



Proposal no. 投保書號碼：

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Financial needs analysis form

財務需要分析表

Important notes 重要事項：

- This FNA form is to facilitate the identification of suitable insurance product(s) to meet your needs and circumstances. Please answer all questions in this form. Otherwise, Update to Zurich International Life Limited ("the Company") will reject your application.**
本財務需要分析表旨在協助尋找適合的保險產品，以滿足閣下的需要及情況。請回答本表格所述的所有問題。否則，蘇黎世國際人壽保險有限公司（「本公司」）會拒絕閣下之申請。
- Do NOT sign on this form if any questions are unanswered and have not been crossed out. Do NOT sign on blank form.**
請勿於未完成回答本表格的所有問題或於任何問題被刪除的情況下簽署本表格。請勿在空白的表格上簽署。
- You need to inform us if there is any substantial change of information provided in this form.**
如在本表中提供的資料有任何重大變更，請告知我們。
- This form should be filled in BLOCK LETTERS and signed by the proposer/policyholder.**
請由投保人／保單持有人以正楷填寫及簽名。
- 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 甲部： Personal information 個人資料

1. Name of proposer/policyholder
投保人／保單持有人姓名

2. Gender 性別	<input type="radio"/> Male 男	<input type="radio"/> Female 女	3. Date of birth 出生日期	DD 日	MM 月	YYYY 年
4. Marital status 婚姻狀況	<input type="radio"/> Single 未婚	<input type="radio"/> Married 已婚	<input type="radio"/> Divorced 離婚	<input type="radio"/> Widowed 喪偶	5. No. of dependants 受供養者人數	
6. Education level 教育程度	<input type="radio"/> Primary or below 小學或以下	<input type="radio"/> Secondary/Advanced 中學／預科	<input type="radio"/> Tertiary or above 大專或以上	7. Occupation 職業		

Section B 乙部： Financial needs analysis 財務需要分析

1. What are your objectives for seeking to purchase an insurance product? (select one or more)
閣下購買保險產品的目標為何？（可選一項或多項）

- a. Financial protection against adversities (e.g. death, accident, disability, etc.)
為應付不時之需提供財務保障（如身故、意外、殘疾等）
- b. Preparation for health care needs (e.g. critical illness, hospitalization, etc.)
為應付醫療保健需要（如危疾、住院等）
- c. Providing regular income in the future (e.g. retirement income, etc.)
為未來提供定期的收入（如退休收入等）
- d. Saving up for the future (e.g. child education, retirement, etc.)
為未來需要作儲蓄（如兒童教育、退休等）
- e. Investment (If selected, please answer the below question no. 2)
投資（若選擇，請回答以下問題2）
- f. Others (Please specify _____)
其他（請說明_____）

2. To meet your "Investment" objective indicated above, how would you prefer to manage different investment options/investment choices, if available, under the insurance product? (select one)
為實現上述「投資」的目標，閣下希望如何管理保險產品項下的不同投資選項／投資選擇（如有）？（請選一項）

- a. I want to make my own decisions (without any professional advice to be provided by the authorized insurer and/or licensed insurance intermediaries) to choose and manage different investment options/investment choices, if available, under an insurance product, and I am willing to do it throughout the entire duration of the target benefit/protection period of an insurance product.
本人願意按個人決定（毋須獲授權保險人及／或持牌保險中介人提供任何專業意見的情況）選擇及管理保險產品項下的不同投資選項／投資選擇（如有），並且願意在保險產品的目標利益／保障期的整個期間作出此決定。

