

Encashment/Surrender form for regular premium

定期保費提款／退保表格

Policy number:
保單編號：

8384801

Please read these notes carefully before completing this form. 填寫本表格前，請細閱下列附註。

1. Returning your form 交回您的表格

Please use blue or black ink and write clearly in **CAPITAL** letters and send it to your relevant financial professional or send it to us at:
請用藍色或黑色原子筆，用英文正楷填寫本表格，並把表格送交您的相關理財顧問或寄往本公司的以下地址：

25-26/F, One Island East, 18 Westlands Road, Island East, Hong Kong
香港港島東華蘭路18號港島東中心25-26樓

Telephone: +852 3405 7150 Telefax: +852 3405 7268
電話：+852 3405 7150 傳真：+852 3405 7268

2. Contact details 聯絡資料

We adhere to strict confidentiality procedures when we communicate with our clients. For security purposes, we will regard the details you provide as your authorized contact details; it is therefore important that they are accurate and that you let us know if any of these details change.
我們於聯絡客戶時嚴格執行保密程序。為保障客戶私隱，您所提供的資料將被視為認可的聯絡資料，故此請務必提供準確的資料，如資料有變，請通知本公司。

3. Policies written in trust 以信託形式承保的保單

We will make any payment payable to all the trustees. In some cases, trustees may authorize payment jointly to themselves or to their professional agent (e.g. a bank or solicitor).
我們的任何付款將以所有信託人為收款人。在若干情況下，信託人可授權付款予所有信託人或其專業代理（例如銀行或律師）。

It is the trustees' responsibility to ensure that the proceeds of the policy are used in accordance with the terms of the trust. Some trusts specifically exclude the settlor (the person(s) who declared the trust) from benefiting from the proceeds of the policy.
信託人有責任確保保單收益乃根據信託條款使用。部分信託特別訂明排除委託人（將資產轉移至信託的人士）受惠於保單收益。

4. Conditionally assigned policies 有條件地轉讓的保單

If your policy is assigned as security against a loan, you must send us the assignee's agreement or ask them to issue a notice of reassignment before we can process any changes or encashments/surrenders.

若您的保單被轉讓，作為貸款的抵押，您必須向我們寄發承讓人協議或要求承讓人向我們發出重新轉讓通知，我們才可處理任何變動或提款／退保。

5. Alternatives to encash/surrender your policy 從您的保單中提款／退保的方式

There are a number of alternatives to encash/surrender your policy. These will vary between each of our products and may also vary depending on when your policy was issued. Before you make a final decision on the option you wish to take, we recommend that you take advice from your relevant financial professional. If you are in any doubt as to which options apply to your policy, please refer to your relevant financial professional, your policy documentation or the Zurich International Life Limited ("Company", "Zurich") office in Hong Kong.

您可以不同方式從您的保單中提款／退保。提款／退保方式因應各產品而有所不同，亦可能視乎您的保單簽發時間而不同。在您就有意挑選的選項作出最終決定前，我們建議您尋求您的相關理財顧問的意見。若您對適用於您的保單的選項有任何疑問，請諮詢您的相關理財顧問、參閱您的保單文件或詢問蘇黎世國際人壽保險有限公司（「本公司」、「蘇黎世」）的香港辦事處。

Please remember that depending on the length of time that you have held your policy, any encashment/surrender may be subject to an encashment/surrender fee and your entitlement to the bonuses may also be affected. It is important to remember that should you choose any other options, the standard policy charges will continue. You should consider carefully the implications that this may have on your investments. Please refer to the terms of your policy for further details.

