

# Automatic Exchange of Information 自動交換資料

## Self-certification for individuals 個人自行核證

Automatic Exchange of Information (AEOI) is a standard through which tax authorities in different countries can routinely exchange information about financial accounts held by taxpayers. The standards include, but are not limited to, Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS). Financial institutions must identify and report any account holders who are taxpayers in other countries in accordance with the AEOI agreements.

Please complete the form in **FULL** and in **CAPITAL** letters and return it (by post or email) to your local Zurich office. We may need to contact you for further information but if you do not hear from us after sending us the form you can assume that we have all the information needed.

If you supply information that differs from that which is already recorded we will take this as your instruction to update our files.

自動資料交換是一項以便不同國家的稅務機構定期交換納稅人財務賬戶資料的準則。這項準則包括但不限於《外國賬戶稅務合規法案》及《共同申報準則》。根據自動資料交換協議，金融機構必須識別及申報海外稅務居民的財務賬戶資料。

請用**英文正楷**及**完全**填妥表格，並郵寄或電郵至蘇黎世本地辦事處。本公司可能會聯絡您提供更多資料，假如您在遞交本表格後並未收到本公司任何詢問，則假設您已提供足夠的所需資料。

如您提供的資料有別於本公司的紀錄，則我們視此申請為您更新資料的指引。

### Policy details 保單資料

Policy number 保單編號	
Title 稱銜 <input type="checkbox"/> Mr. 先生 <input type="checkbox"/> Mrs. 太太 <input type="checkbox"/> Miss 小姐 <input type="checkbox"/> Ms. 女士 <input type="checkbox"/> Dr. 博士 <input type="checkbox"/> Other (please give details) 其他 (請說明)	
Family name 姓	Forename(s) 名
Date of birth 出生日期	Place of birth (town or city) 出生地點 (城鎮或城市)
Nationality 國籍	Do you hold nationality in another country? 您是否持有多於一個國家的國籍? <input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
If 'Yes', please confirm the country 如答案為「是」，請確認國家名稱。	
Current residential address 現時住址	Correspondence address (if different) 通訊地址 (如與住址不同)
If the country of residency and correspondence differ, an explanation must be provided. 如您的通訊地址有別於您的居住國家，必須提供說明。	
Home telephone number (include international country code) 住宅電話號碼 (包括國家區號)	Country of telephone number 住宅電話號碼的國家
Mobile telephone number (include international country code) 手提電話號碼 (包括國家區號)	Country of telephone number 住宅電話號碼的國家

## Policy details (continued) 保單資料(續)

If any of the telephone numbers are outside the country of residency, an explanation must be provided.  
如您的電話號碼在您的居住國家以外，必須提供說明。

Are you a US\* tax payer?  
您是美國\*納稅人嗎？

Yes 是  No 否

Are you a US\* citizen?  
您是美國\*公民嗎？

Yes 是  No 否

\* The definition of US includes the 50 United States of America, the District of Columbia, Guam, Puerto Rico, US Virgin Islands, American Samoa and the Northern Mariana Islands.  
美國的定義包括亞美利堅合眾國50個州、哥倫比亞特區、關島、波多黎各、美屬維爾京群島、美屬薩摩亞群島和北馬里亞納群島。

US Tax Payers Tax Identification Number  
美國納稅人稅務編號

Please complete the following table indicating:  
請提供以下資料並列明：

(i) where you are a tax resident;  
保單持有人的稅務居留國家；

(ii) your Tax reference number for each country indicated.  
該稅務居留國家發給保單持有人的稅務參考編號。

If you are tax resident in more than three countries please use a separate sheet.  
如您的稅務居民身份多於三個國家，請另加紙說明。

If a Tax reference number is not available please provide a functional equivalent (such as your social security, national insurance, citizen, personal identification or a resident registration number).  
如沒有提供稅務參考編號，請提供具有等同功能的識辨編號（如社會安全號碼、國家社會保險號碼、公民/個人身份號碼或居民登記號碼）。

If you cannot provide a Tax reference number, or functional equivalent please provide appropriate reason A or B.  
如您未能提供稅務參考編號或具有等同功能的識辨編號，必須填寫合適的理由A或B。

**Reason A** The country where the policyholder is tax resident does not issue a Tax reference number  
**理由 A** 保單持有人的稅務居留國家並沒有向其居民發出稅務參考編號

**Reason B** The policyholder is otherwise unable to obtain a Tax reference number or equivalent number  
**理由 B** 保單持有人不能取得稅務參考編號或具有等同功能的識辨編號

Country of tax residence 稅務居留國家	Tax reference number 稅務參考編號	If no Tax reference or functional equivalent is available, enter Reason A or B 如沒有提供稅務參考編號或具有等同功能的識辨編號，填寫理由A或B
1.		
2.		
3.		

If **Reason B** is selected, please explain why you are unable to obtain a Tax Reference number or functional equivalent, in the box below.  
如選取**理由 B**，請在下列方格解釋保單持有人不能取得稅務參考編號或具有等同功能的識辨編號的原因。

1.
2.
3.

