Administration of CPF / Baby Bonus / Edusave / PSEA Monies

URL: <u>https://eservices.mlaw.gov.sg/PTO/welcome.xhtml</u>

NOTE: You need not be a beneficiary to submit the online application. Before you begin, please have the required documents to fill in the particulars of the Deceased and the beneficiary(s) and to upload them for your submission. If you are unable to complete the application, you may save a draft copy for up to **7 calendar days**.

Saving a draft application

When you are in the midst of an application, you may click on the "Save" button to save the details. Once the application is saved, you will see the message in blue.

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SINGAPORE	Home · FAQs · Contac	t Info • Feedback • Useful Links • Sitemap • Lo
Step 1         Step 2           Create / Edit Case Details         Enter Case Details	Its Confirm Submission	Step 4 Transaction Completion
E-service information has been saved.		
DMINISTRATION OF CPF / BABY BONUS / EDUSAVE / PSEA MONIES		
Fields marked with * are mandatory.		
Deceased & Applicant Funeral Expenses Next of R	in Supporting Document(s)	
Deceased Details		
Name *		
Any other name(s) as recorded in marriage certificate or birth certificate		
Deceased NRIC / Passport No.*		
Date of Birth (DD/MM/YYYY)*		
Marital Status*		
Gender*	Male OFemale	
Is the Deceased a Muslim?*	⊖Yes <sup>®</sup> No	
Occupation*		
Place of Domicile*	→ If Others, please specify	
Date of Death (DD/MM/YYYY)*	۵	
Death Certificate No.		
Applicant Details		
Name*		
Any other name(s) as recorded in marriage certificate or birth certificate		
Applicant NRIC / Passport No.*	Retrieve Myjnfo	Clear Form
Date of Birth (DD/MM/YYYY)*		
Relationship with Deceased*	<ul> <li>If Others, please specify</li> </ul>	
Email Address*		

Residential Address (Please enter either Local Address or For	eign Address)
Local Address*	
Postal Code*	Retrieve
Blk/House No.	-
Level-Unit*	# -
Street Name	
Building Name	
<u>OR</u>	
Foreign Address	
Correspondence Address (if different from Residential Address	s) (Please enter either Local Address or Foreign Address)
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The saved application will be available when you next log in, unless it has exceeded 7 calendar days. Click on the "Edit" button to proceed.

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Step 1 Create / Edit Case Details	Step 2 Enter Case Details	Step 3 Confirm Submissio	n	Step 4 Transaction Completion
ADMINISTRATION OF CPF / BABY BONUS	/ EDUSAVE / PSEA MONIES			
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Guidelines For Completion				
You can save you pending application(s) for	up to 7 calendar days, after which the record(	s) will be deleted.		
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Submit new application

## Step 1: Click on the link "Administration of CPF / Baby Bonus / Edusave / PSEA Monies".





Submission of Motor Accident Compensation Settlement under the Motor Vehicle (Third-Party Risks and Compensation) Act (Cap 189). This eservice will take about 15-30 minutes to complete. Approval of Solicitor and Client Costs

Approvator Solicitor and Client Costs Submission of Solicitor and Client Costs for Approval in lieu of taxation under the Motor Vehicle (Third-Party Risks and Compensation) Act. This eservice will take about 15-20 minutes to complete.

This eservice will take about 15-20 minutes to com

Motor Accident Compensation Settlemen

SUBMISSION OF SUPPORTING DOCUMENTS

Submission of Supporting Documents Submission of additional supporting documents for Trust and Motor accident cases. This eservice will take about 5-10 minutes to complete. Step 2: Select the login type and log in accordingly.

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PUBLIC TRUSTEE	
SELECT LOGIN PLEASE SELECT YOUR LOGIN OPTION.	
<ul> <li>Important Notes</li> <li>You will require a Singapore Personal Access (Singpass) or Corporate Digital Identity for Businesses and portals.</li> <li>If you do not have a Singpass, you may apply for one via the Singpass online request service.</li> <li>If you are not authorised to access Corporate account/Corppass, register now. Alternatively, request your</li> <li>If you are not eligible for a Singpass or Corppass, apply for a Non-Singpass Account log in here.</li> </ul>	Other Entities Access (Corppass) to log in to our Corppass Admin to create an account for you.
For Individual Users Log in with singpass	
For Business Users Log in with singpass	
For Non-Singpass Users Non-Singpass Holder	
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Step 3: Select the deceased's ID type and enter the ID number. Click on the "Create" button.

