

<b>Company Name:</b> TCC Credit Co-Operative Ltd	<b>Document Number:</b> TCC-PF-033
<b>Nomination Form</b>	<b>Revision: 05</b>
	<b>Effective Date: 24<sup>th</sup> Oct 2017</b>

**NOMINATION FORM**

**IMPORTANT NOTE:**

- If nominees are below 21 years old, Guardian must be nominated.
- Your witness must not be yourself or your nominee(s). Your witness must be 21 years old and above.
- The use of correction fluid/tape or not signing against amendments will void the nomination.
- A form without any witness will void the nomination.

**1. Particulars of TCC Ltd Member**

Name (as in NRIC) in block: .....

NRIC Number: ..... Member Number: .....

Address : ..... Postal Code .....

Tel (Home): ..... Tel (Hp): ..... Tel (Off): .....

Email Address: .....

**2. Particulars of Nominee(s)**

**NOMINEE 1**

Name (as in NRIC): .....

NRIC Number: ..... Relationship: ..... Percentage (%): .....

Address : ..... Postal Code .....

Tel (Home): ..... Tel (Hp): ..... Tel (Off): .....

*Guardian's Particulars (if Nominee is below 21 years old)*

Name of Guardian: ..... NRIC Number: .....

Address : ..... Postal Code .....

Tel (Home): ..... Tel (Hp): ..... Tel (Off): .....

**NOMINEE 2**

Name (as in NRIC): .....

NRIC Number: ..... Relationship: ..... Percentage (%): .....

Address : ..... Postal Code .....

Tel (Home): ..... Tel (Hp): ..... Tel (Off): .....

*Guardian's Particulars (if Nominee is below 21 years old)*

Name of Guardian: ..... NRIC Number: .....

Address : ..... Postal Code .....

Tel (Home): ..... Tel (Hp): ..... Tel (Off): .....

<b>Company Name:</b> TCC Credit Co-Operative Ltd	<b>Document Number:</b> TCC-PF-033
<b>Nomination Form</b>	<b>Revision: 05</b>
	<b>Effective Date: 24<sup>th</sup> Oct 2017</b>

**NOMINEE 3**

Name (as in NRIC): .....

NRIC Number: ..... Relationship: ..... Percentage (%): .....

Address : ..... Postal Code .....

Tel (Home): ..... Tel (Hp): ..... Tel (Off): .....

*Guardian's Particulars (if Nominee is below 21 years old)*

Name of Guardian: ..... NRIC Number: .....

Address : ..... Postal Code .....

Tel (Home): ..... Tel (Hp): ..... Tel (Off): .....

**NOMINEE 4**

Name (as in NRIC): .....

NRIC Number: ..... Relationship: ..... Percentage (%): .....

Address : ..... Postal Code .....

Tel (Home): ..... Tel (Hp): ..... Tel (Off): .....

*Guardian's Particulars (if Nominee is below 21 years old)*

Name of Guardian: ..... NRIC Number: .....

Address : ..... Postal Code .....

Tel (Home): ..... Tel (Hp): ..... Tel (Off): .....

**3. Particulars of Witnesses**

**WITNESS 1**

Name (as in NRIC): .....

NRIC Number: ..... Relationship to TCC Member: .....

Address : ..... Postal Code .....

Tel (Home): ..... Tel (Hp): ..... Tel (Off): .....

Email Address: .....

Signature of Witness 1 & Date:

<b>Company Name:</b> <b>TCC Credit Co-Operative Ltd</b>	<b>Document Number:</b> <b>TCC-PF-033</b>
<b>Nomination Form</b>	<b>Revision: 05</b>
	<b>Effective Date: 24<sup>th</sup> Oct 2017</b>

**WITNESS 2**

Name (as in NRIC): .....

NRIC Number: ..... Relationship to TCC Member: .....

Address : ..... Postal Code .....

Tel (Home): ..... Tel (Hp): ..... Tel (Off): .....

Email Address: .....

Signature of Witness 2 & Date:

**4. Declaration by TCC Member**

i) I do not wish to distribute my TCC Ltd moneys according to the Intestacy laws/Inheritance Certificate, whichever is applicable. I wish to distribute all moneys that may be due to me from TCC Ltd to the person/persons named in this form.

ii) I nominate the person/persons named in this form to receive according to the share set down against his/her/their name(s) the TCC Ltd moneys in the event of my death.

iii) I understand that this nomination will be superseded by a subsequent nomination made by me.

iv) I sign on the form

(a) in the presence of the 2 witnesses; or

(b) in the presence of the 2 witnesses, after the contents have been read over and explained to me in ..... (please specify language/dialect) by

..... (Name) ..... (NRIC No.)

Signature of TCC Member & Date:

<b>Company Name:</b> TCC Credit Co-Operative Ltd	<b>Document Number:</b> TCC-PF-033
<b>Nomination Form</b>	<b>Revision: 05</b>
	<b>Effective Date: 24<sup>th</sup> Oct 2017</b>

FOR OFFICIAL USE ONLY	
Receipt Date:	
Received By:	
Processed By:	
Remarks:	