

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

Private and confidential 私人及保密文件

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 貴公司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
 - 如 責公司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即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, 貴公司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 貴公司極為重要,務請 貴公司聯絡 貴公司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 貴公司解釋「重要資料聲明書 轉保」有關之詳情,及於解釋後協助 貴公司簽署並交回「重要資料聲明書 轉保」。
- 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 貴公司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, 貴公司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 company registered 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)公司註冊以外的地區。

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。



11. Please fill the circle in full when you select the answer.

當量公司選擇答案時,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 貴公司保單的賬戶價值/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),貴公司保單可能會被提早終止,屆時 貴公司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%。
- 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.

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。

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.		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。有關滴用之產品,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		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)

5.	\bigcirc	Free interest loa schedule/advand 免息貸款(只適用	ce paymen	t option	ı.)								ith ed	lucation fur	nd
		I/We, the undersig 本人/我們(即簽	gned, as pol 署人) 為保區	licyholde 單持有人	r/assignee* /受讓人*	hereby · 現向	apply to t 貴公司申	he Cor 請免息	npany for a 、借貸上述例	n free int 呆單中的	erest loan p 款項。	ursuant to	the ab	oove policy.	
		Loan amoun 貸款金額	nt		or 或		Maximum 最高貸款		amount (90)%)					
		(please spec	cify the curr	ency, oth		ill be tr		•	,	,否則	金額將被視	為港元)			
6.		Dividends or gu						ailable	for Simpl	y Life 8	& Abundant	Life)			
		紅利或保證現金儲 I/We, the undersig	gned, as po	olicyhold	er/assignee	* hereb	by apply to					uant to the	abov	ve policy.	
		本人/我們(即簽		單持有人		現向			7上述保單5	中的款項	0				
		Withdrawal a 提取金額	amount		or 或	\bigcirc	All withdr 全部提取	awai							
		(please spec	cify the curr	ency, oth	nerwise it w	ill be tr	eated as I	HKD)(請註明貨幣	8,否則	金額將被視	為港元)			
* F	Please	delete as appropri	riate. 請刪去	不適用	当 。										
S	ectic	on B部:Sur	render	quest	ionnaire	保單	退保問	制卷							
sui 貴:	rrende 公司是	r valued customer, ring your policy be 我們的尊貴客戶, 司要求退保的原因	efore maturi 我們十分關	ty and a	lso we are	eager to	understa	and the	reason(s)	of your	request to s	surrender y	our p	olicy.	
1.		se state the reason 明 貴公司退保的				olicy.(C	an choose	e more	than one	option)					
	\ /	Financial reason 財務原因	\bigcirc	Emigra 移居其	te to the ot 他國家	her cou	ıntries		Product fe 與產品特色		elated	\ /		nt return rela 報有關	ated
	\ /	Claim results relat 與索償結果有關	ted	Compa	se another iny 公司其他保		at the	\bigcirc	Purchase a other comp 投購其他公	panies		Othe 其他			
2.	chan	u are thinking of sw ges in your age ar 貴公司打算轉換	nd/or health	condition	on?		_		-						
		Yes明白 (No不明	自白	O No	t applic	able 不適	Ħ							
3.	you r 我們	care about your co may suffer a financ 很關注 貴公司的 令 貴公司蒙受經	cial loss if y 需要,並且	ou surre	nder your p	oolicy b	efore mat	urity b	ecause ext	ra char	ges may be	imposed?	•	cy. Are you ^{1,} 可能要支	
		Yes是 (No否												
4.		re making your de ved an illustration irity?													
	我們!	認為 貴公司決定 保價值),以及保單			保單的情況	2。 貴2	公司有否地	过過一 個	分説明文件	,解釋	貴公司在保	(單期滿前)	退保所	f得的款項總	額(例如當
		Yes是 (○ No沒有	Ī											
5.		ad of surrendering 取消保單外, 貴公	g the policy, 公司還可以有									ptions? Th	ney m	ay include:	
		educing the benef 战低保障額	ît amount	C	Adjusting pr of the premi 問整保障及(um		js porti	on		Policy loan 保單貸款		C	Reducing pre contribution 或低保費/供	
	fr	hange of payment equency to monthl]整付款次數至月繳	ly mode		Paid Up or I 停付供款延				續保障」		Contribution 供款假期	n holiday			
		Yes 知道 (○ No 不知	P 道											
6.		you contacted ou 司有沒有為了這次					er request	?							
		Yes, other options 有,他們已經解釋			ed (is have not 有其他的選		explained	〇 No			