請注意，視乎您持有保單的時間長短，任何提款／退保或須繳付提款／退保費用及您的獎賞或會受到影響。請謹記，若您挑選任何其他選項，將須繼續支付已定的保單費用。您應審慎考慮這對您的投資可能造成的影響。其他詳情請參閱您的保單條款。

If you do decide to encash/surrender, partially encash/surrender or make regular withdrawals from your policy, our Customer Care Team will be able to confirm details of the maximum partial encashment/surrender you can take and the payment options for regular partial withdrawals.
若您決定進行保單提款／退保、部分提款／退保或定期提款，我們的客戶服務部將可確定您可提取的部分款項金額的上限詳情，以及定期提取部分款項的付款選項。

Please read these notes carefully before completing this form. 填寫本表格前，請細閱下列附註。

6. Reduce your premium amount 減低您的保費額

Depending on the premium amount that you already paid, you may be able to decrease your premium amount and still keep the benefits that your policy has to offer.

視乎您已支付的保費額，您或能減低您的保費額，同時維持您的保單必須提供的賠償。

7. Suspension of premiums 暫停支付保費

Your policy may be flexible enough for you to take a break from paying your premiums for a period of months without charge. Any benefits that you have will be covered (provided that there is enough value in your policy to sustain them).

您的保單的靈活性可能足以讓您在數月內暫停支付保費，而無須繳付任何費用。您所享有的賠償將獲得保障（惟您的保單價值須足以維持有關賠償）。

8. Partial encashment/surrender or maximum partial encashment/surrender 部分提款／退保或部分提款／退保金額的上限

If you would like to release some money from your policy without incurring any fees, it may be possible to take a partial encashment/surrender. This amount is normally a percentage of the encashment/surrender value of your policy. A maximum partial encashment/surrender is the most you can take from your policy without fully encashing/surrendering it.

若您有意從保單中套現而不被收取任何費用，則可選擇部分提款／退保。部分提款／退保的金額一般是您的保單的退保價值的一個百分比。部分提款／退保金額的上限是指在並非完全退保的情況下可從保單提取的最高款項。

9. Regular withdrawals 定期提款

If you would like to release money from your policy on a regular basis without incurring any fees, it may be possible to take regular withdrawals. The minimum amount of regular withdrawals is normally determined by the method of payment you choose.

若您有意定期從保單提取款項，而不被收取任何費用，則可選擇定期提款。最低定期提款額一般取決於您選擇的付款方式。

All payments made will be subject to any applicable trade or economic sanctions.

所有支付的款項將受限於任何適用的貿易或經濟制裁。

10. Benefits* 保障*

If your policy offers additional benefit options, you may be able to add additional benefits; they can be added at any time but are subject to underwriting. For details of the benefit options available to your policy, please contact your relevant financial professional or refer to your policy documentation.

若您的保單提供附加保障選項，您或可增加額外附加保障；有關附加保障可隨時增加，但受承保所規限。有關您的保單提供的附加保障選項詳情，請聯絡您的相關理財顧問或參閱您的保單文件。

11. Switching your investment choices* 轉換您的投資選擇*

If you wish to change your investment choice, you can switch your investment choice whenever you choose to bring your policy more in line with your attitude to risk. There is a comprehensive range of investment choices available. We also offer investment strategies where your investment choices are automatically switched to more secure assets as you move closer to your policy maturity. Details of our investment choices and the investment strategies can be found on our website – www.zurich.com.hk.

若您有意改變您的投資選擇，您可轉換您的投資選擇，令保單更切合您對待風險的態度。我們提供一系列的投資選擇。我們亦提供多種投資策略，因此隨著您的保單到期日漸近，您的投資選擇可自動轉換至更安全的資產。我們的投資選擇及投資策略的詳情列載於我們的網站 – www.zurich.com.hk。

12. Loans* 貸款*

You may be able to take a loan from your policy. Please contact your local Zurich office for details.

您或可從您的保單獲取貸款，請聯絡您的本地蘇黎世辦事處，以獲取詳情。

* Please note that these options are not available if any policyholder(s) is resident of the United States.

請注意，若任何保單持有人是美國居民，將不獲提供有關選項。

13. If you are not satisfied with our handling of your claim (or 'encashment'/'surrender' depending on the type of item), please refer to our complaints procedure.