- b. I want to make my own decisions (with professional advice to be provided by the authorized insurer and/or licensed insurance intermediaries) to choose and manage different investment options/investment choices, if available, under an insurance product, and I am willing to do it throughout the entire duration of the target benefit/protection period of an insurance product.
本人願意按個人決定(經獲授權保險人及/或持牌保險中介人提供專業意見的情況)選擇及管理保險產品項下的不同投資選項/投資選擇(如有),並且願意在保險產品的目標利益/保障期的整個期間作出此決定。
- c. I do not want to choose or manage different investment options/investment choices, if available, under an insurance product.
本人不願意選擇或管理保險產品項下的不同投資選項/投資選擇(如有)。
3. What is your target benefit/protection period/expected timeframe for meeting the target amount for insurance policy? (select one)
閣下的保單目標利益/保障期/實現目標金額的預期時間為?(請選一項)
- a. Less than 1 year
少於 1 年
- b. 1 – 5 years
1 至 5 年
- c. 6 – 10 years
6 至 10 年
- d. 11 – 15 years
11 至 15 年
- e. 16 – 20 years
16 至 20 年
- f. More than 20 years
超過 20 年
- g. Whole of life
終身
4. Your ability and willingness to pay insurance premiums:
閣下繳付保費的能力及意願:
- a. What is your average monthly disposable income (i.e. after deducting the expenditure) from all sources (including income from liquid assets) in the past two years?
在過去兩年內,閣下透過所有收入來源(包括流動資產收入)獲得的平均每月可動用收入(即經扣除開支後)為?
- Not less than 不少於 HKD 港元_____ ; or 或
- In the following range (tick one):
在以下範圍(請選一項):
- i. less than HKD 10,000
少於港元 10,000
- ii. HKD 10,000 – HKD 19,999
港元 10,000 至港元 19,999
- iii. HKD 20,000 – HKD 49,999
港元 20,000 至港元 49,999
- iv. HKD 50,000 – HKD 100,000
港元 50,000 至港元 100,000
- v. over HKD 100,000
超過港元 100,000
- b. What percentage of your monthly disposable income (i.e. after deducting the expenditure) from all sources (including income from liquid assets) would you be able and willing to use to pay for the insurance premium (including your existing insurance policy(ies)) throughout the entire term of the insurance policy? (select one)
在整個保單期內,閣下能夠及願意繳付的保費(包括閣下現有的其他保單)佔透過所有收入來源(包括流動資產收入)獲得的每月可動用收入(即經扣除開支)的比率為?(請選一項)
- i. Less than 少於 10%
- ii. 10% – 20%
- iii. 21% – 30%
- iv. 31% – 40%
- v. 41% – 50%
- vi. More than 超過 50%
- c. For how long are you able and willing to pay for an insurance policy? (select one)
閣下能夠及願意為保單支付保費的年期為?(請選一項)
- i. 2 – 5 years 年
- ii. 6 – 10 years 年
- iii. 11 – 15 years 年
- iv. 16 – 20 years 年
- v. More than 20 years (until target retirement age of _____)
超過 20 年(至_____歲的目標退休年齡)
- vi. Whole of life (including period after target retirement age of _____)
終身(包括_____歲的目標退休年齡後的時期)
- vii. A single payment of not more than HKD _____
不超過港元_____的一次性付款

5. Affordability analysis 承擔能力分析

a. Total assets 總資產	
i. Total liquid assets 總流動資產 (including cash and deposit, stocks, securities, bonds and mutual funds, etc. 包括現金和存款、股票、證券、債券及互惠基金等)	HKD 港元 _____ (M)
ii. Total fixed assets 總固定資產 (including company shares, real estate and other assets 包括公司股份、物業及其他物業)	HKD 港元 _____ (N)
b. Total liabilities 總負債 (including outstanding mortgage loan and personal loan/debt balance 包括未償還按揭貸款及私人貸款餘額)	HKD 港元 _____ (O)
c. Total net assets 總淨資產 (M+N-O)	HKD 港元 _____

Section C 丙部： Evaluation and recommendations 評估及建議

1. Based on your answers to the questions above, the licensed insurance intermediary has explored and introduced the following insurance options (as available to the licensed insurance intermediary) to meet your objective(s) and needs(s):
 根據閣下的上述選項，持牌保險中介人曾與閣下討論及介紹下列保險產品的選擇（因應持牌保險中介人所能提供的產品），以迎合閣下選購保險產品的目標及滿足閣下的需要：

Insurance company name 保險公司名稱	Introduced product name 已介紹之保險產品名稱	Objective(s) of the introduced product(s) [Q1 of section B] 已介紹之保險產品目標 [乙部問題一]
		<input type="radio"/> a <input type="radio"/> b <input type="radio"/> c <input type="radio"/> d <input type="radio"/> e <input type="radio"/> f
		<input type="radio"/> a <input type="radio"/> b <input type="radio"/> c <input type="radio"/> d <input type="radio"/> e <input type="radio"/> f
		<input type="radio"/> a <input type="radio"/> b <input type="radio"/> c <input type="radio"/> d <input type="radio"/> e <input type="radio"/> f

