

Request for maturity encashment/ policy surrender/partial withdrawal/ loan/dividend withdrawal (Applicable to individual policyholder) 約滿期提款/退保/部分提款/保單貸款/ 紅利提取申請表(適用於個人保單持有人)

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Name of policyholder/assignee 保單持有人/受讓人姓名

Policy no. 保單號碼 Contact telephone no.

聯絡電話號碼

Important notes 重要事項

- 1. If you are using or intend to use some or all of the total cash value of the existing life insurance policy or any savings resulting from reducing the premium payable under the existing life insurance policy to fund the purchase of any new life insurance policy such as policy surrender, partial withdrawal, policy loan and dividend withdrawal, please note that there are implications and associated risks involved in such policy replacement. These implications and associated risks are stated in "Important facts statement policy replacement" ("IFS-PR"). It is important for you to understand the possible implications and risks associated with policy replacement, so please contact your licensed insurance intermediary or call our Customer Care Team at +852 2968 2383 to explain the details of the relevant sections of the IFS-PR to you and assist you to sign and return the IFS-PR to us after explanation.

 如 图下打算使用透過現有人壽保險保單的部分或全部現金價值,或使用減少現有人壽保險保單應付的保費而節省的任何儲蓄如保單退保、部分提
 - 款、保單貸款或紅利提取,為新人壽保險保單提供資金, 閣下應了解有關轉保所涉及的影響及相關風險。這些影響和相關風險詳列於「重要資料聲明書 轉保」。明白轉保可能涉及的影響及風險對 閣下極為重要,務請 閣下聯絡 閣下的持牌保險中介人或致電我們的客戶服務熱線 +852 2968 2383,以讓我們為 閣下解釋「重要資料聲明書 轉保」有關之詳情,及於解釋後協助 閣下簽署並交回「重要資料聲明書 轉保」。
- 2. Maturity encashment can only be processed on or after maturity date. 約滿期提款須於約滿期或之後才可辦理。
- 3. The value and date of encashment/surrender will be calculated pursuant to the policy terms and conditions. 提款/退保金額及日期將依據保單條款與規章計算。
- 4. Please be reminded that partial withdrawal/dividend withdrawal/policy loan will reduce the death benefit and surrender value payable upon policy termination.
 - 請留意部分提款/紅利提取/保單貸款金額將減少 閣下保單於終止時可支付之身故賠償及退保價值。
- 5. Please note that when the total amount of outstanding policy loans and interest (if applicable) exceed the surrender value before indebtedness, the policy may terminate automatically subject to respective policy terms and conditions. You may contact us for a re-projection of the policy loan amount and expected timeline (in years) leading to policy lapsation based on the current assumptions for the policy loan if needed. 請留意當未償還之保單貸款及利息(如適用)超過保單未計貸款之退保價值,保單將根據保單條款與規章而自動終止。如有需要, 閣下可聯絡我們以提供保單貸款預期金額及根據保單貸款的現時假設而導致保單失效的預計時間(以年為單位)。
- 6. If this "Request for maturity encashment/policy surrender/partial withdrawal/loan/dividend withdrawal form" is received and accepted by our office 若此「約滿期提款/退保/部分提款/保單貸款/紅利提取申請表格」於下列時段送交我們的辦事處1,並由辦事處接納
 - on or before 12:45 p.m. (Hong Kong time) on a working day, the valuation day of the instruction in this form will be the next working day.
 於任何香港工作天的下午 12 時 45 分或之前,本表格之指示將以接受指示後下一個工作天作為估值日辦理。
 - after 12:45 p.m. (Hong Kong time) on a working day, or on a non-working day, your instruction will be deemed to be received on the next working day.
 於任何工作天的下午 12 時 45 分後或於非工作天遞交之表格,我們將視作為下一個工作天接獲。
- 7. Third party payee is not allowed. (For normal policy, policyholder is the only eligible payee. For assigned policy, assignee is the only eligible payee.) 收款人不可為第三者。(一般情況下,保單持有人是唯一收款人。而已轉讓保單,受讓人是唯一收款人。)
- 8. Payment to a bank located different from the place of residency of the policyholder or assignee (if policy assigned) is not allowed.
 - 款項不可轉至保單持有人或受讓人(如保單已轉讓)所居住以外的地區。
- 9. Credit payment to a bank in Mainland China is not allowed. 不可轉賬款項至中國內地銀行賬戶。



The office of the company is at 25-26/F, One Island East, 18 Westlands Road, Island East, Hong Kong. 本公司之辦事處之地址為香港港鳥東華蘭路 18 號港鳥東中心25-26 楗。

- 10. This form should be filled in BLOCK LETTERS and ensure all signature boxes are duly signed. 請以正楷填寫及確保已妥善簽署所有簽署位置。
- 11. Please fill the circle in full when you select the answer.