若您對本公司處理索償（或「提款」／「退保」，視項目類別而定）的過程有任何不滿，可參考本公司的投訴程序。

1 Policy details 保單資料

For completion by individual policyholders only 只供個人保單持有人填寫

Policyholder 1 第一保單持有人	
Title 稱銜	
<input checked="" 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 LAU	
Forename(s) 名 MAN KIN	
Please give details of any previous name(s) or aliases used (including maiden name) 請詳述任何曾使用的姓名或別名 (包括婚前姓氏)	
Country of birth 出生國家 CHINA	
Place of birth (town or city) 出生地點 (城鎮或城市) HONG KONG	

Policyholder 2 第二保單持有人	
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	
Please give details of any previous name(s) or aliases used (including maiden name) 請詳述任何曾使用的姓名或別名 (包括婚前姓氏)	
Country of birth 出生國家	
Place of birth (town or city) 出生地點 (城鎮或城市)	

Policy details (continued) 保單資料 (續)

Policyholder 1 (continued) 第一保單持有人 (續)

Nationality 國籍 CHINA HONG KONG

Do you hold nationality in another country?
您有否持有多於一個國家的國籍?

☐ Yes 有 ☒ No 沒有

If 'Yes', please confirm the country.
如答案為「有」，請確認國家名稱。

Contact details 聯絡資料

Current residential address 現時住址

FLAT 2212, KWAI TAI HOUSE
KWAI FONG ESTATE
KWAI CHUNG
N.T.
HONG KONG SAR

Is the above address permanent or temporary?
上述地址是永久或暫時住址?

☒ Permanent 永久 ☐ Temporary 暫時

If temporary, please state the reason for this:
如屬暫時住址，請說明理由：

Correspondence address (if different) 通訊地址 (如與住址不同)

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.
請說明為何您的通訊地址有別於您的住址。視乎所提供的說明，我們或會詢問更多資料。

Home telephone number

(include international country code)

住宅電話號碼 (包括國家區號) 852 24237433

Region of home telephone number

住宅電話號碼的地區 HONG KONG

Mobile number

(include international country code)

手提電話號碼 (包括國家區號) 852 97730041

Region of mobile number

手提電話號碼的地區 HONG KONG

Email address 電郵地址 kenny.slayers@gmail.com

Policyholder 2 (continued) 第二保單持有人 (續)

Nationality 國籍

Do you hold nationality in another country?
您有否持有多於一個國家的國籍?

☐ Yes 有 ☐ No 沒有

If 'Yes', please confirm the country.
如答案為「有」，請確認國家名稱。

Contact details 聯絡資料

Current residential address 現時住址

Is the above address permanent or temporary?
上述地址是永久或暫時住址?

☐ Permanent 永久 ☐ Temporary 暫時

If temporary, please state the reason for this:
如屬暫時住址，請說明理由：

Correspondence address (if different) 通訊地址 (如與住址不同)

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.
請說明為何您的通訊地址有別於您的住址。視乎所提供的說明，我們或會詢問更多資料。

Home telephone number

(include international country code)

住宅電話號碼 (包括國家區號)

Region of home telephone number

住宅電話號碼的地區

Mobile number

(include international country code)

手提電話號碼 (包括國家區號)

Region of mobile number

手提電話號碼的地區

Email address 電郵地址

Policy details (continued) 保單資料 (續)

Policyholder 1 (continued) 第一保單持有人 (續)

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

Is this a US* based telephone number? 這個是美國*電話號碼嗎?

☐ Yes 是 ☒ No 否

If you have answered 'Yes' to any of the above questions, or if either policyholder is a US national, resides in the US or is requesting a regular income payment to be made to a US account, your application cannot be accepted by the Company.

如上述任何一條問題的答案為「是」，或其中一個保單持有人為美國國民、居於美國或要求將入息定期存入任何美國賬戶，本公司將無法接納您的申請。

Please state all countries where you are currently deemed to be resident for tax purposes.

請註明所有目前視您為稅收上居民的國家。

Country/Countries of tax residence 稅務居留國家

1 HONG KONG SAR

2

3

Tax reference number(s) ^

稅務參考編號 ^

1 21628705

2

3

Policyholder 2 (continued) 第二保單持有人 (續)

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

Is this a US* based telephone number? 這個是美國*電話號碼嗎?