## Declaration for data protection 個人資料保障聲明

Personal Information Collection Statement for Zurich International Life Limited  
蘇黎世國際人壽保險有限公司之收集個人資料聲明

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, together with its Addendum that applies if you are located in Mainland China, which is made available on our website at [www.zurich.com.hk/pics](http://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.  
本公司之私隱政策及其附錄（附錄適用於身處於中國內地的客戶）詳載於 [www.zurich.com.hk/pics](http://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**

## Declaration for data protection (continued) 個人資料保障聲明 (續)

**persons' consent**, 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 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，於獲該保單持有人或受保人同意後，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 agree to the use or transfer of my/our personal data for marketing purposes as set out above.

本人／我們同意 貴公司使用或向第三方提供本人／我們的個人資料作上列市場推廣用途。

I/We understand that the Company will only communicate with me/us using the contact details that I/we have supplied. Where I/we have provided more than one form of contact details, the most appropriate method of communication will be used depending on the urgency and sensitivity of the information.

本人／我們明白 貴公司只會以本人／我們提供的聯絡資料與本人／我們通訊。若本人／我們提供多過一種聯絡資料，貴公司會因應資訊的緊急及敏感程度，而採用最合適的聯絡方法。

I/We note that my/our telephone calls may be recorded or monitored in order to offer additional security, resolve complaints and for training, administrative and quality purposes.

本人／我們知道 貴公司或會將本人／我們的電話對話作錄音或監察，以作強化保安、處理投訴、訓練、行政和提升服務質素之用。

I/We understand that my/our personal information may be passed outside Hong Kong to countries that do not have equivalent levels of data protection; however the Company would be responsible for ensuring that equivalent levels of protection are maintained.

本人／我們明白本人／我們的個人資料可能被傳送至香港以外的國家，而這些國家並沒有同等程度的個人資料保障，但 貴公司有責任確保本人／我們的個人資料受到同等程度的保障。

I/We confirm that I/we agree to my/our personal data being collected, used and transferred as set out above in the Personal Information Collection Statement and Declaration.

本人／我們謹此同意可收集、使用及傳送本人／我們的個人資料作上述收集個人資料聲明之用途。

I/We further confirm that I/we agree with the Company's use and transfer of my/our sensitive personal data as set out in the "Addendum to Personal Information Collection Statement" ([www.zurich.com.hk/en/services/privacy](http://www.zurich.com.hk/en/services/privacy)).

本人／我們進一步同意 貴公司按照「收集個人資料聲明之附錄」（[www.zurich.com.hk/zh-hk/services/privacy](http://www.zurich.com.hk/zh-hk/services/privacy)）中列明的方式使用及傳送本人／我們的敏感個人資料。

If your signature is different from the signature in your passport/ID provided or if your signature has changed over a period of time, you will need to complete a 'Certifying signature form'.

若您的簽署與護照／身份證明上的簽署不同，或若您的簽署已更改一段時間，您須填妥「核證簽名表格」。

## Declarations and signature 聲明及簽署

I confirm that the information contained in this form including information regarding my account, may be reported to the tax authorities of the country in which this account is maintained, and may be exchanged with the tax authorities of another country or countries in which I am tax resident.

本人確認 貴公司或會向此賬戶所處國家的稅務機關申報本表格所載有關本人的賬戶資料，及可能把該等資料轉交至其他國家或本人稅務居留國家的稅務機關。

I declare that all statements made in this declaration are to the best of my knowledge and belief, correct and complete. I agree that I will submit a new form if any information on this form becomes incorrect.

本人聲明就本人所知所信，本表格內所填報的所有資料和聲明均屬真實、正確和完備。本人同意如情況有所改變，引致本表格所載的資料不正確，本人會向 貴公司提交一份已適當更新的表格。

Signature  
簽署

Date  
signed  
簽署日期

Day 日 Month 月 Year 年

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Print name  
姓名

Calls may be recorded or monitored in order to offer additional security, resolve complaints and for training, administrative and quality purposes.

Zurich International Life is a business name of Zurich International Life Limited which provides life assurance, investment and protection products and is authorized by the Isle of Man Financial Services Authority.

Registered in the Isle of Man number 20126C.

Registered office: Zurich House, Isle of Man Business Park, Douglas, Isle of Man, IM2 2QZ, British Isles  
Telephone: +44 1624 662266 Telefax: +44 1624 662038

Hong Kong office: 25-26/F, One Island East, 18 Westlands Road, Island East, Hong Kong  
Telephone: +852 3405 7150 Telefax: +852 3405 7268

[www.zurich.com.hk](http://www.zurich.com.hk)

電話內容可能會被錄音及監察，以作強化保安、處理投訴及訓練、行政和提升服務質素之用。

蘇黎世國際人壽保險是蘇黎世國際人壽保險有限公司的商業名稱。蘇黎世國際人壽保險有限公司為人島 Financial Services Authority 所認可，提供人壽保險、投資及保障產品。

於人島的註冊號碼為20126C。

註冊辦事處：Zurich House, Isle of Man Business Park, Douglas, Isle of Man, IM2 2QZ, British Isles  
電話：+44 1624 662266 傳真：+44 1624 662038

香港辦事處：香港港島東華蘭路18號港島東中心25-26樓  
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