metis SG will be borne in its entirety by the Settlor.
3. Metis SG reserves the right to convert the death benefit received into any foreign currency for investments and any fees or charges imposed for the conversion will be deducted from the death benefit received.
4. Metis SG reserves the right to vary the charges contemplated under this Section C by giving you not less than three months' prior notice in writing, or such other period of notice in compliance with the relevant regulatory requirements.
5. For the avoidance of doubt, any fees and charges referred to in this Section C is in respect of each Insurance Policy and each death benefit received made thereunder.

Section D – Declaration and Signature

1. I/We confirm that I/we have read and verified the information in this document (including the Important Notes section). I/We confirm that the information provided by me/us is true, correct, complete and not misleading in any way. I/We accept full responsibility for them. I/We have not withheld any information. I/We undertake to provide any further information and documentation reasonably required from time to time.
2. I/We confirm that I/we have read, understood and accepted Section C – Fees and Charges.
3. I/We understand that Metis SG will notify me/us once my/our Request has been reviewed and a decision has been made.
4. I/We understand that Metis SG reserves the right to reject this Request at its sole and absolute discretion and will not be required to disclose the reason(s) for its decision.
5. I/We understand that Metis SG only accept revocable nomination and accept no liabilities if the nomination was subsequently revoked.
6. I/We understand that I/we retain control over the Insurance Policy and its living benefits.
7. I/We understand that Metis SG does not, by virtue of this nomination, assume any responsibility for the processing of any claims under the Insurance Policy.
8. I/We understand that I/we will be responsible for ensuring the validity of the nomination with the insurer.
9. I/We shall jointly and severally indemnify Metis SG and any person appointed or employed by it against all claims, liabilities, damages, losses, costs and expenses of any kind which may be incurred by any of them and all actions or proceedings which may be brought by or against any of them in connection with this Request unless due to the fraud, gross negligence or wilful default of Metis SG or any other person appointed or employed by it.
10. I/We agree that Metis SG will not be responsible to me (or any other person) if I/we fail to:
 - a) update the insurer of any change in Metis SG contact details; or
 - b) inform Metis SG of the change in nomination.
11. Metis SG may rely conclusively upon and accept any communications received via email or Metis SG's online portal (collectively "**electronic communications**") which is in good faith believed to be genuinely endorsed/signed by me/us. Any transactions made according to electronic communications shall be irrevocable and binding upon me/us, whether such electronic communications have in fact been given with or without my/our authority, knowledge, or consent. Under no circumstances shall Metis SG have any duty or any obligation to enquire or verify the identity of the person(s) initiating the electronic communications in my/our name or the authenticity of the signature appearing thereon or the validity of the electronic communications.
12. I/We understand that sending electronic communications is not a safe and reliable transmission method. Metis SG shall not, in any event, be liable to me/us for any liabilities, losses, damages, or expenses whatsoever arising out of or in connection with any network or telephone line failure, any uncontrollable events or any other circumstances beyond Metis SG's control.
13. I/We have attached the following documents with this request:

- | | YES | NA |
|--|--------------------------|--------------------------|
| • Proof of relationship where Settlor is NOT the Policy Owner | <input type="checkbox"/> | <input type="checkbox"/> |
| • Proof of relationship where the Payor of premium is NOT the Policy Owner | <input type="checkbox"/> | <input type="checkbox"/> |

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I/We confirm that my/our signature in this Request is/are to confirm all declarations and confirmations in this request and my/our acceptance of all the terms and conditions in the Deed which shall be binding on me/us.

Full Name of Settlor
(As in NRIC/FIN/Passport including any alias and other names)

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Full Name of Joint Settlor (where applicable)
(As in NRIC/FIN/Passport including any alias and other names)

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Signature

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Signature

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Date Signed

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Date Signed

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