☐ Yes 是 ☐ No 否

If you have answered 'Yes' to any of the above questions, or if either policyholder is a US national, resides in the US or is requesting a regular income payment to be made to a US account, your application cannot be accepted by the Company.

如上述任何一條問題的答案為「是」，或其中一個保單持有人為美國國民、居於美國或要求將入息定期存入任何美國賬戶，本公司將無法接納您的申請。

Please state all countries where you are currently deemed to be resident for tax purposes.

請註明所有目前視您為稅收上居民的國家。

Country/Countries of tax residence 稅務居留國家

1

2

3

Tax reference number(s) ^

稅務參考編號 ^

1

2

3

* 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。

^ If you are currently tax resident in the United Kingdom, please provide your National Insurance number.

如果您目前為英國的稅收居民，請提供您的國家社會保險號。

Policy details (continued) 保單資料 (續)

For completion by those acting on behalf of a company or a trust 由代表公司或信託行事的人士填寫

Name of the company/trust (policyholder) 公司/信託 (保單持有人) 的名稱

Registered company number (if applicable) 註冊公司號碼 (如適用)

Country of incorporation (companies only) 註冊成立國家 (僅適用於公司)

Registered office address (companies only) 註冊辦事處地址 (僅適用於公司)

Name of trustee or company representative for correspondence 信託人或公司通訊代表名稱

Please state all countries where the company is currently deemed to be resident for tax purposes.
請註明所有目前視貴公司為稅收上居民的國家。

Country/Countries of tax residence 稅務居留國家

1

2

3

Tax reference number(s) 稅務參考編號

1

2

3

Is the company tax-exempt in the countries of tax residence listed above (e.g. charity or government organization)?
貴公司是否於上述列出的稅務居留國家獲豁免繳稅 (例如慈善機構或政府組織)?

☐ Yes 是

☐ No 否

If 'Yes', please provide evidence of the tax exemption status from the relevant authority.
如果「是」, 請提供從有關當局的豁免繳稅的證據。

2 Encashment/Surrender details 提款/退保資料

Reason for encashment/surrender 提款/退保原因

PERSONAL

Please tick option A, B, C or D (tick one only) 請以✓號選擇選項A、B、C或D (只可選擇其中一項)

Please note, following a partial encashment/surrender, any sums insured on your policy may be reduced as detailed in your policy terms and conditions. The total sum insured on a joint life policy will be reduced by the value of the partial encashment/surrender, the amount being deducted from each life's sum insured will be in proportion to the amount of the respective sum insured.
請注意, 在提取部分提款/退保後, 您的保單的任何人壽保障額可能根據您的保單條款與規章而減低。聯名人壽保險保單的人壽保障額將會減少, 減值相等於部分提款/退保的價值, 各人保障額的減幅將與各自的保障額成正比。

☒ Option A - Partial encashment/surrender 選項A - 部分提款/退保

Amount and currency 金額和貨幣

\$ 25,000 HKD

☐ Option B - Maximum partial encashment/surrender 選項B - 部分提款/退保金額的上限

☐ Option C - Regular partial encashment/surrender (only available for Pacific and Vista policies issued after 1 January 2005)
選項C - 定期部分提款/退保 (只適用於「翱翔人生」及2005年1月1日後簽發的「豐盛人生」保單)

Amount and currency 金額和貨幣

First withdrawal date
首次提款日期

Day日 Month月 Year年

D D M M Y Y Y Y

Frequency of withdrawal (tick one only) 提款頻率 (只可選擇其中一項)

