AIA SINGAPORE
POLICY SPLIT OPTION FORM

Important Notes:

1. **This form is only applicable to AIA Platinum Infinite Wealth policy.**
2. **Once an application to split your policy has been submitted to us, you cannot change, withdraw or cancel it. Additionally, after a request to split a policy takes effect and a new policy has been issued, it cannot be undone or reversed.**
3. Please consult your AIA Consultant / Insurance Representative and refer to your policy contract, policy illustration and product summary for more details.
4. For policies that insure the life of an Insured below age 16, the Policy Owner must have retained the right to ownership of the policy such that policy ownership does not automatically transfer to the said insured at age 21.
5. The mode of communication to the Policy Owner(s) of the Split Policy(ies) will follow the Basic Policy, unless AIA Singapore is instructed otherwise in writing under the respective Split Policy(ies).
6. Please note that the Minimum Insured Amount of the Basic Policy and each Split Policy must meet the following thresholds before your instructions to split such policies will be effected:

For AIA Platinum Infinite Wealth:

Premium Term	Policy Year 1 to 15	Policy Year 16 onwards
Single Pay	$500,000	$100,000
5-Pay	$250,000	$50,000

For AIA Platinum Infinite Wealth 2.0 :

Premium Term	Policy Year 1 to 15	Policy Year 16 onwards
Single Pay	$300,000	$100,000
5-Pay	$150,000	$50,000

7. You may make a written request to us to split your policy only once in each policy year, and each policy can be split into a maximum of 4 separate policies. Once a policy has been split and a new policy has been created, you cannot split that new policy again within the same policy year.
8. Your application must meet the following conditions:
   a. Your policy has been active for at least 3 years (for Single Pay) or 5 years (for 5 Pay).
   b. There are no unpaid premiums, debts, or policy loans.
   c. There are no pending claims on your policy.
   d. There are no ongoing service requests (such as changes to the policy owner, insured person, or secondary insured).
   e. After the split, both the Basic and new policies must meet our Minimum Insured Amount requirements.
9. You cannot use the Policy Split Option if your policy is held under a trust, unless you and the trustee or all beneficiaries agree to cancel the trust and meet any other conditions we may require.
10. If your policy has a revocable beneficiary nomination, you must cancel it — following any rules we or the law require — before we can process your policy split request. After the split, you can nominate a beneficiary again for both the Basic Policy and Split Policies, if you wish.
11. Once your application has been approved and the policy split takes effect:
    a. The insured amounts for both the Basic and Split Policies will be adjusted based on the approved split percentages. These amounts will be shown in updated policy documents.
    b. Policy values (guaranteed and non-guaranteed) will be divided according to the insured amount ratio.
    c. Premiums paid will be reallocated between the Basic and Split Policies, and used to calculate the Death Benefit.
    d. The Split Policy will follow the same terms as the Basic policy, unless stated otherwise in an endorsement.
    e. The free-look period does not apply to the Split Policy, and you waive any rights related to it.
    f. Any Secondary Insured named in the Basic policy will remain valid only for that policy, not the split one.
    g. You may request changes to the policy owner or insured person, or appoint a Secondary Insured for the Split Policy, subject to our approval and requirements.

12. Furnishing proof of insurability and insurable interest between the policy owner and insured of the Split Policy (where we require at our discretion), and the policy owner of the Split Policy agreeing to take on all the rights, interest, liabilities and obligations of the Split Policy including financing the Split Policy.
13. Your Policy Split request will only be processed once all required documents or information have been submitted and there are no outstanding items.

A. Particulars of Insured and Policy Owner/ Assignee of the Basic Policy

Name of Insured

NRIC/Passport/FIN No.

Name of Policy Owner/Assignee *(if different from Insured)*

NRIC/Passport/FIN/Entity Registration No.

B. Policy Number (Basic Policy)

Policy Number

% of Sum Assured

100

Current Insured Amount *(before Policy Split)*

Relationship of the Insured to the Policy Owner:

☐ Self ☐ Spouse ☐ Child / Legally adopted child (who is below age 16) ☐ Key Person ☐ Others *(Please state):*

C. Split Policy(ies)

Please determine how you would like to allocate the Sum Insured of your Basic Policy to a maximum of 4 Split Policy(ies), by providing the split percentages (Split %) of the Sum Insured for each Split Policy.