當閣下選擇答案時,請填滿整個圓圈。

Section A部: Type of withdrawal 提取類別

1. Maturity encashment²

約滿期提款²

I/We, the undersigned, as policyholder/assignee* hereby request for the encashment upon maturity of the above policy. Encashment will be **processed after maturity day**.

本人/我們(即簽署人)為保單持有人/受讓人*,現申請上述保單之約滿期提款。提款程序將於保單約滿期之後辦理。

² If there is no "maturity encashment" of the above policy, the type of surrender will be treated as "policy surrender". 若上述保單沒有「約滿期提款」選項,退保類別將被視為「全數退保」。

2. Policy surrender 保單退保

I/We, the undersigned, as policyholder/assignee* hereby request for a total surrender in respect of the above policy. 本人/我們(即簽署人)為保單持有人/受讓人*,現申請上述保單之保單退保。

The bank account for payment instruction of surrender will default as receiving remaining cash dividend (if any) if no current designated bank account of cash dividend receipt is located.

倘若沒有現有收取現金股息的銀行賬戶,收取剩餘的現金股息(如有)將會預設為退保付款指示所使用的銀行賬戶。

Partial withdrawal (applicable to Classic/Active Insurance Series, Single Premium Whole Life-JWL (JWL75), Delight Living, Golden Retirement, Magnitude, Matterhorn and Swiss Elite)

部分提款 (適用於經典/自主理財保障系列、兒童整額保費終身壽險保單 (JWL75)、寫意人生、金輝歲月退休保障計劃、瑞豐投資計劃、瑞承投資計劃及瑞翔投資計劃)

I/We, the undersigned, as policyholder/assignee* hereby request for the partial withdrawal of the above policy and to withdraw from the investment account

本人/我們(即簽署人)為保單持有人/受讓人*,現就上述保單申請部分提款並提取投資賬戶基金價值之

\bigcirc	%	or 或	\bigcirc	Amount 金額	fy the currency, otherwise it will be treated as HKD) · 否則金額將被視為港元)	or 或
	Withdrawal percentage (%	(A) of co	ocific	d investment choices		

Withdrawal percentage (%) of specified investment choices 提取指定投資選項/投資選擇的百分比

Investment choice code 投資選項/投資選擇代碼	Percentage (%) 百分比

- a. Partial Withdrawal will significantly reduce the account value/policy value. If the account value/policy value of your plan becomes insufficient to cover all the ongoing fees and charges or drops below Minimum Surrender Value (if any), your plan may be terminated early, and you could lose all your contributions paid and all the relevant benefits under your plan.

 部分提款將大大降低賬戶價值/保單價值。如 閣下保單的賬戶價值/保單價值不足以抵銷所有持續費用及收費或低於最低退保價值(如有),閣下的保單可能會被提早終止,屆時 閣下可能會失去保單的全部供款及一切相關利益。
- b. For Classic/Active Insurance Series, Single Premium Whole Life-JWL (JWL75), Delight Living and Golden Retirement, the benefit may be adjusted after partial withdrawal in respect of the policy according to the policy provision. The maximum and minimum of the partial withdrawal value are 90% and 10% respectively, of the investment account value.

 根據保單條款,經典/自主理財保障系列、兒童整額保費終身壽險保單(JWL75)、寫意人生及金輝歲月退休保障計劃的保單保障有機會在
- c. For Magnitude, Matterhorn and Swiss Elite, the partial withdrawal amount is at least HKD 8,000/USD 1,000. 瑞豐投資計劃、瑞承投資計劃及瑞翔投資計劃之部分提款的最低金額為8,000港元/1,000美元。
- d. For partial withdrawal, it is available after the designated period and limitation on the remaining surrender value. For details, please refer
 to product brochure of the relevant policy.
- 部分提款只適用於指定期限後申請及有剩餘退保價值的限制。詳情請參閱相關保單的產品小冊子。
- e. For Magnitude, the partial withdrawal amount will be withdrawn from the accumulation account. 瑞豐投資計劃的部分提款只可於累積戶口中提取。

部分提款後相應地調整。部分提款之最高及最低金額分別為投資賬戶價值的90%及10%。

f. For Matterhorn, if the first partial withdrawal is made in the first three policy years, 100% of the welcome bonus will be clawed back from the total account value.