☐ Monthly 每月

☐ Quarterly 每季*

☐ Half-yearly 每半年*

☐ Yearly 每年

* These frequencies are not available for Pacific.
有關頻率不適用於「翱翔人生」保單。

☐ Option D - Full encashment/surrender 選項D - 完全提款/退保

To fully encash/surrender your policy, we must terminate it by selling all its investment choice holdings and deduct any outstanding charges to obtain the final encashment/surrender value. Once we have received a full encashment/surrender instruction, you will not be able to reverse this decision, which will constitute a full and final settlement of your policy with no further liability to the Company.
為了能讓您的保單能完全提款/退保, 我們必須出售保單所持的全部投資選擇, 以終止您的保單, 並扣除任何尚未支付的費用, 以獲取最終提款/退保價值。當我們接獲完全提款/退保指示, 您將不可改變有關決定, 該決定將構成您的保單的足額及最終結算, 而本公司無須就保單承擔進一步責任。

3 Payment method 付款方法

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

本人現簽署此表格及填寫以下付款方法，並作以下聲明：

- a) I am aware of the potential tax obligations imposed by any jurisdiction, to which I may be subject, as applicable to me for any payment made or proposed to be made herein, in particular, in relation to tax obligations in Hong Kong and China;
本人明白本人可能受到適用於本人的任何司法管轄區，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；
- b) I confirm that I have complied with my tax obligations, and
本人確認遵守了本人的稅項義務；及
- c) I understand that I shall obtain independent tax advice in relation to the policy.
本人明白本人應就保單尋求獨立稅務建議。

Please tick one of the following options only.

只可選擇其中一項。

Please note that if you do not specify a payment currency, this will automatically default to the currency that your policy is denominated.
請注意，若您並無指定一種付款貨幣，則會自動設定為您的保單的計值貨幣。

- ☐ Telegraphic transfer (bank charges apply and borne by beneficiary account holder)
電匯（銀行將收取手續費，並由受益人賬戶持有人支付）
- ☒ Autopay (Hong Kong dollar in Hong Kong only)
自動轉賬（只限於在香港以港元付款）
- ☐ BACS (Sterling in UK only)
BACS（只限於在英國以英鎊付款）

Payment currency
付款貨幣

HKD

Residents of Mainland China must provide bank details of a Hong Kong bank account.
中國內地的居民必須提供香港銀行賬戶的詳情。

For payments by telegraphic transfer/autopay/BACS, your application will be delayed if you do not complete all of these details.
如選擇電匯/自動轉賬/BACS付款而未能提供全部資料，將會延誤我們處理您的申請。

Please note: To make the payment, we are obliged to disclose the beneficiary details to the relevant banks or bank service providers involved such as correspondent banks, SWIFT and BACS. Personal information may therefore be transferred to countries which may not necessarily provide an equivalent level of data protection. We wish to make this payment as quickly as possible. In order to avoid potential delay, please provide a bank account with an address that is in the same place of residence of the bank account owner, apart from resident in Mainland China.

請注意：進行付款手續時，本公司須向有關銀行或所涉及的銀行服務供應商（如關係銀行、SWIFT及BACS）披露受益人的資料。因此，個人資料或會被傳送至其他國家，而這些國家未必有同等程度的個人資料保障。為避免延誤及以便我們儘快付款，請提供與賬戶持有人位於同一居住地的銀行賬戶（中國內地居民除外）。

Bank name 銀行名稱

HSBC

Bank branch location (mandatory field):
銀行分行地點（必須填寫）：

☒ Hong Kong
香港

☐ Non-Hong Kong (please specify address:
非香港（請註明銀行地址：_____）

Bank number (Hong Kong only) 銀行編號（僅限香港）

004

Branch number (Hong Kong only) 分行編號（僅限香港）

634

Account holder's name(s) 賬戶持有人姓名/名稱

LAU MAN KIN

Account number 賬戶號碼

021992 833

Sort code (for UK banks only) Sort代碼（僅限英國銀行）

SWIFT code (if applicable) SWIFT代碼（如適用）

IBAN (if applicable 如適用)

ABA number (not required for UK banks) ABA號碼（英國銀行無須填寫此欄）

Building society roll number (if applicable) 住房共建委員會註冊號（如適用）

Reference to be quoted (if applicable) 所須引述的備考（如適用）

Additional information for further credit (if applicable) 最終收款人的其他資料（如適用）

4 Proof of identity and proof of residential address 身份證明及住址證明

Proof of identity for individual policyholders 個人保單持有人的身份證明

Policyholders must provide one of the following valid primary documents that has been suitably certified (please tick to confirm which document is attached):

