

# Method of payment form 付款表格

## Completing this form 填寫本表格

Use blue or black ink and write clearly in **CAPITAL** letters. Please complete the form in English. If your application is incomplete or does not include all the information we ask for, it will result in delay.

請用藍色或黑色原子筆，用英文大楷清晰填寫資料。如閣下的申請表格有錯漏或欠缺所需資料，將會延遲我們處理閣下的申請。

Please ensure that you sign in the "Direct debit payment instruction" or "Credit card payment instruction" section **AND** at the end of this form to confirm the change of payment method.

請確保閣下於「銀行直接付款指示」或「信用卡付款指示」部分及本表格最後部分簽署，以確認更改付款方法。

## 1 Direct debit payment instruction (Hong Kong Dollar only) 銀行直接付款指示 (只限港元)

Any additional charge made by your bank for collection of your premiums will be met by the payor.

因選用銀行直接付款而由銀行徵收的附加費用須由付款者支付。

### Authorization 授權

I/We hereby authorize my/our bank to effect transfers from my/our account to that of Zurich International Life Limited ("Zurich", "Company") in accordance with such instructions as my/our bank may receive from the beneficiary from time to time.

本人/我們現授權本人/我們之下述銀行(根據收款人不時給予本人/我們銀行之指示)自本人/我們之賬戶內轉賬予蘇黎世國際人壽保險有限公司(「蘇黎世」、「本公司」)。

I/We agree that my/our bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us.

本人/我們同意本人/我們之銀行無須證實該等轉賬通知是否已交予本人/我們。

I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfer(s).

如因該等轉賬而令本人/我們之賬戶出現透支(或令現時之透支增加)，本人/我們願共同及個別承擔全部責任。

I/We confirm that my/our signature(s) on this application form is/are the same as that/those for the operation of my/our savings/current account to be debited for the transfer.

本人/我們確定此申請表上之簽署，與本人/我們用作付款之儲蓄/來往賬戶一致。

I/We agree to notify the named beneficiary of any change of bank account or cancellation of payment method and further agree that should there be insufficient funds in my/our bank account to meet any transfer hereby authorized, the bank shall be entitled, at its discretion, not to effect such transfer in which event the bank may make the usual service charge to be paid by me/us.

本人/我們同意通知上述收款人有關銀行戶口更改，或取消付款方法，並同意若本人/我們之銀行賬戶內無足夠款項支付該等授權轉賬，本人/我們之銀行有權不予轉賬，銀行並可收取慣常之手續費。

This authorization shall have effect until further notice.

本授權書將一直生效直至另行通知為止。

I/We agree that any notice of cancellation or variation of this authorization which I/we may give to my/our bank shall be given at least two working days prior to the date on which such cancellation/variation is to take effect and at the same time such notice shall be given to the beneficiary.

本人/我們同意，本人/我們若取消或更改本授權書之內容，須於生效日最少兩個工作天之前通知本人/我們之銀行，同時亦會通知收款人有關的取消/更改指示。

I/We understand that the Company do not offer premium refunds after the cooling off period.

本人/我們明白 貴公司於「冷靜期」後不設退款。

## Direct debit payment instruction (continued) 銀行直接付款指示 (續)

### Policy information 保單資料

Policy no. (if known)  
保單號碼 (如已知悉)

Please complete the personal details section and the section appropriate to your intended method of payment and return the form to your relevant licensed insurance intermediary.

請填寫閣下的個人資料及所選擇的付款方法，並交予閣下的持牌保險中介人。

Please note that this form is specifically for Hong Kong and can be used for Hong Kong clearing banks only.

請注意，此表格只適用於香港及只適用於香港結算系統內的銀行。

The completed form should not be submitted directly to your bank.

請勿將填妥的表格直接交回相關銀行。

### Bank details 銀行資料

(1) Bank name 銀行名稱

(2) Bank no. 銀行編號

--	--	--

(3) Branch no. 分行編號

--	--	--

(4) Account no. 賬戶號碼

--	--	--	--	--	--	--	--	--	--

(5) Branch name 分行名稱

(6) Branch address 分行地址

(7) Your address as shown on statement or passbook 在月結單/存摺上的地址

Please provide details of **both** bank account holders if it is a joint bank account.

若銀行戶口為聯名戶口，請提供兩位賬戶持有人的資料。

#### Account holder 1 第一賬戶持有人

(8) Your name as shown on statement or passbook  
在月結單/存摺上的姓名

--

(9) Identification held at bank 銀行紀錄的身分證明文件

HKID 香港身份證  
Document no. 文件號碼 \_\_\_\_\_

Passport 護照  
Document no. 文件號碼 \_\_\_\_\_

China travel permit 中國旅遊通行證  
Document no. 文件號碼 \_\_\_\_\_

Other (e.g. business registration certificate, certificate of incorporation, non-HKID)  
其他(例如：商業登記證、公司註冊證書、非香港身份證)