Step 1 Create / Edit Case Details	Step 2 Enter Case Det	tails	Step 3 Confirm Submission	St Transactio	ep 4 on Completion
MINISTRATION OF CPF / BABY BOI	NUS / EDUSAVE / PSEA MONIES	5			
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Guidelines For Completion					
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Step 4: You will not see the following screen if the deceased's CPF monies is above \$6,000 (proceed to Step 5). Otherwise, answer the question below and click on the "Next" button.

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Step 1 Create / Edit Case Details	Step 2 Enter Case Details	Step 3 Confirm Submission	Step 4 Transaction Completion
ADMINISTRATION OF CPF / BABY BONUS / EDU	ISAVE / PSEA MONIES		
<ol> <li>As the amount of CPF monies in the estate is Note : The Public Trustee will reimburse the of Yes ONo</li> </ol>	does the claimant wish to claim claimant up to a maximum of \$6,000.00 fro Next	all the CPF Monies as Funeral Reimbursement? m Deceased's Estate. Save Cancel 0-30 minutes to complete. re 1 month to process.	
If you encounter any problems vacy Statement Terms of Use Rate This Website	with this service, please contact us at 1800-2255-52	9 (during office hours), or send an email to Helpdesk at Onek	linLaw@mlaw.gov.sg.

You are not required to enter the beneficiary(s)'s details (proceed to Step 6) if you click on the 'Yes' button to claim the full amount as reimbursement for funeral expenses.

Step 5: Enter the deceased's and applicant's details. Click on the "Next" button.

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telationship with Deceased*	Please Select	<ul> <li>If Others, please specify</li> </ul>	
mail Address*			
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Step 6: Enter the funeral expenses details. Otherwise, select the checkbox "Click here if the claimant does not wish to seek reimbursement of funeral expenses". Click on the "Next" button.

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Step 7: Enter details	of the b	peneficiary(s) l	by clicking on a	the "Create" button.
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Step 1 Create / Edit Case Details	Step 2 Enter Case Details	Step 3 Confirm Submission	Step 4 Transaction Comp	letion
ADMINISTRATION OF CPF / BABY BONUS	/ EDUSAVE / PSEA MONIES			
Fields marked with * are mandatory.				
Deceased & Applicant Fune	ral Expenses Next of Kin Sup	porting Document(s)		
S/No. Relationship with Deceased	Name	Date of Birth (DD/MM/YYYY)	Date of Death (DD/MM/YYYY)	Action
No matching records				
If you encounter any p	Back Next Save This form will take abou This application will roblems with this service, please contact us at 1800-2255-	Clear Page Cancel     420-30 minutes to complete.     take 1 month to process.     529 (during office hours), or send an email to Helpd	esk at OneMinLaw@mlaw.gov.sg.	

ADMINISTRATION OF CPF / BABY BONUS / EDUSAVE / PSEA MONIES

## Create New Beneficiary

Next of Kin Details	
Relationship with Deceased	Please Select
Name*	
Any other name(s) as recorded in marriage certificate or birth certificate	
NRIC / Passport No.*	Please Select eg. S1234567A
Date of Birth (DD/MM/YYYY)	0
Are you legally separated or divorced from the Deceased?	⊖Yes ONo
Date of Death (if applicable) (DD/MM/YYYY)	۵
Death Certificate No. (if applicable)	
Contact No.	Please Select
Email Address	N
Residential Address (Please enter either Local Address or Foreigr	Address)
Local Address	
Postal Code	Retrieve
Blk/House No.	Auto-retrieved by system
Level-Unit	#
Street Name	Auto-retrieved by system
Building Name	Auto-retrieved by system
<u>OR</u>	
Foreign Address	

