

Customer Update



SG007

Request Form

Please place a tick (✓) in boxes (☐) where applicable.

Name of Customer: _____

NRIC/Passport No.: _____ Policy No.: _____

Tel No. (Residence): _____ Mobile: _____

To update the changes on all my Chubb insurance policies

Change of Contact Details

Contact No (Residence): _____ Contact No (Mobile): _____

Email Address: _____

Change of Address: _____

Postal Code: _____

Change of Payment Mode

To Credit Card No. _____ - _____ - _____ - _____ Expiry Date (MM/YYYY): ____ / ____

To Giro (Application form completed and enclosed)

To Cash / Cheque (Applicable only for annual premium payment)

Change of Payment Frequency

To Monthly To Annually

Non Receipt of Policy Documents (Please resend)

Others (Please specify) _____

This serves as an authorisation for Chubb Insurance Singapore Limited (Chubb) to process the above intent. The details can be mailed to us, faxed to 6298 1055 or emailed to customerservice.sg@chubb.com.

Should you require further assistance, please call our Customer Relations Officers at 6299 0988. We will be glad to assist you.

Signature

Name of Officer

Date

Date

FOR OFFICIAL USE ONLY

Request was made: In Person Telephone Request (Date: _____ Time: _____ (AM/PM))

Chubb. Insured.™

Apply glue here

Apply glue here

Apply glue here

Fold along this line

Note: Kindly fold along the dotted lines with this side facing out.

Fold along this line

CHUBB®

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