If there are no other insurance options to be explored and introduced, the licensed insurance intermediary should provide the reasons as below:
 若沒有任何其他保險產品討論及介紹，持牌保險中介人必需提供理由如下：

2. Reason for recommendations 建議的原因：

Section D 丁部： Declaration 聲明

Declaration for data protection 個人資料保障聲明

Personal Information Collection Statement
 收集個人資料聲明

- The Company collects, stores and processes, by electronic or other means, customer's personal information, including but not limited to: title, family name, forename(s), country and place of birth, nationality, date of birth, residential address, place/places of residence, health information if applicable, tax identification number if applicable, email address, telephone number, gender, marital status and employment and financial details.
 本公司以電子或其他方式收集、儲存及處理客戶的個人資料，包括但不限於稱銜、姓氏、姓名、出生國家及地點、國籍、出生日期、住址、居住地、健康資料（如適用）、稅務編號（如適用）、電郵地址、電話號碼、性別、婚姻狀況、就業及財務細節。
- The personal information of customers (including policyholders, insured persons, beneficiaries, premium payors, trustees, policy assignees and claimants) collected or held by the Company may be used by the Company for the following purposes **necessary** in providing insurance 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，均可供本公司使用作以下提供保險服務而必須的用途（否則本公司將無法為未能提供所需資料的客戶提供服務）：
 - to process, investigate (and assist others to investigate) and determine insurance applications, insurance claims and provide ongoing insurance services;
 辦理、調查（及協助他人調查）和決定保險申請、保險索償及提供持續的保險服務；
 - to process requests for payment, and for direct debit authorization;
 辦理付款要求及直接付款授權；
 - to manage any claim, action and/or proceedings brought against the customers, and to exercise the Company's rights as more particularly defined in applicable policy wording, including but not limited to the subrogation right;
 處理任何對客戶的索償、訴訟及／或司法程序；以及行使本公司的權利（詳情見適用保單條款所定），包括但不限於代位權；

- (4) to compile statistics or database or conduct market or actuarial research or insurance surveys undertaken by the Company and/or its group (“**Zurich Insurance Group**”), the financial services industry, respective regulators or industry recognized bodies, or use for accounting and actuarial purposes;
由本公司及／或其所屬集團(「蘇黎世保險集團」)、金融服務業界、相關監管機構或公認行業組織編撰統計數字或資料庫，或進行市場或精算研究或保險調查，或作會計和精算用途；
- (5) to meet the disclosure requirements of any local or foreign law, regulations, codes or guidelines binding on the Company and/or the Zurich Insurance Group and conduct matching procedures where necessary;
符合對本公司及／或蘇黎世保險集團具約束力的任何本地或外國法例、規則、守則或指引的披露規定及如需要時進行核對程序；
- (6) to comply with the legitimate requests or orders of the courts of Hong Kong and regulators including but not limited to the Insurance Authority, Hong Kong Federation of Insurers, auditors, governmental bodies and government-related establishments;
遵循香港法院及監管機構作出的合法要求或指令，包括但不限於保險業監管局、香港保險業聯會、核數師、政府組織和政府相關機構；
- (7) to perform customer analysis, profiling and segmentation;
進行客戶研究分析及分層；
- (8) to collect debts;
債務追討；
- (9) to facilitate the Company’s authorized service providers to provide services to the Company and/or the customers for the above purposes; and
便利本公司的認可服務供應商，就上述目的為本公司及／或客戶提供服務；及
- (10) to enable an actual or proposed assignee of the Company to evaluate the transaction intended to be the subject of the assignment.
使本公司的實際或建議承讓人能夠評核擬進行涉及有關轉讓的交易。
3. The Company may provide any personal information of customers to the following parties, within or outside of Hong Kong, for the purposes **necessary** in providing insurance services set out in paragraph 2 above:
本公司可就上述第二段提供保險服務而**必須**的用途，向以下於香港境內或境外的人士提供**任何**客戶個人資料：
- (1) companies within the Zurich Insurance Group, or any other company carrying on insurance or reinsurance related business, or an intermediary;
蘇黎世保險集團成員公司，或任何進行保險或再保險相關業務的其他公司或中介人；
- (2) any agent, contractor or third party service provider who provides administrative, telecommunications, computer, payment or other services to the Zurich Insurance Group in connection with the operation of its business;
任何向蘇黎世保險集團提供行政、電訊、電腦、付款或其他與其業務運作有關的服務的代理人、承包商或第三方服務供應商；
- (3) third party service providers including legal advisors, accountants, investigators, loss adjusters, reinsurers, medical and rehabilitation consultants, surveyors, specialists, repairers, and data processors;
第三方服務供應商，包括法律顧問、會計師、調查員、理賠師、再保公司、醫護及復康顧問、考察員、專家、維修人員、及資料處理者；
- (4) credit reference agencies, and, in the event of default, any debt collection agencies or companies carrying on claim or investigation services;
信貸諮詢機構，而在客戶欠帳時，任何債務追收代理或進行索償或調查服務的公司；
- (5) any person to whom the Zurich Insurance Group is under an obligation to make disclosure under the requirements of any law binding on the Zurich Insurance Group or any of its associated companies and for the purposes of any regulations, codes or guidelines issued by governmental, regulatory or other authorities with which the Zurich Insurance Group or any of its associated companies are expected to comply;
根據對蘇黎世保險集團或其任何關連機構具約束力的任何法例，及就任何由政府、監管或其他機關所頒佈且蘇黎世保險集團或其任何關連機構預期須遵守的任何規例、守則或指引而言，蘇黎世保險集團有責任向其作出披露的任何人士；
- (6) any person pursuant to any order of a court of competent jurisdiction; and
根據主管司法權區的法院的任何頒令的任何人士；及
- (7) any actual or proposed assignee of the Zurich Insurance Group or transferee of the Zurich Insurance Group’s rights in respect of the policyholders.
蘇黎世保險集團的任何實際或建議承讓人或蘇黎世保險集團對保單持有人的權利的受讓人。