Correspondence Address (if different from Residenti	ial Address) (Please enter either Local Address or Foreign Address)
Local Address	
Postal Code	Retrieve
Blk/House No.	Auto-retrieved by system
Level-Unit	#
Street Name	Auto-retrieved by system
Building Name	Auto-retrieved by system
OR	
Foreign Address	
	Save      Reset      Cancel

## After adding details of all the beneficiaries, click on the "Next" button.

	Ç Create / I	Step 1 Edit Case Details		E	Step 2 Enter Case Details		Confin	Step 3 m Submission	Ste	p 4 Completion
ADMINI	STRATIO	N OF CPF / BAB	Y BONUS	EDUSAVE / PS	SEA MONIES					
Fields m	narked with * Decease	* are mandatory. d & Applicant	Funera	I Expenses	Next of Kin	Suppo	orting Document(s)			
Next o	f kin se see the	list of <u>beneficiarie</u>	es of the es	ate)						
If ben	S/No.	Relationship w Deceased	their particu rith	Name	o be entered togethe	er with deat	Date of Birth (DD/	MM/YYYY)	Date of Death (DD/MM/YYYY)	Action
	1									🖍 Edit
+	Create	🗑 Delete								
		If you enc	ounter any pro	blems with this serv	Back Next This form wil This app ice, please contact us at	Save II take about 2 dication will tal 1800-2255-52	Clear Page C-30 minutes to complete. Ke 1 month to process. 9 (during office hours), or s	Cancel	desk at OneMinLaw@mlaw.gov.sg.	

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Step 8: Upload the supporting documents.

Before clicking on the "Next" button, please read the 'Declaration' and select the checkbox "Yes, I agree".

5	SINGAPORE		Hom	e • FAQs • Contact Info	<ul> <li>Feedback • Useful L</li> </ul>	inks∙ Sitemap∙ Log
C	Step 1 Create / Edit Case Details	Step 2 Enter Case Details	Step Confirm Sub	3 mission	S Transacti	tep 4
ADMINIST	RATION OF CPF / BABY BONUS / ED	USAVE / PSEA MONIES				
Fields mark	ked with * are mandatory. eceased & Applicant Funeral Ex	openses Next of Kin Supp	orting Document(s)			
Submis	ssion of Documents					+
Please r	note that the size of each attachment(	if any) must NOT exceed 5MB.	•			TOP
S/No.	Docu	ment Type	Upload Docu	iment	File Name	Action
1	Deceased's Death Certificate		+ Upload			Delete
2	Deceased's Birth Certificate		+ Upload			
3	Parent(s) Marriage Certificate / Dec Certificate(s) if parent(s) are decea	ree Nisi Absolute if divorced. Death sed	+ Upload			t Delete
4	Identity Card of Applicant		+ Upload			To Delete
5	Deceased's Marriage Certificate / E applicable). Death Certificate if spo	becree Nisi Absolute if Divorced (if buse is deceased	+ Upload			Delete
6	Identity Card of Father, Front page statement indicating the account n	of bank account passbook or bank o. (if applicable)	+ Upload			Delete
	I hereby undertake to fully indemnify th Public Trustee arising from or in relation use of any of the information provided L I declare that the person(s) I have discl and that to the best of my knowledge ar I declare that all the information I have i use the information to perform their dut I also know that if any of the information	DECL a Public Trustee and the Government of th h to any payment made to me or any other by me. used in my application is the only benefician d belief, there is no other beneficiary. given in this application form is true and th les. is false, I may be prosecuted for giving th	ARA HUN e Republic of Singapore agai person by the Public Trustee iny / are all the beneficiaries o at I give the information know e false information.	nst all damages (includi or his officers in the dis f the deceased's CPF / ing that the Public Trust	ng costs and expense charge of their duties Baby Bonus / Edusav ee and his officers wo	is) suffered by the in reliance on or e / PSEA Monies uld rely on and
		V Y	es, I agree			
<u>.</u>	If you encounter any problem	Back Next Save This form will take abo This application will s with this service, please contact us at 1800-2255-3 Please visit our website at <u>www.mi</u> s	Clear Page Ca     Ca     A 20-30 minutes to complete.     Iake 1 month to process.     29 (during office hours) or submit an     aw <u>oov sa</u> if you have any further que	ncel online enquiry through <u>Conta</u> rries.	ct Us @ OneMinLaw.	TOP

