



**Central Provident Fund Board**

Website : [www.cpf.gov.sg](http://www.cpf.gov.sg) CPF Call Centre: 1800-227 1188  
E-mail : [member@cpf.gov.sg](mailto:member@cpf.gov.sg)

For Official Use Only  
Serial No.

**CASH Nomination Form**

**NOTE:**

- This form may take you 10 minutes to complete.
- Please read the instructions carefully on CPF nomination before completing the form.
- Please furnish all information required in the form. An incomplete form will delay the processing of your form.
- Please sign against amendments made. Use of correction fluid/tape will render the application void.
- Your witnesses must not be yourself or your nominee(s). They must be at least 21 years old. We would encourage you to complete this form before our Customer Service Officers (CSOs) at any of our Service Centres who can be your witnesses and clarify any questions you may have in respect of the nomination process.
- Please note that the Board will keep your CPF nomination details and statement of account confidential even after your demise. If you wish to authorise the Board to disclose your CPF information after your demise, please come down personally to any CPF Service Centres for assistance.

**1. PARTICULARS OF CPF MEMBER**

Name (as in NRIC/Passport)

NRIC or CPF Account Number

.....

S/T									
-----	--	--	--	--	--	--	--	--	--

Tel/HP No.: .....

Email Address: .....

Marital Status

Date of Marriage (dd/mm/yy)

Country where marriage took place

Single/Married/Divorced/Widowed/Separated<sup>#</sup>

\_\_\_\_\_

Singapore  Others, please specify : \_\_\_\_\_

<sup>#</sup>Delete where applicable

**2. PARTICULARS OF NOMINEE(S)**

Name (as in NRIC/passport)	NRIC/Passport No.	Postal Address and Email Address	Relationship to CPF member	Share (in %) *
<b>Total (%)</b>				

\* Figures under this column should add up to 100%

**3. PARTICULARS OF WITNESSES**

Name (as in NRIC / Passport)	1.	2.
NRIC / Passport No.		
Address		
Tel / HP No.		
Relationship to CPF Member		
Signature		

**4. DECLARATION**

- i) I do not wish to distribute my CPF moneys according to the Intestacy laws/Inheritance Certificate, whichever is applicable. I wish to distribute my CPF moneys and any shares in an approved corporation to the person/persons named in the form.
- ii) I nominate the person/persons named in the form to receive according to the share set down against his/her/their name(s) the CPF moneys and any shares in an approved corporation designated under section 26(1) of the Central Provident Fund Act payable on my death out of the Central Provident Fund under section 25(1) of the Act.
- iii) I declare that where any further distribution of shares in an approved corporation will result in fractions of shares, the remaining shares shall not be distributed but shall be received by the nominee first-named in the form who survives me.
- iv) I understand that this nomination will be superseded by a subsequent nomination made by me under Central Provident Fund (Nominations) Rules.
- v) I understand that this nomination shall not supersede any nomination made by me under the Central Provident Fund (Minimum Sum Scheme Nominations) Rules.
- vi) I sign/thumbprint on the form
  - (a) in the presence of the 2 witnesses; and
  - (b) after the contents have been read over and explained to me in \_\_\_\_\_ (please specify language/dialect) by \_\_\_\_\_ (Name) \_\_\_\_\_ (NRIC/Passport No.) in the presence of the 2 witnesses.
- vii) I understand that CPF B will not disclose my CPF nomination details and statement of account after my death.

\_\_\_\_\_  
Signature/Right Thumbprint of CPF member

\_\_\_\_\_  
Date

**FOR OFFICIAL USE ONLY**

<b>Receipt Date:</b>		
<b>Checked By:</b>		<b>Verified By:</b>
<b>Remarks:</b>		