As a global business, the Company will adopt contractual safeguard as applicable where it transfers personal information to other locations. A copy of the standard contractual safeguard is available on request from the Personal Data Privacy Officer.

作為一間跨國公司，本公司將在傳輸個人資料至其他地方時適當地採用合約保障措施。個人資料私隱主任會應要求提供標準合約保障的副本。

4. Certain personal information of policyholders and insured persons collected or held by the Company, in particular, names, contact information, age, gender, identity document reference, marital status, policy information, claim information and medical history may be used by the Company for the following **marketing-related** purposes (the Company is not allowed to use the personal information of any customer for the purposes set out under this paragraph without such customer’s consent):
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，特別是姓名、聯絡資料、年齡、性別、身份證明文件資料、婚姻狀況、保單資料、索償資料及醫療紀錄等，均可供本公司使用作以下**市場推廣**用途(未經客戶同意，本公司不得將任何客戶的個人資料用於此段下提及的用途)：
- (1) to provide marketing materials and conduct analysis and 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.
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／或其他商業合作伙伴之相關服務，提供市場推廣資料、進行分析及直接市場推廣活動。
5. The Company may provide certain personal information as set out in paragraph 4 above of a policyholder and an insured person, upon such policyholder’s and insured person’s written consent, to the following parties, within or outside of Hong Kong, for the **marketing-related** purposes set out in paragraph 4 above:
經保單持有人及受保人書面同意後，本公司可就上述第四段提及的**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於上述第四段提及的個人資料：
- (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; and
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；及
- (3) third party marketing service providers and insurance intermediaries.
第三方市場推廣服務供應商及理財顧問。

The Company is not allowed to provide to any third party the personal information of any customer, specifically, policyholders or insured persons, for the marketing-related purposes set out in paragraph 4 above without their written consent.

未經客戶書面同意，本公司不得向任何第三方提供有關客戶（特別指保單持有人及受保人）的個人資料作上述第四段提及的市場推廣用途。

6. All customers have the right to access, correct, erase, obtain in digital format, restrict or object to processing of any of their own personal information held by the Company, not to be subject to automated individual decision making processes, withdraw consent at any time where processing is based on consent without affecting the lawfulness of processing based on consent before its withdrawal (including to opt-out of the Company's use and transfer of their personal information for the marketing-related purposes), by request in writing to the Company's Personal Data Privacy Officer at the address below. The Company may not be able to continue providing services to customers who have their personal information erased or have the processing of personal information restricted, or withdraw their consent on the processing personal information. Requests for opt-out must state clearly the full name, identity document number, policy number, telephone number and address of the person making such request.