若於首三個保單年度內進行瑞承投資計劃的部分提款,100%迎新紅利將會從總戶口價值中回扣。

4.	\bigcap	Policy loan (interest-bearing loan. For applicable products, please refer to policy provision.)
	\bigcirc	保單貸款(須負擔貸款利息。有關適用之產品,請參閱保單條款。)

I/We, the undersigned, as policyholder/assignee* hereby apply to Zurich Assurance Ltd/Zurich Life Insurance (Hong Kong) Limited ("Zurich", "we/us" or "the Company") for a loan pursuant to the above policy.

本人/我們(即簽署人)為保單持有人/受讓人*,現向蘇黎世人壽/蘇黎世人壽保險(香港)有限公司(「蘇黎世」、「我們」、「本公司」或「貴公司」)申請借貸上述保單中的款項。

	Loan amount	or	Maximum loan amount (90%)
\bigcup	貸款金額	或	最高貸款金額 (90%)

(please specify the currency, otherwise it will be treated as HKD)(請註明貨幣,否則金額將被視為港元)

Pol	Policy no. 保單號碼	Priv	ate and confidential 私人及保密文件
Τv	Type of withdrawal (continued) 提取類別(續)		
5.			
	I/We, the undersigned, as policyholder/assignee* hereby apply to the Company for a fre 本人/我們(即簽署人)為保單持有人/受讓人*,現向 貴公司申請免息借貸上述保單	ee interest loan pu	
	Loan amount or Maximum loan amount (90%) 費款金額 或 最高貸款金額 (90%))	
	(please specify the currency, otherwise it will be treated as HKD)(請註明貨幣,	否則金額將被視為	為港元)
6.	5. Dividends or guaranteed cash coupons withdrawal (only available for Simply L 紅利或保證現金儲備提取(只適用於「豐盈人生」及「簡約人生」)	ife & Abundant	Life)
	I/We, the undersigned, as policyholder/assignee* hereby apply to the Company for a 本人/我們(即簽署人)為保單持有人/受讓人*,現向 貴公司申請提取上述保單中的		uant to the above policy.
	Withdrawal amount		
	(please specify the currency, otherwise it will be treated as HKD)(請註明貨幣,	否則金額將被視為	高港元)
* P	Please delete as appropriate. 請刪去不適用者。		
Se	Section B部:Surrender questionnaire保單退保問卷		
sur 閣	Being our valued customer, your concerns are very important to us. Therefore, we would like to surrendering your policy before maturity and also we are eager to understand the reason(s) of 閣下是我們的尊貴客戶,我們十分關注 閣下的需要。因此,我們希望確保 閣下知道在保單期求退保的原因。	your request to s	urrender your policy.
1.	I. Please state the reason(s) for you to surrender this policy.(Can choose more than one opt 請説明 閣下退保的原因。(可選多於一項)	tion)	
	Financial reason		Investment return related 與投資回報有關
	Claim results related 與索償結果有關 Purchase another policy at the Company 投購本公司其他保單 Purchase another policy at the Other company 投購本公司	nies	Others 其他
2.	2. If you are thinking of switching to another insurer or purchasing a new policy, are you awa changes in your age and/or health condition? 如果 閣下打算轉換其他保險公司或投購新保單, 閣下是否明白 閣下可能會因為年齡及/		meed to pay a higher premium due to 變而需要支付較高的保費?
	Yes明白 No 不明白 Not applicable 不適用		
3.	8. We care about your concern, so we would like to see if you are aware of the financial imp you may suffer a financial loss if you surrender your policy before maturity because extra 我們很關注 閣下的需要,並且希望了解 閣下是否明白退保會帶來財務影響。 閣下是否知令 閣下蒙受經濟的損失?	charges may be i	mposed?
	◯ Yes是 ◯ No 否		
4.	received an illustration document showing the total amount you may get before policy mat maturity?	curity (e.g. current	surrender value) and at policy
	我們認為 閣下決定退保前,應先行了解保單的情況。 閣下有否收過一份説明文件,解釋價值),以及保單期滿時所得總額?	阁下仕床里别쪠	刖返休川侍旳ऱ,垻總領 () 例如 虽 刖返休
	○ Yes是 ○ No沒有		
5.	5. Instead of surrendering the policy, you may have other choices (where relevant). Are you 除了取消保單外, 閣下還可以有其他選擇(如適用)的。 閣下知道有以下的選擇嗎?它們包		otions? They may include:
	a. Reducing the benefit amount b. Adjusting protection & savings portion 滅低保障額 of the premium	c. Policy loan 保單貸款	d. Reducing premium/ contribution

() Yes 知道

調整保障及儲蓄的保費比重

減低保費/供款

e. Change of payment frequency to monthly mode 調整付款次數至月繳方式

f. Paid Up or Extended Cover Option 「停付供款延續投資」或「停付供款延續保障」

g. Contribution holiday

供款假期

Have you contacted our customer care staff for this surrender request?

