

CHURCH OF THE SACRED HEART

111 TANK ROAD, SINGAPORE 238069

Tel: 6737 9285

Email: sacredheartchurch@catholic.org.sg www.churchofthesacredheart.sg

NICHE UPDATE FORM

Niche No.:	Block:			
	Level:	Unit No:		
(A) Particular	s of Applicant (Only t	ne Applicant is allowed to update t	he records)	
	nderline surname)			
Address:				
Home Tel No:		Handphone No:		
E-mail Address				
Signature of Applic	cant			



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(B) (please provide <u>at least One</u> alternative contact person other than the Applicant)

(i) First Contact Person	
Name: (Please underline surname)	
Address:	
NRIC / Passport No.:	Catholic:
	Yes / No
Home Tel No:	Handphone No:
Relationship to	E-mail Address:
Beneficiary1:	
Beneficiary2:	
(ii) Second Contact Person	
Name: (Please underline surname)	
Address:	
NRIC / Passport No.:	Catholic:
	Yes / No
Home Tel No:	Handphone No:
Relationship to	E-mail Address:
	L man Address.
Beneficiary1:	
Beneficiary2:	



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NICHE UPDATE FORM

(C) Particulars of Beneficiaries					
Beneficiary 1					
Name: (Please underline surname)					
NRIC / Passport No.:	Contact:				
Date of Birth: Date of Death (if a)	oplicable):	Date of Interment:			
Sex: Male / Female	Catholic: Yes / I	No			
Relationship between Beneficiary 1 and Beneficiary 2					
Beneficiary 2					
Name: (Please underline surname)					
NRIC / Passport No.:	Contact:				
Date of Birth: Date of Death (if a)	oplicable):	Date of Interment:			
Sex:	Catholic:				
Male / Female	Yes / N	0			