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| FORM A  Page 1 of 3  **REQUEST FORM** NEW PRINCIPAL REPRESENTATION Name of Agent/ Agency : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  NRIC / Business Reg No. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GIAS Agent No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (If applicable)  Email Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Primary Principal  (Please tick One only)        Name of Principals Currently Representing :   1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ( )      1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ( ) 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ( )   **\*** If you are currently representing 3 principals and intend to replace / terminate one of the above principals, please indicate with a “T” in the brackets provided above and attach together with your letter of termination addressed to the principal (replace / terminate) and copied to GIA.  Cheque Details  Bank Name : \_\_\_\_\_\_\_\_\_\_\_\_ Cheque Date : \_\_\_\_\_\_\_\_\_\_\_  Cheque No. : \_\_\_\_\_\_\_\_\_\_\_\_ Amount : \_\_\_\_\_\_\_\_\_\_\_  *(To be signed by the Chief Executive of the new principal representation)*  We agree to be the Primary Principal.*(applicable for 1st Principal Application only)*  I confirm the above request and will await the approval of the above application.  Name of Insurance Company : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ For GIA Use Date Vetted: \_\_\_\_\_\_\_\_\_  Name of Chief Executive : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Chief Executive : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Note: The GIA will not be responsible for any misuse of the information by the parties concerned.** |
| FORM A  Page 2 of 3  Type of Agent (Please Tick One Only)  General Agent  General & Life Agent  Trade Specific  - (If you tick this, please complete  Type of Trade)  **Type of Trade** (Please Tick One Only)  (Applicable for Trade Specific Agent only)  Freight Forwarder  Motor Dealer  Travel Agency  Maid Agency Agent Account (Please Tick One Only) Cash Agent  Credit Agent  *For* ***Credit Agent****, kindly provide the following details: -*  Bank Name : \_\_\_\_\_\_\_\_\_\_ Bank Branch : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUST BE COMPLETED BY APPLICANT/AGENTCONFIRMATION OF REQUEST \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby confirmed that I/we seek to  *{Name of Applicant/Agent}*  represent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as one of my / our   *{Name of Insurance Company}*  principals and that the information declared in my / our earlier applications is the same  for this new principal. I / we hereby authorize the Registrar to release details of my / our  application with my / our current principal/s to my / our new principal.  Signature / Name :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_  *{To be signed by the applicant/agent}*  **Note: The GIA will not be responsible for any misuse of the information by the parties concerned.** |

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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | Name of insurance companies/agencies/broking firms | | Position Held | Date Joined | Date Left | | 1 |  |  |  |  | | 2 |  |  |  |  | | 3 |  |  |  |  |   FORM A  Page 3 of 3  TO BE COMPLETED BY NOMINEE AGENT  If you would like to be registered and appointed as a **Nominee Agent** of the agent, please provide us the following information: - (Please attach additional copies of this page- Form A Pg 3, if there is **more** than 1 Nominee Agent)  **PARTICULARS**    Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    NRIC/Passport No. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Citizenship : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date of Birth : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender : Male  Female  Residential Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (S) \_\_\_\_\_\_\_\_\_\_\_\_\_  **OTHER DETAILS**  Academic Qualification : ‘O’ level  Tertiary  Bachelor  ‘A’ level  University  Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Professional Qualification : CGI  PGI  COMGI  PGI & COMGI  CGI Exempted Under Grandfathers’ Clause  Others \_\_\_\_\_\_\_\_\_\_\_\_    Current Position : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Total Years of Experience : \_\_\_\_\_\_\_  Percentage of Revenue/Salary : \_\_\_\_\_\_\_ % Part-time  Full-time  DETAILS OF EXPERIENCE  **Note: The GIA will not be responsible for any misuse of the information by the parties concerned.** |