閣下有沒有為了這次退保聯絡我們的客戶服務職員?

() No 不知道

Yes, other options have been explained 有,他們已經解釋有其他的選擇

Yes, but other options have not been explained 有,但他們沒有解釋有其他的選擇

No 沒有

Surrender questionnaire (continued) 保單退保問卷(續)

為了使我們更精益求精,請告訴我們 閣下對本公司提供的服務感 Very satisfied 非常滿意 Quite satisfied 頻滿意	erage Not quite satisfied	Definitely not satisfied 完全不滿意
The service that has impressed me is 令我留下深刻印象的服務是	The area for improvement would be 有待改善之處是	70 E T M &
For completion by individual claimant only 只供個人申請人填寫 Family name 生	Given name 名	
Please give details of any previous name(s) or aliases used (including 請詳述任何曾使用的姓名或別名 (包括婚前姓氏)	g maiden name)	
Place of birth 出生地點		
Nationality Chinese (Hong Kong) Chinese 中國(香港) 中國(中國(中國)中國(中國)	(Mainland China) Others 國內地) 其他	
Oo you hold nationality in another country? Yes No 图下是否持有多於一個國家的國籍?	If "Yes", please specify the country. 如答案為「是」,請註明國家名稱。	
Please submit certified copy of identity document for all nationality an 青遞交所有國籍及稅務居留司法管轄區的已核實身分證明文件副本。	nd tax jurisdiction of residence.	
Contact details 聯絡資料		
Current residential address 昆時住址		
Flat/Room 室/單位	Floor 樓 -	Block 座
Name of building/estate 大廈/屋邨名稱		
Name of street/road 街道名稱		
District/City/Province 地區/城市/省		HK/KLN/NT 香港/九龍/新界
Country 國家	ZIP/Postal code 郵遞區號	
s the above address permanent or temporary residential address? 上述地址是永久或暫時住址?	()	Permanent Temporary 长久
f temporary residential address, please state the reason for this: 如屬暫時住址,請説明理由:		
Correspondence address (if different from above address) 赫絡地址(如與上述地址不同)		
Flat/Room 室/單位	Floor 樓 -	Block 座
Name of building/estate 大廈/屋邨名稱		
Name of street/road 街道名稱		
District/City/Province 地區/城市/省		HK/KLN/NT 香港/九龍/新界
Country 國家	ZIP/Postal code 郵源區號	

Policy details (continued) 保單資料(續)

Please provide a reason why you are using a correspondence address that is different from your residential address. Depending on the answers given, we may ask for further information.

請說明為何 閣下的聯絡地址有別於 閣下的住址。視乎所提供的説明,我們或會詢問更多資料。

Residential telephone no. 住宅電話號碼 Country		(Country code) Telephone no.	Is this a US based telephone no.? 這是美國電話號碼嗎?	〇 Yes 是	○ No 否
Office telephone no. 公司電話號碼	國家 Country	(國家編號)電話號碼 (Country code) Telephone no.	Is this a US based telephone no.? 這是美國電話號碼嗎?	〇 Yes	○ No 否
Mobile telephone no. 流動電話號碼 Country 國家		(國家編號)電話號碼 (Is this a US based telephone no.? 這是美國電話號碼嗎?	O Yes 是	O No 否
Email address 電郵地址					
Section D = Tax	information of	f claimant申請人的税務資			
a. Do you currently file If "Yes", please con		A? S tax form.	₹ 197	O Yes 是	O No 否
If "No", please cor	nplete question no.	es", the Taxpayer Identification Num 2c. 號是 閣下之香港身份證編號。 若 「2	· , ,	〇 Yes 是	〇 No 否
If "No", please cor	nplete question no.	Residence you belong to? 2c. 法管轄區?若「否」, 請回答問題2c 。		Yes 是	〇 No 否
		Residence and TIN. If the TIN is una 號。若未能提供税務編號,必須填寫	vailable, should provide the appropriate re 合適的理由。	eason A, B o	r C.
Tax Jurisdiction of Residend 税務居留司法管轄區	ce TIN 税務編號	Reason if TIN is unavailable* 理由(若未能提供税務編號)*	Please explain why the reason B is select 若選擇理由 B,請解釋原因	oted	
i		OA OB C			
ii		OA OB C			
iii		OA OB C			
iv		OA OB C			
v		OA OB C			
* Reason理由A: The juris	diction where the clai	mant is a resident for tax purposes of	does not issue TINs to its residents.		