所有客戶均有權以書面向本公司的個人資料私隱主任（地址如下）要求查閱、修正、刪除、以數碼形式獲取、限制或反對處理本公司所持有有關其本身的任何個人資料，不受制於自動化的個人決策過程，隨時撤回基於同意下處理資料的意願（但不影響在撤回同意前的資料處理的合法性），包括反對本公司使用及提供其個人資料作市場推廣用途。本公司可能無法繼續向已刪除或限制處理個人資料，或撤回處理個人資料意願的客戶提供服務。向本公司提出市場推廣用途之反對要求時，必須於有關反對要求中清楚註明要求人士之全名、身份證明文件號碼、保單號碼、電話號碼和地址。

Data Privacy Contact

Personal Data Privacy Officer

26/F, One Island East, 18 Westlands Road, Island East, Hong Kong

個人資料私隱主任聯絡資料

個人資料私隱主任

香港港島東華蘭路 18 號港島東中心 26 樓

7. The Isle of Man Information Commissioner (www.inforights.im) can be contacted if there is any cause for complaint regarding the Company's processing of personal information.
如有任何關於本公司處理個人資料的投訴，可聯絡人島私隱專員（www.inforights.im）。
8. Where a data access request is made under this statement, the Company may process it free of charge. However, under particular circumstances, the Company may charge a reasonable fee or refuse to act on the request.
本公司可免費處理根據本聲明提出的資料查閱要求。但在特殊情況下，本公司可能會收取合理的費用或拒絕該要求。
9. The Company retains personal information for as long as is necessary to meet the purposes for which it was originally collected or to satisfy the Company's legal or regulatory obligations.
本公司將保存個人資料以達到其最初收集的目的或符合本公司的法例或監管要求所需。
10. In the event of any discrepancy or inconsistencies between the English and Chinese versions of this statement, the English version shall prevail.
本聲明中英文版本如有任何歧異或不一致，概以英文版為準。

I/We consent to being contacted for selected products, services or offers that may be of my/our interest as set out under the marketing-related purposes in paragraphs 4 and 5 above if I/we tick here and sign below.

本人在此處加上✓號並在以下簽署，則表示同意 貴公司根據上述第四及第五段中就市場推廣目的所述以及本人／我們可能感興趣的某些產品、服務或優惠聯絡本人／我們。

I understand that the Company will only communicate with me using the contact details that I have supplied. Where I 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.

本人明白 貴公司只會以本人提供的聯絡資料與本人通訊。若本人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 note that my telephone calls may be recorded or monitored in order to offer additional security, resolve complaints and for training, administrative and quality purposes.

本人知道 貴公司或會將本人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 understand that my 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.

本人明白本人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的個人資料受到同等程度的保障。

I confirm that I agree to my personal data being collected and used as set out above.

本人謹此同意 貴公司可收集本人的個人資料及作上述用途。

Section E 戊部： Declaration and acknowledgement 聲明及確認

I/We hereby declare that the information contained in the financial needs analysis form above are complete, true and accurate to the best of my/our knowledge. The advice and recommendations provided by the licensed insurance intermediary are based on the information provided by me/us. The licensed insurance intermediary has clearly explained the evaluation and recommendations to me/us.

本人／我們謹此聲明以上財務需要分析表格所載的資料就本人／我們所知所信為完整、真實及正確。持牌保險中介人的意見及建議是按照本人／我們提供的資料而作出。持牌保險中介人已清楚向本人／我們講解評估及建議。

I/We hereby further confirm my/our agreement to all sections above, including without limitation, the above declarations and the Notice to customers relating to the Personal Data (Privacy) Ordinance.

本人／我們同時確認同意本表格內之所有部分，包括但不限於上列之聲明及有關個人資料（私隱）條例的客戶通知。

		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"/>
Name of proposer/policyholder 準受保人／保單持有人姓名		Signature of proposer/policyholder 準受保人／保單持有人簽署					
()		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"/>
Full name of licensed insurance intermediary (IA license no.) 持牌保險中介人姓名（保監牌照號碼）		Signature of licensed insurance intermediary 持牌保險中介人簽署					
Company name of licensed insurance intermediary 持牌保險中介人公司名稱		Company code of licensed insurance intermediary 持牌保險中介人公司編號					

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

In the event of any discrepancy 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。

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Registered in the Isle of Man number 20126C.

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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
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