

**REQUEST FORM FOR
ACCESS TO PERSONAL DATA**



中国人寿保险(新加坡)有限公司
China Life Insurance (Singapore) Pte. Ltd.

Important Notes

- 1) To request for access to your personal data under the Personal Data Protection Act 2012, you must be the individual to which the personal data relates or you are authorised to act on behalf of the individual.
- 2) If you are an individual requesting for access to your personal data, please attach a copy of your identification document (e.g. NRIC or passport) to this form.
- 3) If you are acting on behalf of another individual, please submit this request personally at our office together with:
 - a. a certified true copy of the individual's authorisation, power of attorney, court order or any other document which is proof of your authority;
 - b. a certified true copy of the individual's identification document; and
 - c. your identification document.Only a Singapore lawyer or notary public may certify documents to be true copies
- 4) Under certain situations, we may require additional information and/or documentation from you so that we can verify your identity and be completely satisfied as to who you are before we disclose the information to you.
- 5) If your access request falls within one of the exceptions set out under Section 21(2) to (4) or the Fifth Schedule of the Personal Data Protection Act 2012, we will not be required to provide you with access.
- 6) We will respond to your access request within 30 days from the date we receive it. If we are unable to meet this timeline, we will write to you to inform you of the time by which we will be able to respond to you.
- 7) We will charge a minimum service fee of S\$20.00 for processing each request. However, if the cost of processing your request is more than the minimum service fee, we will write to you to advise you of the increased amount you have to pay before we process your request.

PARTICULARS OF INDIVIDUAL

Name of Individual:	NRIC/Passport Number:
Mailing Address:	
Email Address:	
Contact Number:	Policy Number (if applicable):
Relationship to China Life Insurance (Singapore) Pte. Ltd.: <input type="checkbox"/> Policy Owner <input type="checkbox"/> Representative <input type="checkbox"/> Employee <input type="checkbox"/> Others: _____	



PARTICULARS OF AUTHORISED PARTY

(To be completed if another person has been authorised to request for the individual's personal data)

Name of Authorised Party:	NRIC/Passport Number:
Mailing Address:	
Email Address:	Contact Number:
Relationship to Individual:	

PERSONAL DATA REQUESTED

Please tick to select the one(s) that apply:

- I would like to access personal data on the individual named above that is in the possession or under the control of China Life Insurance (Singapore) Pte. Ltd. ("CLIS").
- I would like information about the ways in which the personal data on the individual named above has been or may have been used or disclosed by CLIS within a year before the date of this request.

Please provide a clear and detailed description of the personal data you are requesting for, including the event, situation or transaction associated with the collection of the personal data:

Date or period requested personal data was collected or used: _____

DECLARATION AND AUTHORISATION

I have read and understood the "Important Notes" presented above. In the event that an increased fee is chargeable as advised by CLIS, I understand that I must pay the increased amount before my request will be processed.

I understand that the personal data collected in this form will be used for the purpose of processing this access request and its related purposes only.

I also understand that it is essential for CLIS to confirm my identity before providing the information requested and that CLIS may request for further information from me in order to locate the requested personal data.

I declare that the information that I have provided in this form and any supporting document is true and accurate to the best of my knowledge. I am also the individual named in this form or I have been duly authorised to obtain personal data concerning the individual.

Signature of Individual or Authorised Party

Date