- 申請人的稅務居留司法管轄區並沒有向其居民發出稅務編號。
- Reason 理由 B: The claimant is unable to obtain a TIN. Please explain why the claimant is unable to obtain a TIN if you have selected this reason. 申請人未能取得税務編號。若選取此理由,請解釋申請人未能取得税務編號之原因。
- Reason 理由 C: TIN is not required. Select this reason only if the authorities of the Tax Jurisdiction of Residence do not require the TIN to be disclosed. 申請人毋須提供稅務編號。稅務居留司法管轄區的主管機關不需要申請人披露稅務編號。

Declaration and acknowledgment 聲明及確認

I/We acknowledge and agree that (a) the information contained in this section is collected and may be kept by the Zurich Assurance Ltd and/or Zurich Life Insurance (Hong Kong) Limited ("the Company") for the purpose of automatic exchange of financial account information, and (b) such information and information regarding the account holder and any reportable account(s) may be reported by the Company to the Inland Revenue Department of the Government of the Hong Kong Special Administrative Region and exchanged with the tax authorities of another jurisdiction or jurisdictions in which the account holder may be resident for tax purposes, pursuant to the legal provisions for exchange of financial account information provided under the Inland Revenue Ordinance (Cap.112).

本人/我們知悉及同意蘇黎世人壽及/或蘇黎世人壽保險(香港)有限公司(「貴公司」)可根據《稅務條例》(第112章)有關交換財務賬戶資料的法律條 文·(a) 收集本部分所載資料並可備存作自動交換財務賬戶資料用途及(b) 把該等資料和關於賬戶持有人及任何須申報賬戶的資料向香港特別行政區政 府税務局申報,從而把資料轉交到賬戶持有人的税務居留司法管轄區的税務當局。

I/We undertake to advise the Company of any change in circumstances which affects the tax residency status of the individual identified in of this part or causes the information contained herein to become incorrect, and to provide the Company with a suitably updated self-certification form within 30 days of such change in circumstances.

本人/我們承諾如情況有所改變,以致影響本部分所述的個人的稅務居民身分,或引致本部分所載的資料不正確,本人/我們會通知 貴公司,並會 在情況發生改變後30日內,向 貴公司提交一份已適當更新的自我證明表格。

I/We declare that the given information and statements made in this section are, to the best of my/our knowledge and belief, true, correct and complete. 本人/我們聲明就本人/我們所知所信,本部分所填報的所有資料和聲明均屬真實、正確和完備

Tax information of claimant (continued) 申請人的稅務資料(續)

WARNING and ATTENTION 警告及注意

It is an offence under section 80(2E) of the Inland Revenue Ordinance if any person, in making a self-certification, makes a statement that is misleading, false or incorrect in a material particular AND knows, or is reckless as to whether, the statement is misleading, false or incorrect in a material particular. A person who commits the offence is liable on conviction to a fine at level 3 (i.e. HKD 10,000).

根據《税務條例》第80(2E)條,如任何人在作出自我證明時,在明知一項陳述在要項上屬具誤導性、虛假或不正確,或罔顧一項陳述是否在要項上屬具 誤導性、虛假或不正確下,作出該項陳述,即屬犯罪。一經定罪,可處第3級罰款(即10,000港元)。

If there is any uncertainty about tax residency status, please consult your own tax advisor.

如 閣下對稅務居住地有任何疑問,請徵詢 閣下的稅務顧問。

Section E部: Payment instruction 付款指示

By signing this form and filling in the payment instruction below, I/we declare the following:

本人/我們現簽署此表格及填寫以下付款方法,並作以下聲明:

- 1. I/We am/are aware of the potential tax obligations imposed by any jurisdiction, to which I/we may be subject, as applicable to me/us for any payment made or proposed to be made herein, in particular, in relation to tax obligations in Hong Kong and China; 本人/我們明白本人/我們可能受到適用於本人/我們的任何司法管轄區,就此表格的任何付款或建議付款,所施加的潛在稅項義務,特別是有關香港和中國的稅項義務;
- 2. I/We confirm that I/we have complied with my/our tax obligations, and 本人/我們確認遵守了本人/我們的税項義務;及
- 3. I/We understand that I/we shall obtain independent tax advice in relation to the policy. 本人/我們明白本人/我們應就保單尋求獨立稅務建議。