Please ensure that the total insured amount across all Split Policies are equal to the insured amount of the Basic Policy.

Number of Policies to Split Into *(input 1-4)*

	Split Allocation Percentage (%) *(whole number only)*
Split Policy - A1	
Split Policy - A2	
Split Policy - A3	
Split Policy - A4	
Basic Policy *(after Policy Split)*	
Total Percentage	0

Ensure total equals 100%.

D. Policy Owner and Insured of the Split Policy(ies)

Unless we are instructed otherwise in writing, the Split Policy will be owned by the same Policy Owner/Assignee, and will cover the same Insured, as the Basic Policy. Any appointment of Secondary Insured continues to be valid on the Basic Policy only and is not applicable to the Split Policy. You can request to change the Policy Owner and/or the Insured, or appoint a Secondary Insured under the Split Policy, subject to our acceptance and requirements.

There must be insurable interest between the Policy Owner and the Insured of the Split Policy(ies), as we determine.

Please provide the relevant supporting documents such as marriage certificate or birth certificate to prove the relationship.

If the insurable interest criteria is not met, you will be required to make changes to the Policy Owner and/or Insured by submitting a Change of Policy Owner &/or Insured Form (For Policy Split).

Tick where applicable	No Change / Not Applicable	Change of Policy Owner	Change of Insured
Split Policy - A1	☐	☐	☐
Split Policy - A2	☐	☐	☐
Split Policy - A3	☐	☐	☐
Split Policy - A4	☐	☐	☐

Please submit the form(s) (if any) together with this form and proof of relationship between the appointed Policy Owner and Insured to fulfil the insurable interest requirement for Split Policy(ies).

Incomplete submissions may result in delay in processing or decline of your Policy Split Option request.

E. Declaration on U.S. Person Status

☐ I/We hereby declare and agree that I am/we are not a "U.S. person" for U.S. federal income tax purposes and that I am/we are not acting for, or on behalf of a U.S. person. I/We understand that AIA Singapore, believing this statement to be true, will rely on it and act on it. In the event this statement is false, AIA Singapore reserves the right and shall be entitled to cancel or terminate this Policy/Policies and pay reasonable compensation to me/us in consideration of such cancellation or termination as may be required under Singapore laws.

I/We agree to notify AIA Singapore within 30 days of any change in my/our status as a U.S. person for the purposes of U.S. federal income tax. I/We agree to indemnify AIA Singapore in respect of any false or misleading information regarding my/our "U.S. person" status for U.S. federal income tax purposes.

☐ I/We hereby declare and agree that I am/we are a "U.S. person" for U.S. federal income tax purposes.

I/We agree to notify AIA Singapore within 30 days of any change in my/our status as a U.S. person for the purposes of U.S. federal income tax. I/We agree to indemnify AIA Singapore in respect of any false or misleading information regarding my/our "U.S. person" status for U.S. federal income tax purposes.

Note: Please submit W-9 form to us.

F. Declaration on Common Reporting Standard (Not required to complete if the change of indices is within the same country)

I/We acknowledge that AIA Singapore Private Limited (AIA Singapore) is a reporting Singaporean financial institution as defined in the Income Tax (International Tax Compliance Agreements)(Common Reporting Standard) Regulations 2016 with reporting obligations to the Comptroller of Income Tax (Comptroller) under the Income Tax Act, Chapter 134, Singapore (Income Tax Act), and its regulations. I/We warrant that the information provided in this form is true, complete and correct and understand and agree that AIA Singapore will rely on such information given by me/us in fulfilling its reporting obligations to the Comptroller.

Where I/we have furnished information concerning a third party (including but not limited to a Controlling Person), I/we confirm that such information has been provided to me/us directly or indirectly by the third party, and I/we know or have reason to believe that such information is not false or misleading in any material particular.

I/We understand and accept that should any information furnished by me/us be known to be false or misleading in any material particular, I/we may be prosecuted under the Income Tax Act for an offence which carries a penalty of a fine of up to S$10,000 and/or imprisonment of up to two (2) years or such other penalties as may be prescribed under the Income Tax Act or its regulations, or any re-enactment or replacement thereof, at the time of commission of the offence.