## Step 9: Verify that the information entered are correct. Click on the "Submit" button.

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Step 1 Create / Edit Case Details	Step 2 Enter Case Details	Step 3 Confirm Submission	Step 4 Transaction Completion
ADMINISTRATION OF CPF / BABY BONUS /	EDUSAVE / PSEA MONIES		
Deceased Details			
Name			
Any other name(s) as recorded in marriage ce	rtificate or birth certificate		
Deceased NRIC / Passport No.			
Date of Birth			
Marital Status			
Gender			
is the Deceased a muslim?			
Place of Domicile			
Date of Death			
Death Certificate No.			
Applicant Details			
Name			
Any other name(s) as recorded in marriage ce	rtificate or birth certificate		
Applicant NRIC / Passport No			
Defe of Dieth			
Date of Birth			
Relationship with Deceased			
Email Address			
Residential Address (Please enter either L	ocal Address or Foreign Address)		
Local Address			
Blk/House No.			
Level-Unit			
Street Name			
Building Name			
Dostal Code			
<u>UR</u> Eoroign Addrose			
Correspondence Address (if different from	i Residential Address) (Please enter either	Local Address or Foreign Address)	
Local Address Dik/Liouse No			
DINHOUSE NO.			
Level-Unit			
Street Name			
Building Name			
Postal Code			
OR			
Foreign Address			
Particulars of Next of Kin			

Broth	ner Details		
Relatio	onship with Deceased		
Name			
Any of certific	ther name(s) as recorded in marriage certificate or birth cate		
NRIC	Passport No.		
Date o	f Birth		
Are yo	u legally separated or divorced from the Deceased?		
Date o	f Death (if applicable)		
Death	Certificate No. (if applicable)		
Conta	ct No.		
Email	Address		
Resid	lential Address (Please enter either Local Address or Foreign A	\ddress)	
Local	Address		
Blk/Ho	ouse No.		
Level-	Unit		
Street	Name		
Buildi	ng Name		
Postal	Code		
<u>OR</u>			
Foreig	n Address		
Corres	pondence Address (if different from Residential Address) (Ple	ease enter either	Local Address or Foreign Address)
Local	Address		
Blk/Ho	ouse No.		
Level-	Unit		
Street	Name		
Buildi	ng Name		
Postal	Code		
<u>OR</u>			
Foreig	n Address		
Submis	ssion of Documents		
S/No.	Document Type		View
4	Deceased's Death Cartificate		

1	Deceased's Death Certificate	
2	Deceased's Birth Certificate	
3	Parent(s) Marriage Certificate / Decree Nisi Absolute if divorced. Death Certificate(s) if parent(s) are deceased	
4	Identity Card of Applicant	
5	Identity Card where Sibling(s) aged 21 and above, Birth Certificate, Front page of bank account passbook or bank statement indicating the account no. of Sibling (s), Death Certificate if Sibling(s) are deceased	



This form will take about 20-30 minutes to complete. This application will take 1 month to process.

If you encounter any problems with this service, please contact us at 1800-2255-529 (during office hours) or submit an online enquiry through Contact Us @ OneMinLaw.

Please visit our website at www.mlaw.gov.sg if you have any further queries.

*Step 10: The transaction completion and acknowledgement page will appear.* 

Important: Please save the acknowledgement page for future reference. To submit bank account details, click on the "Submit Bank Detail" button. Please note that you are required to attach the respective bank documents and form (if applicable). You may refer to our guide on submission of bank account details on the steps to the eService.

To proceed with the submission of an application for the deceased's other assets, click on the "Yes" button at the end of the page.