保單持有人須提供以下其中一項有效及獲有效核證的主要文件（請以✓號確認已夾附的文件類別）：

	Policyholder 1 第一保單持有人	Policyholder 2 第二保單持有人
• Passport 護照	<input type="checkbox"/>	<input type="checkbox"/>
• Government issued ID card 政府發出的身份證明文件	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Proof of residential address for individual policyholders 個人保單持有人的住址證明

In order to verify the policyholder's current residential address, please attach either an original or suitably certified copy of one of the following documents (the document seen must be **less than three months old** upon receipt by us). The document must be issued in the name of the policyholder and show the address appearing on the application or held in our records as the current residence (please tick to confirm which document is attached).

為核實保單持有人的現時住址，請隨附以下其中一項文件的正本或獲有效核證的副本（任何此等文件必須在本公司接獲文件之前三個月內發出）。有關文件須以保單持有人的姓名發出，所示地址亦須與申請表上或本公司所持的現時住址紀錄相同（請以✓號確認已夾附的文件類別）。

	Policyholder 1 第一保單持有人	Policyholder 2 第二保單持有人
• Utility bill 公用服務賬單	<input type="checkbox"/>	<input type="checkbox"/>
• Bank statement/Bank credit card statement 銀行月結單／銀行信用卡月結單	<input type="checkbox"/>	<input type="checkbox"/>
• Letter from bank/employer 銀行／僱主發出的信件	<input type="checkbox"/>	<input type="checkbox"/>

If you have a P.O. Box address, we will need either (please tick to confirm which document is attached):
若您的地址為一個郵政信箱，我們將需要（請以✓號確認已夾附的文件類別）：

☐ Proof of payment for the Box address (this must reference your physical residential address)
為郵政信箱付款的證明（必須提述您的住址）
OR 或

☐ A utility bill referencing your physical residential address
提述您的住址的公用服務賬單

Your relevant financial professional should refer to the 'A customer guide for anti-money laundering requirements', if you require further guidance. This guide is available on request from your relevant financial professional or our Customer Care Team.
若您需進一步指引，您的相關理財顧問應參考「A customer guide for anti-money laundering requirements」。您可向您的相關理財顧問或我們的客戶服務部索取此指引。

Proof of identity and proof of residential address (continued) 身份證明及住址證明 (續)

Information to be included on certified client documentation 經核證客戶文件的所需資料

The suitable certifier (see definitions below) should write the following relevant phrase including all information below on all certified documents: 有效核證人 (見以下定義) 應在所有認證文件上包含以下相關句子及提供以下所有資料:

For photographic documents 附有照片之文件

'I certify that this document is a true copy of the original and that the photograph is a true likeness of the holder.'
「本人謹此聲明，本文件為正本的真實副本，而文件上之相片與正本相似。」

For non photographic documents 並無照片之文件

'I certify this document is a true copy of the original.' 「本人謹此聲明，本文件為正本的真實副本。」

- Signature of certifier
核證人簽署
- Full name of certifier (in **CAPITAL** letters underneath the certifier's signature)
核證人全名 (在核證人簽署下方以英文大楷填寫)
- Position/Job title
職位/職銜
- Company name, address, telephone number and email address
公司名稱、地址、電話號碼及電郵地址
- Date
日期
- FSA/HKCIB/MAS/PIBA/QFCRA registration number (if applicable)
英國金融服務管理局/香港保險顧問聯會/新加坡金融管理局/香港專業保險經紀協會/卡達金融中心管理局註冊編號 (如適用)
- Zurich appointed suitable certifier number (where applicable)
蘇黎世委任的有效核證人編號 (如適用)
- Details of the certifier's regulatory/affiliate body and their reference number
核證人的監管機構/聯營機構的詳細資料及其參考編號

