กรุงเทพประกันชีวิต
BANGKOK LIFE

Income Tax Deduction Benefit Declaration

(Excluding Group Insurance)

Date.....

I, (Mr., Mrs., Ms.)…… (“Insured”) whose passport number is.....would like to notify Bangkok Life Assurance Public Company Limited (“Company”), that

(Please choose one of the answers)

☐ I intend to apply any tax benefit that has been derived from my payments of eligible insurance premium towards my personal income tax determination under the Revenue Code of Thailand, from this tax year onwards. I give the Company a consent to release my information to the Revenue Department of Thailand as required by laws. My tax identification number for Thailand is

☐☐☐☐☐☐☐☐☐☐☐☐☐

☐ I will not take any tax benefits towards my personal income tax obligation (if any) under the Revenue Code of Thailand.

Signature ……..

(…….....)

The Insured

Signature ……..

(…….....)

Guardian

In case where the insured is under the legal age

Remarks

• You may provide the above information via telephone by contacting our Customer Service Centre at 02-777-8888.

• This form, along with a certified copy of your passport, can be submitted to your agent or the Company directly via the following channels :

- Bangkok Life Assurance branches
- E-mail: csc@bangkoklife.com
- Postal service: Bangkok Life Assurance Public Company Limited, Policy Management Department,1415 Krungthep-Nonthaburi Road, Wongsawang, Bangsue, Bangkok 10800
- Fax: 02-777-8530