

Personal Data Notice & Consent for Marketing Purposes

1.	I hereby consent to allow Zurich Li	fe Insurance (Singapore	e) Pte. Ltd.	and Zurich In	nternational	Life Limited	and its	employees
	and agents (collectively/individually	"Zurich Insurance")	and Zurich	Insurance's t	third party	service provi	ders to:	

(a) collect, use, disclose and/or process personal data about me that I had previously provided Zurich Insurance, that I now provide Zurich Insurance, that I may in future provide Zurich Insurance with and/or that Zurich Insurance possesses about me such as but not limited to my name, my identification number, my telephone numbers, my address, for the following purpose:

	to provide me with an analysis of my financial needs, marketing, advertising and promotional information, mater and/or documents relating to insurance and/or investment products and/or services that Zurich Insurance may be selling, marketing, offering or promoting, whether such products or services exist now or are created in the futu (the "Purpose"); and										
		send me such marketing, advertising and promotional information through any and/or all of the following modes of communication:									
	(i)) postal mail and/or electronic transmission to my email address; and									
		Address									
		Email									
	440										
	(ii)	i) to the following telephone number(s) by way of (1) voice call / phone call; (2) SMS/MMS (text messages); and (3) fax; and									
		Mobile	Office number	Resid	ential number	Others					
2.	ou Zu int Zu repre that I	utside of Singapore urich Insurance pro formation through urich Insurance. esent and warrant have read and und	ta about me to Zurich Insurance, for the above Purpose; and I accessing my personal data (inclustration any and/or all of the abovement of the subsection of the above that I am the user and/or subsection and the above provisions.	also consent to ding sending r ntioned modes riber of the tel	o such third party ser ne such marketing, a s of communication)	vice provide advertising a for the abo	ers or agents of and promotional ve Purpose for				
	Signature		Name								
				NRIC/Passpo	rt number Date						
					DD	MM	YYYY				
If applicable and for Financial Adviser Representative use only I confirm that I have explained the above provisions to the abovementioned individual and that indeed the individual in this form has read and understood these provisions and has appended his/her signature.											
Signature of Financial Adviser Repres			Adviser Representative	Financial Ad							
				RNF Code	Date						
					DD	MM	YYYY				

life assurance, investment and protection products and is authorised by the Isle of Man Government Insurance and Pensions Authority.

Zurich International Life Limited (Singapore branch) is licensed by the Monetary Authority

Registered office: 43 - 51 Athol Street, Douglas, Isle of Man, IM99 1EF, British Isles. Registered in the Isle of Man: No. 20126C.

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Zurich International Life Limited acting through its Singapore branch at Singapore Land Tower #29-05, 50 Raffles Place, Singapore 048623.

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Zurich Life Insurance (Singapore) Pte. Ltd. is licensed by Monetary Authority of Singapore to conduct life insurance business in Singapore, is a Member of the Life Insurance Association of Singapore, and a Member of the Singapore Financial Dispute Resolution Scheme.

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