Document certification – all copy documents must be certified as true copies of the originals by a suitable certifier and must be certified with the wording above or we may require a new document completed in line with this guidance. Suitable certifiers will fall into one of the following categories:
文件認證 – 所有文件副本須由有效核證人確認為真確副本，而且必須包含上述句子，否則本公司可要求您重新遞交符合有關指引的文件。有效核證人須屬以下其中一個類別：

- A regulated introducer or authorized employee of a regulated introducer. Confirmation of the introducer's regulatory reference number or documentary evidence of their regulatory status must be provided;
受監管介紹人，或受監管介紹人的獲授權僱員。您須提交有關介紹人的受監管參考編號的確認文件或其受監管地位的文件證明；
- An individual introducer who has been accepted as a suitable certifier by the Company (including introducers registered by the FSA, HKCIB, MAS, QFCRA and PIBA);
獲本公司接受為有效核證人的獨立中介人 (包括於英國金融服務管理局、香港保險顧問聯會、新加坡金融管理局、卡達金融中心管理局註冊的中介人及香港專業保險經紀協會)；
- A notary public, lawyer, advocate or an embassy official (from the embassy of the country who issued the ID document);
國家公證人、律師、代表律師或大使館官員 (發出身分證明文件的國家之所屬大使館)；
- French maire (mayor);
市長；
- Commissioner of oaths within a 'recognized jurisdiction' (verification of their professional status must be obtained);
「認可司法管轄區」內的監誓員 (須提交核實其專業地位的文件)；
- A formally appointed member of the judiciary (excluding Justice of the Peace);
獲正式委任的司法機構成員 (不包括太平紳士)；
- An accountant who is a member of an institute or professional organization, whose members are required to abide by anti-money laundering regulations, or who is regulated by a regulatory organization;
專屬協會或專業組織成員的會計師，有關組織成員須遵守反洗黑錢規例，或受規管機構規管的會計師；
- A director/manager of an authorized credit or financial institute in a 'recognized jurisdiction'.
在「認可司法管轄區」獲授權的信貸或金融機構的董事/經理。

5 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；
 - 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；
 - 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；
 - 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理處、香港保險業聯會、核數師、政府組織和政府相關機構；
 - to perform customer analysis, profiling and segmentation;
進行客戶研究分析及分層；
 - to collect debts;
債務追討；
 - 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
 - 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。
- 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：
 - 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；
 - 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；
 - 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；
 - 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，而在客戶欠賬時，任何債務追收代理或進行索償或調查服務的公司；
 - 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；
 - 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
 - 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。

Declaration (continued) 聲明 (續)

Declaration for data protection 個人資料保障聲明

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、身份證明文件編號、保單編號、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／我們在此處加上／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。

Declaration (continued) 聲明 (續)

Declaration for data protection 個人資料保障聲明

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 and used as set out above.

本人/我們謹此同意 貴公司可收集本人/我們的個人資料及作上述用途。

I/We confirm that this/these signature(s) is/are mine/ours as policyholder(s) or that/those of my/our appointed legal representative(s).

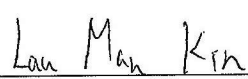
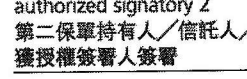
本人/我們確認，有關簽名為本人/我們（身為保單持有人）的簽名，或本人/我們委任的法律代表的簽名。

All policyholders, trustees or authorized signatories must sign this form.

所有保單持有人、信託人或獲授權簽署人須於本表格上簽署。

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」。

Signature of policyholder/trustee/ authorized signatory 1 第一保單持有人/信託人/ 獲授權簽署人簽署 	Signature of policyholder/trustee/ authorized signatory 2 第二保單持有人/信託人/ 獲授權簽署人簽署 
Print name 姓名 LAU MAN KIN	Print name 姓名 LAU MAN KIN
Date signed 簽署日期 Day日 Month月 Year年 08/08/2028	Date signed 簽署日期 Day日 Month月 Year年 08/08/2028

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

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
電話：+852 3405 7150 傳真：+852 3405 7268

www.zurich.com.hk

