CHUBB®

Chubb Insurance Singapore Limited
Co Regn No.: 199702449H
138 Market Street
#11-01 CapitaGreen
Singapore 048946

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F +65 6298 1055
www.chubb.com/sg

Withdrawal of Consent Form

Name of Customer: _____

NRIC/Passport No.: _____

Block No.: _____ Unit No.: _____

Street Name: _____

_____ Postal Code: _____

Policy No.: 1. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

2. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

3. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

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

I hereby submit notice to withdraw consent from receiving marketing information and messages from Chubb Insurance Singapore Limited (Chubb) on the following Singapore number(s) and/or email address(es) through the communication modes indicated below:

Contact No. 1: _____	Contact No. 2: _____	Contact No. 3: _____
☐ Phone / Voice Calls	☐ Phone / Voice Calls	☐ Phone / Voice Calls
☐ Text Messages	☐ Text Messages	☐ Text Messages
☐ Fax Messages	☐ Fax Messages	☐ Fax Messages
☐ Email Address	☐ Email Address	☐ Email Address
_____	_____	_____
_____	_____	_____

I understand that:

i) I may continue to receive marketing messages through the mode(s) of communication indicated above within the next 10 business working days from the date of receipt of my written notification.

ii) my withdrawal of consent is only applicable to receiving marketing messages though the mode(s) of communication indicated above and does not affect my ability to receiving marketing messages through other mode(s) of communications. Notwithstanding my withdrawal of consent stated above, I will still be able to receive from Chubb information, reminders or notices that are necessary for purpose of administering my policy.

iii) I can change my mind regarding the withdrawal of consent at any time by writing in to **dpo.sg@chubb.com**.

Please return this form to:

Chubb Data Protection Officer
138 Market Street
#11-01 CapitaGreen
Singapore 048946
E dpo.sg@chubb.com

_____ _____
Signature Date

Chubb. Insured.™

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