(For individuals)
I/We further undertake to notify AIA Singapore within 30 days of any change to my/our country of residence for tax purposes or TIN (if any), and to complete, sign and submit to AIA Singapore my/our relevant particulars in the format prescribed by AIA Singapore in order for it to fulfil its reporting obligations under the Income Tax Act. I/we further undertake to provide AIA Singapore any documents and information that may be reasonably required in relation to the change of my/our country of residence for tax purposes.

(For entities and other non-individuals)
I/We further undertake to notify AIA Singapore within 30 days of any change to the Policyholder's or a Controlling Person's country of residence for tax purposes or TIN (if any) and to complete, sign and submit to AIA Singapore the relevant particulars of the Policyholder or Controlling Person relating to such change in the format prescribed by AIA Singapore in order for it to fulfil its reporting obligations under the Income Tax Act. I/we further undertake to provide AIA Singapore any documents and information that may be reasonably required in relation to the change of the Policyholder's or Controlling Person's country of residence for tax purposes.

Note: The term "Controlling Person" has the meaning given to it in the Common Reporting Standard in the Schedule to the Income Tax Act (International Compliance Agreements) (Common Reporting Standard) Regulations 2016.

I/We acknowledge and accept that AIA Singapore will rely on the self-certification relating to the Policyholder's/ Controlling Persons' country of tax residence contained in this form as applicable to all policies and products issued to the same person(s), and any information in any earlier self-certification inconsistent with the information provided above will be disregarded for the purposes of fulfilling its reporting obligations to the Comptroller.

Have you declared your tax residency with AIA before?

- ☐ No. Please complete a Self-Certification Form.
- ☐ No. Not required to submit Self-Certification Form (change of indices is within the same country).
- ☐ Yes, but there are changes to my tax residency. I have completed the self-certification below.
- ☐ Yes, but there are no changes to my tax residency.

Note: Do note that a separate Self-Certification Form is required for each Policyowner/Trustee/Assignee.

G. Declaration and Authorisation

1. I hereby request that the policy(ies) stated in this form be changed in accordance with the above application.
2. I understand and agree that no application is valid until this change form is received by AIA Singapore Private Limited ("AIA Singapore") during the life time of the Insured and is finally accepted by AIA Singapore.
3. I understand and agree that application shall not be considered as effected by reason of any money paid or settlement made in payment of, or no account of any premium, until this form has been duly approved by the authorised Officer of AIA Singapore.
4. I understand and agree that my application is subject to the terms and conditions as stated in the Policy Contract and is effective only when it has been officially accepted and notified to me by AIA Singapore.
5. I understand and agree that if AIA Singapore accepts my application, the Incontestability and Suicide Provisions (if any) thereof shall have effect from the approval date of my application.
6. I understand and agree that the application of the Contracts (Rights of Third Parties) Act 2001 and any subsequent revision or replacement thereof is expressly excluded insofar as this contract of insurance is concerned.
7. I/We understand and agree that should a Relevant Person be found at any time to be a Prohibited Person, AIA Singapore is entitled, at its absolute discretion and without any liability to me/us, to (i) decline, block, suspend or cancel this application or any request, instruction, or transaction including any payment, transfer or receipt of money; (ii) decline to provide cover or to pay any claim or benefit under the Policy; and (iii) immediately terminate or void the Policy. AIA Singapore's decision in exercising this right shall be final. This right may only be waived in writing; no delay or failure in exercising this right shall be deemed as a waiver of the same. "Relevant Person" includes (a) persons and entities who are the policy holders, insured persons, beneficiaries, trustees, payees, or assigns; (b) their beneficial owners or affiliates; (c) (in the case of an entity) their directors, partners, or direct / indirect shareholders or persons having executive authority, or (d) natural persons appointed to action their behalf. "Prohibited Person" includes a person or entity that is subject to any sanction, prohibition or restriction administered by any regulatory authorities in any country or jurisdiction, such that the provision of such cover, payment of such claim or provision of such benefit may in AIA Singapore's opinion expose it to any, or any risk of, sanction, prohibition or restriction. As an ongoing obligation, I/we will immediately inform AIA Singapore if there are any changes to the identities, status, constitution, establishment, particulars and identification documents of these Relevant Persons. I/we will indemnify AIA Singapore and hold it harmless from and against any and all related losses, damages, costs and/or expenses suffered and/or incurred, including but not limited to legal costs.
8. I/We hereby authorise, agree and consent to AIA Singapore, its associated persons/organisations, its and their third party service providers and its and their representatives, whether within or outside Singapore (collectively "**AIA Persons**") to collect, use, disclose, store, retain and/or process (collectively, "**Use**") all personal data and information ("**Personal Data**") that had/has been provided to AIA Persons and/or that AIA Persons possess about me/us (whether from me/us or a third party), in the manner and for the purposes described in the AIA Privacy Policy Statement ("**Statement**"), including but not limited to, processing of this Application/form and/or to provide subsequent advice or services to me/us in relation to this Application/Policy/form/AIA Vitality Programme and/or any other existing or future policy/policies/programmes that I/we may hold/participate with AIA Singapore. Without prejudice to the foregoing, I/we agree to comply with the terms of the Statement, including where such Statement is amended from time to time by AIA Singapore in accordance with its terms. Where Personal Data of another person is disclosed by me/us, I/we represent and warrant that I/we have obtained the consent of the individual concerned, except to the extent such consent is not required under relevant laws: (i) to collect such Personal Data; (ii) to disclose such Personal Data to the AIA Persons; and (iii) for the AIA Persons to Use such Personal Data in the manner and for the purposes described in the Statement. I/We hereby specifically waive (on our own behalf and on behalf of each such other person, and I/we represent and warrant that such other person has granted me/us authority to so waive) any right to bring a claim of any nature against any of the AIA Persons in respect of any above-mentioned Use and/or any Use of Personal Data in the nature of or for any of the purposes described above or in the Statement. I/We hereby agree to indemnify AIA Persons for all losses and damages that AIA Persons may suffer in the event that I/we are in breach of any representation and warranty provided by me/us herein. This authorisation shall bind my/our successors and assignees, and remains valid, notwithstanding death, irrespective of whether or not my/our Application/form is accepted by AIA Singapore. A photocopy of this authorisation shall be valid and effective as the original.