Collection method 收款方式

1.	\bigcirc	Credit to designated loc The payment requeste	•		• •					內地	居民):	
		○ HKD 港元	◯ USD 美元	◯ GBP英鎊	AUD	澳元	○ EUR 🗒						
		Account holder name 賬戶持有人名稱			Bank no. 銀行號碼	Branch no. 分行號碼	Account 戶口號碼			1	I	I	
		Name of bank 銀行名稱											
2.	\bigcirc	Credit to overseas bar payments is allowed) 轉賬至海外銀行賬戶4(,				, ,	ed) reside	es, no	o cro	ss-bo	order	
		The payment requeste	ed above shall be co	nverted into below cur	rency. 本人/我	們要求將上述	款項折算為	下列貨幣	0				
		◯ USD 美元	◯ GBP 英鎊	AUD 澳元	EUR	歐元							
		Account holder name 賬戶持有人名稱											
		Name of bank 銀行名稱			Bank sort cod 銀行類型編號	le							
		Account no. 賬戶號碼											
		Bank address 銀行地址											
		IBAN											
		編號			Swift BIC								

- 3 Please provide the bank account proof such as bank statement or bank passbook. 請提供銀行賬戶證明,例如銀行結算單或銀行存摺。
- Please provide account holder name, bank name, bank sort code, account no., bank address, IBAN and Swift BIC. 請提供賬戶持有人名稱、銀行類型編號、賬戶號碼、銀行地址、IBAN編號及 Swift BIC。

Section F部: Documents required 所需遞交文件

- 1. Certified copy* of Hong Kong permanent identity card 已核實的香港永久性居民身份證副本*
- 2. Certified copy* of valid passport if the policyholder/assignee holds foreign nationality 已核實的有效護照副本*,如保單持有人或受讓人持有外國國籍
- 3. For Zurich Assurance Ltd Certified copy*/Original of recent three months proof of permanent residential address such as utility bills, bank statements, tax returns, etc.
 - 蘇黎世人壽 已核實的最近三個月永久居民地址證明副本*/正本,如公營業務單據、銀行結單、稅單等
- 4. Bank account proof such as bank statement or bank passbook copy 銀行賬戶證明,例如銀行結單或銀行存摺副本

Documents required (continued) 所需遞交文件(續)

* Suitable Certifier:

合適核實人

- a. A regulated introducer, based in a FATF country (recognized jurisdiction) 位於金融行動特別工作組的國家受監管的中介人(認可的司法管轄區)
- A notary public, lawyer or an embassy official (from the country who issued the document) 公證人、律師或大使館官員(來自簽發文件的國家)
- c. An individual employed by an introducer who has been approved by Zurich to act as a suitable certifier 受僱於獲蘇黎世認可的中介人的僱員
- d. An accountant who must be a member of an institute of professional organization 會計師為專業組織機構中的成員
- e. An authorized employee of the Zurich group 獲蘇黎世集團授權的員工

We may request you to provide additional documents apart from documents listed above where necessary. If you have any questions on how to complete this form, please call our Customer Care Hotline at +852 2968 2383.

如有需要,除上述文件外,我們可能會要求 閣下提供額外之證明文件。倘若 閣下在填寫此表格時有任何疑問,請致電我們的客戶服務熱線+852 2968 2383。

Section G部: Levy on premium 保費徵費

- 1. Levy collected by the Insurance Authority has been imposed on relevant policy at the applicable rate. Therefore, the policyholder is required to pay the prescribed levy along with the premium/contribution. For further information, please visit www.zurich.com.hk/ia-levy. 保險業監管局已向相關保單按照適用的徵費率收取保費徵費。因此,保單持有人於繳付保費/供款時,須同時繳付徵費。更多有關保費徵費資料,請瀏覽 www.zurich.com.hk/ia-levy。
- 2. For particular product(s) which require the deduction of unpaid premium(s) when policy surrender/policy maturity is applied, I/we hereby agree that the Company shall deduct all of the unpaid premium(s) and correspondence levy(ies) (if any) from the surrender/maturity payment. I/We also understand and agree that the policyholders' information may be provided to the Insurance Authority if the levy is overdue. 有關在申請保單退保/保單期滿時須扣除所有逾期未繳付保費的個別產品,本人/我們在此同意本公司從退保價值/期滿利益金額中扣除所有逾期未繳付的保費及相應之保費徵費(如適用)。本人/我們明白及同意若保單持有人有逾期的保費徵費,本公司可能會向保險業監管局提供保單持有人的資料。

Section H部: Declaration 聲明

Declaration of policy status 保單狀況聲明

I/We hereby warrant and agree that: 本人/我們現保證及同意:

- 1. I/We have not assigned, pledged or in any other way dealt with the policy or any interest in the policy or the moneys insured by the policy; 本人/我們從未轉讓、抵押或以任何其他方式處置本保單或其任何權益或承保款項;
- 2. In the event of my death, this declaration shall be binding on my personal representatives as it is binding on me; 如本人不幸身故,本人的個人代表將猶如本人受本項賠償聲明約束;
- 3. This declaration shall be governed in all respect by laws of Hong Kong and I/we hereby submit to the non-exclusive jurisdiction of the courts of Hong Kong. 本項賠償將全面受香港法律管轄。本人/我們服從香港法院之非專有司法裁判權。

Declaration for data protection 個人資料保障聲明

Notice to customers relating to the Personal Data (Privacy) Ordinance ("Ordinance")

有關個人資料(私隱)條例(「私隱條例」)的客戶通知

This Notice sets out the privacy policy of each of **Zurich Assurance Ltd/Zurich Life Insurance (Hong Kong) Limited** (each a "**Company**") in respect of their respective customers. The rights and obligations of each Company under this Notice are several and not joint, whereby no Company shall be liable for any act or omission of another Company.

本通知列載**蘇黎世人壽/蘇黎世人壽保險(香港)有限公司**(以下個別稱「本公司」)有關各自對其客戶的私隱政策。各公司就本通知所列之權利和責任為獨立而非連帶的,因此各公司無須為其他公司之行為或不作為負責。

The personal information of customers (including policyholders, insured persons, beneficiaries, premium payors, trustees, policy assignees and claimants) collected or held by the Company from time to time, which also includes data collected or generated in the ordinary course of the Company's business and the continuation of relationship with the customer (such as claim information and medical history received from third parties), may be used by the Company and/or a company within its group ("Zurich Insurance Group") for the purposes necessary in providing services to the customers (otherwise the Company is unable to provide services to customers who fail to provide the required information). 由本公司不時收集或持有的客戶(包括保單持有人、受保人、受益人、保費付款人、信託人、保單受讓人及索償人)個人資料,其中亦包括在公司日常業務過程中以及就持續與客戶的關係而收集或產生的資料(例如從第三方收到的索償資料和病歷),均可供本公司及/或其所屬集團(「蘇黎世保險集團」)內的公司使用作為向客戶提供服務而必須的用途(否則本公司將無法為未能提供所需資料的客戶提供服務)。

Please read carefully the details of the Company's privacy policy which is made available on our website at www.zurich.com.hk/pics or by scanning the QR code. You may also contact our Customer Care Hotline at +852 2968 2383 or insurance intermediaries for enquiries.

本公司之私隱政策詳載於www.zurich.com.hk/pics 或可透過掃描 QR 碼細閱。 閣下亦可致電+852 2968 2383 與我們的客戶服務部聯絡或向保險中介人查詢。

Consent for marketing purposes - Voluntary:

就市場推廣用途之同意 - 自願性:

Certain personal information of policyholders and insured persons collected or held by the Company (which also includes data collected or generated in the ordinary course of the Company's business and the continuation of relationship with the customer), in particular, names, contact information, age, gender, identity document reference, marital status, financial background, demographic data, transaction pattern and behavior, policy information, claim information, and medical history may be used by the Company, **only upon having such policyholders' or insured persons' consent or indication of no objection**, for providing marketing materials and conducting direct marketing activities in relation to insurance and/or financial products and services of the Zurich Insurance Group and/or other financial services providers, and/or other related services of business partners, with whom the Company maintains business referral or other arrangements (such as reward, loyalty, co-branding or privileges programs and related services and products, services and products offered by the Company's business or co-branding partners, donations or contributions for charitable and/or non-profit making purposes). For the avoidance of doubt, the latest instruction (for example, consent or indication of no objection, or request for opt-out) received from a customer shall override any previous instruction given to the Company in this regard in relation to all personal information of the customer collected or held by the Company from time to time.