2ZK-PAD-CSF-01619-ET-0124

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

 To help us serve you better in the future, overall speaking, h 為了使我們更精益求精,請告訴我們 貴公司對本公司提供的 Very satisfied Quite satisfied		
非常滿意	一般 不太滿意	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 woul 有待改善之處是	d be
Section C部:Policy details保單資料		
F or completion by corporate claimant only 只 <mark>供企業申請人填</mark> Corporate name in English 企業英文名稱	寫	
Corporate name in Chinese 企業中文名稱		
Date of incorporation 成立日期	HK Business Registration no 香港商業登記證號碼).
	No If "No", please state the cour 否 如「否」,請提供成立的國家	ntry of incorporation
	No If "No", please state the cour 否 如「否」,請提供註冊的國家	ntry of registration
Contact details 聯絡資料 Principal place of business 主要營運地址	_	
Flat/Room 室/單位	Floor 樓	Block 座
Name of building 大廈名稱		
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	
Is the above address same as the address of registered office? 上述地址是否與企業註冊地址相同?		Yes 是
If "No", please provide the address of registered office. 如「否」,請提供企業註冊地址。		
Correspondence address (if different from above address) 聯絡地址(如與上述地址不同)		
哪台地址(如英工处地址作问) Flat/Room 室/單位	Floor 樓	Block 座
マンテロ Name of building 大廈名稱	<u></u>	
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	

Please provide a reason why you are using a correspondence address that is different from your principal place of business. Depending on the

Policy details (continued) 保單資料(續)

answers given, we may ask for further information.

担立任担任协会中 4/80十个节目中有次约

间成明	岛門 具公可的聯給	地址有別於 具公司的土	安宮建地址。倪丁川促	供的就明 ' 找们]以曾胡问史3	夕貝科。			
Office to	elephone no. 活號碼	Country	(Country) T-1		Is this a US 這是美國電	5 based telephone no.? 話號碼嗎?	Yes 是	O No 否	
		Country 國家	(Country code) Teleph (國家編號)電話號碼	one no.					
	telephone no.					based telephone no.?	(Yes	O No	
流動電	沽號碼	Country	() (Country code) Teleph	one no.	這是美國電	話號碼嗎?	是	○ 否	
055. /		國家	(國家編號)電話號碼						
	ersonal (corporate t 固人(法團信託保單)	trustee policy) email addr 電郵地址	ess						
Secti	on D部:Pay	ment instruction	付款指示						
		ing in the payment instruc 填寫以下付款方法,並作		re the following	:				
pay 本人	ment made or propo	he potential tax obligation osed to be made herein, i 找們可能受到適用於本人/	n particular, in relation	to tax obligatio	ns in Hong K	ong and China;		•	
	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。								
Collect	ion method 收款方	式							
1.	Credit to designate	ed local bank account ³ (for	corporate registered in	HK only):轉賬	至指定本地銀	行賬戶3(只限香港註冊之	企業):		
	The payment requ	uested above shall be co	nverted into below cur	rency. 本人/我	們要求將上述	註款項折算為下列貨幣。			
	HKD 港元	◯ USD 美元	GBP 英鎊		澳元	○ EUR歐元			
) IIII 7070	000 000	0001	Bank no.	Branch no.	Account no.			
	Account holder na	ame		銀行號碼	分行號碼	戶口號碼			
	賬戶持有人名稱								
	Name of bank 銀行名稱								
2.	Credit to overseas cross-border payr 轉賬至海外銀行賬	s bank account ⁴ (located ments is allowed) 戶 ⁴ (只可轉賬至保單持有 uested above shall be co	人或受讓人(如保單已	轉讓)的企業註	開地區,不允 開要求將上並	許跨境支付)	of registratio	n, no	
	Account holder na		J 1.52 1527 B						

Bank sort code

銀行類型編號

Swift BIC

賬戶持有人名稱

Name of bank 銀行名稱

Account no.

賬戶號碼

Bank address 銀行地址

IBAN

編號

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、銀行名稱、銀行類型編號、賬戶號碼、銀行地址、IBAN編號及Swift BIC

Section E部: Documents required 所需遞交文件

1. 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。

2. Please refer to "Corporate policyholder requirement checklist" to submit relevant document. 請根據「企業保單持有人所需遞交文件檢查表」遞交所需文件。

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 貴公司提供額外之證明文件。倘若 貴公司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 F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 policyholder's 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 G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。 貴公司亦可致電+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.

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:

Declaration (continued) 聲明(續)

- (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	— Day日 Month月 Year年
Signature of life insured 受保人簽署	Date signed
Name of claimant/authorized signor 申請人/獲授權簽署人姓名 Signature of claimant/authorized signor 申請人/獲授權簽署人簽署	HKID card/Passport no. of claimant/authorized signor 申請人/獲授權簽署人之香港身份證或護照號碼 Day日 Month月 Year年 Date signed
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)

PLEASE DO NOT SIGN ON BLANK FORM. 請勿於空白表格簽署。

In the event of any discrepancies or inconsistencies between the English and Chinese versions of this form, the English version shall prevail. 如此表格之中英文版本有任何歧異或不一致,概以英文版為準。