Signature of Policy Owner/Assignee

Date

*Contact Number

*** We will call you at this number if we need any clarifications regarding your request. This contact number will not be updated into our records. If you wish to update your contact details, please complete the Update of Address & Contact Details form.**

AIA Consultant / Insurance Representative's Name

AIA Consultant / Insurance Representative's Code

AIA Consultant / Insurance Representative Unit Name

Mobile No.

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Please fold along dotted line

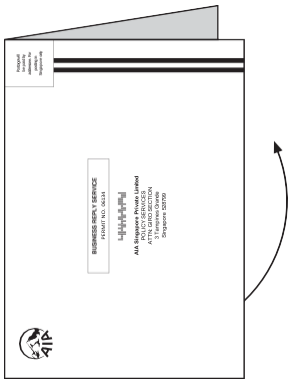
Have you

- ☐ *Indicated your Policy No(s)?*
- ☐ *Signed and dated all forms/letters?*
- ☐ *Obtained the name, I/C no, & signature of a witness who is not related to you?*

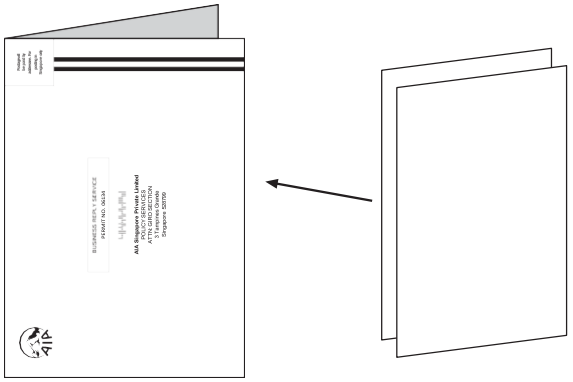
To avoid any delays, please also ensure that your signature is executed in the same manner as our records. You may want to refer to the application form in your contract for a specimen of the original signature.

How to use this postage-paid return envelope:

1) Fold this in half with the mailing details exposed



2) Attach your supporting documents within



3) Seal all 3 sides with glue encasing your supporting documents and mail