Declaration (continued) 聲明(續)

由本公司收集或持有的保單持有人及受保人的某些個人資料(其中亦包括在本公司日常業務過程中以及就持續與客戶的關係收集或產生的資料),特別是姓名、聯絡資料、年齡、性別、身分證明文件資料、婚姻狀況、經濟背景、人口統計數據、交易模式和行為、保單資料、索償資料及醫療紀錄等,於養該保單持有人或受保人同意或作不反對指示後,均可供本公司使用作為蘇黎世保險集團及/或與本公司維持業務引薦關係或其他安排之其他金融服務供應商的保險及/或金融產品及服務,及/或其他商業合作夥伴之相關服務,提供市場推廣資料及進行直接市場推廣活動。(例如獎賞、忠誠獎勵、合作品牌或優惠計劃以及相關服務和產品,由本公司商業合作夥伴或合作品牌夥伴提供的服務和產品,出於慈善及/或非牟利目的的捐贈或捐款)。為免生疑問,就本公司不時收集或持有的所有客戶個人資料,本公司將會以從客戶收到的最新指示(例如同意或表示不反對的指示,或提出反對要求)。

The Company may provide (and may receive money or property in return for providing) certain personal information, in particular, name, contact information, age, gender and policy information of a policyholder and an insured person, only upon having such policyholder's and insured person's written consent, to be used by the following parties, within or outside of Hong Kong, for their own and/or the Company's marketing purposes set out above: 於獲保單持有人及受保人書面同意後,本公司方可就以下人士本身及/或就本公司的市場推廣用途,向以下於香港境內或境外的人士提供其某些個人資料(並可能收到金錢或其他財產作為回報),特別是姓名、聯絡資料、年齡、性別、保單持有人及受保人的保單資料等,以供其使用:

- (1) companies within the Zurich Insurance Group; 蘇黎世保險集團成員公司;
- (2) other banking/financial institutions, commercial or charitable organizations with whom the Company maintains business referral or other arrangements; 與本公司維持業務引薦關係或其他安排的其他銀行/金融機構、商業或慈善組織:
- (3) third party reward, loyalty, co-branding or privileges program providers; 第三方獎賞、忠誠獎勵、合作品牌或優惠計劃提供者:
- (4) third party marketing service providers and insurance intermediaries. 第三方市場推廣相關服務供應商及保險中介人。

I/We understand that I/we can withdraw any consent provided for marketing purposes anytime by notice to the Company.

本人/我們明白可隨時通知 貴公司以撤回任何就市場推廣用途所給予之同意。

I/We acknowledge that the amount received (net of any sums owing to the Company) will be full and final settlement and discharge of all claims under the policy and agree to give or procure all such further receipts therefor as may be required.

本人/我們確認將收到之款項(扣除所欠 貴公司的款項)為完全及最後,和免除 貴公司在此保單的責任,本人/我們將會在要求下提供有關收據。

I/We warrant that I/we am/are legally and beneficially entitled to the amount received according to the above percentage of the fund value of the investment account net of any charges owing to the Company. I/We also understand that this amount is subject to the fluctuation of the unit price from time to time. 本人/我們保證本人/我們可合法及享有實益權利,按上述投資賬戶基金價值的百分比領取款項,惟需扣除本人/我們應付予 貴公司的所有費用。本人/我們明白付款金額將隨著每日單位價格的浮動而增減。

I/We hereby declare and agree that (1) all information in this form whether or not written by my/our own hand is to the best of my/our knowledge and belief complete and true; (2) if the relevant persons of the policy fail to provide any information requested in this application, the Company shall have the right to reject or delay such application.

本人/我們聲明及同意(1)申請表內的一切資料,無論是否本人/我們所填寫,均屬完全及確實無訛:(2)若保單的有關人士未能提供此申請所需資料, 貴公司有權拒絕或延遲處理此申請。

I/We declare that I/we am/are the beneficial owner of the policy and not acting on behalf of another person including natural person, legal person or trust. 本人/我們聲明,本人/我們為保單之實益擁有人並非代表其他人行事,其他人包括自然人、法人或信託。

Where applicable, I/we hereby expressly acknowledge and declare that any proceeds I/we may receive from this policy will at all times comply with all and any relevant laws pertaining to or relating to capital transfers and foreign exchange control.

在適用的情況下,本人/我們現確認及聲明從保單所收到的任何款項將於任何時候遵守所有及任何有關資本轉移及外匯管制的法律。

Name of life insured 受保人姓名	Date signed
Signature of life insured (Only applicable to designated plan) 受保人簽署 (只適用於指定計劃)	簽署日期
Name of claimant 申請人姓名	HKID card/Passport no. of claimant 申請人之香港身份證或護照號碼 Day日 Month月 Year年 Date signed
Signature of claimant 申請人簽署	
Signature of licensed insurance intermediary 持牌保險中介人簽署	Full name of licensed insurance intermediary (IA license no.) 持牌保險中介人姓名(保監牌照號碼)
Company name of licensed insurance intermediary (if applicable) 持牌保險中介人公司名稱(如適用)	Company code of licensed insurance intermediary (if applicable) 持牌保險中介人公司編號 (如適用)