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Step 1 Create / Edit Case Details	Step 2 Enter Case Details	Step 3         Step 4           Confirm Submission         Transaction Completion
ADMINISTRATION OF CPF / BABY BONUS / EI	DUSAVE / PSEA MONIES	
Thank you for using our eService. Please print or save this page for your own refere	nce. You will not be able to access this page	after exiting the webpage. SAVE
As payment will be by electronic fund transfer you to process the payment, please click Submit Bank Detail	∂, we require a <u>copy of your Bank Statemer</u>	nt (top portion stating your name and account number) or Pass Book (front page) from
You Application for Administration of Deceased C Your File Reference No.	CPF / Baby Bonus / Edusave / PSEA Monies b	by the Public Trustee has been successfully submitted.
Your E-Filing No.		
Deceased Details		
Name		
Any other name(s) as recorded in marriage cert	ificate or birth certificate	
Deceased NRIC / Passport No.		
Date of Birth		
Marital Status		
Gender		
is the Deceased a muslim?		
Place of Domicile		
Date of Death		
Death Certificate No.		
Applicant Details		
Name		
Any other name(s) as recorded in marriage cert	ificate or birth certificate	
Applicant NRIC / Passport No.		
Date of Birth		
Polationship with Deceased		
Email Address		
Email Address		1
Residential Address (Please enter either Lo	cal Address or Foreign Address)	
Local Address		
Lowel Unit		
Level-Unit		
Street Name		
Building Name		
Postal Code		
OR		
Foreign Address		
Correspondence Address (if different from	Residential Address) (Please enter either I	.ocal Address or Foreign Address)
Local Address		
Blk/House No.		
Level-Unit		
Street Name		
Building Name		
Postal Code		
OP		1.
Foreign Address		

Brot		
	her Details	
Relat	ionship with Deceased	
Name	3	
Any o certif	other name(s) as recorded in marriage certificate or birth icate	
NRIC	/ Passport No.	
Date	of Birth	
Are y	ou legally separated or divorced from the Deceased?	
Date	of Death (if applicable)	
Deatl	n Certificate No. (if applicable)	
Cont	act No.	
Emai	Address	
Resid	lential Address (Please enter either Local Address or Foreign Address)	
Local	Address	
Blk/Ho	use No.	
Level-	Unit	
Street	Name	
Buildir	ng Name	
Postal	Code	
<u>OR</u>		
Foreig	n Address	
Corre	spondence Address (if different from Residential Address) (Please enter eithe	r Local Address or Foreign Address)
Local	Address	
Blk/Ho	use No.	
Level-	Jnit	
Street	Name	
Buildir	ig Name	
Postal	Code	
OR Foreig	n Address	
CPF mo	onies(Including Dependant Protection Insurance)	
PF SS		
PLSS		
Baby B	onus / Edusave / PSEA	
Baby B	ouns S\$	
Edusav	e \$\$	
PSEA S	ŝ	
Submi	ission of Documents	
	Document Type	View
S/No.	Deceased's Death Certificate	
S/No.	Deceased's Birth Certificate	
S/No. 1 2		
S/No. 1 2 3	Parent(s) Marriage Certificate / Decree Nisi Absolute if divorced. Death Certificate(s) if parent(s) are deceased	
S/No. 1 2 3 4	Parent(s) Marriage Certificate / Decree Nisi Absolute if divorced. Death Certificate(s) if parent(s) are deceased Identity Card of Applicant	
S/No. 1 2 3 4 5	Parent(s) Marriage Certificate / Decree Nisi Absolute if divorced. Death Certificate(s) if parent(s) are deceased Identity Card of Applicant Identity Card where Sibling(s) aged 21 and above, Birth Certificate, Front page of bank account passbook or bank statement indicating the account no. of Sibling (s), Death Certificate if Sibling(s) are deceased	
S/No. 1 2 3 4 5	Parent(s) Marriage Certificate / Decree Nisi Absolute if divorced. Death Certificate(s) if parent(s) are deceased Identity Card of Applicant Identity Card where Sibling(s) aged 21 and above, Birth Certificate, Front page of bank account passbook or bank statement indicating the account no. of Sibling (s), Death Certificate if Sibling(s) are deceased	

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