Please specify 請詳述

Type 類別 \_\_\_\_\_

Document no. 文件號碼 \_\_\_\_\_

Signature 簽署

Must be the same as bank's record of signature on account.  
須與銀行紀錄的賬戶簽署相同。

Signature of account holder 1  
第一賬戶持有人簽署

Date 日期  
Day 日 Month 月 Year 年  

--	--	--	--	--	--	--	--

#### Account holder 2 第二賬戶持有人

(8) Your name as shown on statement or passbook  
在月結單/存摺上的姓名

--

(9) Identification held at bank 銀行紀錄的身分證明文件

HKID 香港身份證  
Document no. 文件號碼 \_\_\_\_\_

Passport 護照  
Document no. 文件號碼 \_\_\_\_\_

China travel permit 中國旅遊通行證  
Document no. 文件號碼 \_\_\_\_\_

Other (e.g. business registration certificate, certificate of incorporation, non-HKID)  
其他(例如：商業登記證、公司註冊證書、非香港身份證)

Please specify 請詳述

Type 類別 \_\_\_\_\_

Document no. 文件號碼 \_\_\_\_\_

Signature 簽署

Must be the same as bank's record of signature on account.  
須與銀行紀錄的賬戶簽署相同。

Signature of account holder 2  
第二賬戶持有人簽署

Date 日期  
Day 日 Month 月 Year 年  

--	--	--	--	--	--	--	--

## 2 Credit card payment instruction 信用卡付款指示

Any additional charge made by your credit card company for collection of your premiums will be met by the payor.  
因選用信用卡付款而由信用卡公司徵收的附加費用需由付款者支付。

Credit cards can only be used for regular payments. If you wish to make a lump sum payment, please use a different payment method.  
信用卡付款只適用於定期供款。如果閣下選擇以一次整付的形式供款，請選擇其他付款方式。

We can accept Visa, Mastercard and UnionPay card for International Term Assurance and Preferred Choice policies.  
有關「國際定期壽險」及「智選人生」保單，我們接受 Visa、萬事達卡及銀聯卡。

We can only accept non-China issued Visa or Mastercard for investment-linked assurance scheme ('ILAS') policies.  
有關「投資相連保險計劃」保單，我們只接受非中國發行之 Visa 或萬事達卡。

### Authorization 授權

I authorize the Company, until further notice in writing, to debit my credit card account, as detailed below, with unspecified amounts in respect of the premiums for my Zurich policy as and when they fall due and in respect of any charges for the collection of the premiums by credit card that are passed onto me by the Company. Any changes to the consent agreement will be communicated by the Company in advance.

本人現授權貴公司從本人下述之信用卡戶口扣除上列計劃之到期應付保費及由貴公司收取以信用卡繳款的費用，並且不設上限，直至另行通知。如果有任何協議更改，貴公司將提前通知。

I understand that this authority in favour of the Company will remain in force until such time as I cancel it in writing.

本人明白以上給予貴公司之授權書將一直維持生效，直至本人以書面另行通知。

Details of current rates of charges are available on request. I understand that the Company is not liable for any losses arising as a result of action taken by the cardholder's credit card company.

貴公司可應要求提供有關收費詳情。若因信用卡公司採取之行動而令本人蒙受損失，貴公司概不負責。

### Policy information 保單資料

Policy no. (if known)  
保單號碼 (如已知悉)

### Details 詳細資料

#### (1) Credit card type 信用卡類別

Visa

Mastercard 萬事達卡

UnionPay card (Only applicable to International Term Assurance and Preferred Choice policies, please present your card at our Customer Care Center for premium collection.)  
銀聯卡 (只適用於「國際定期壽險」及「智選人生」保單，請閣下於客戶服務中心出示此卡以繳付保費。)

#### (2) We do not accept prepaid or exchange credit cards.

本公司不接受預付卡。

Name of card issuer – i.e. the name of a bank  
發卡公司名稱 (即銀行名稱)

#### (3) Location of the credit card issuer 信用卡發卡地點：

Hong Kong 香港

Others (please specify and note that credit card issued in China is not accepted for ILAS policies)  
其他 (請說明及注意有關「投資相連保險計劃」保單，並不接受中國發行之信用卡)

#### (4) Credit card no. 信用卡號碼

Month 月 Year 年

#### (5) Credit card expiry date 信用卡到期日

(6) Currency of card 信用卡貨幣

#### (7) Name on credit card 信用卡上所示的姓名

#### (8) Cardholder's address – as held by credit card company 信用卡持有人地址 (須與信用卡公司存載的資料相同)

Signature of cardholder  
信用卡持有人簽署

Date  
日期

Day 日 Month 月 Year 年

### 3 Details of standing order instruction 常行指令指示詳情

Standing order instruction is not applicable for Preferred Choice regular premiums.  
常行指令指示不適用於繳交「智選人生」定期保費。

Any additional charge made by your bank for collection of your premiums will be met by the payor.  
因選用常行指令而由銀行徵收的附加費用須由付款者支付。

Payment from PRC residents can only be accepted from a bank account in Hong Kong.  
中國居民必須透過香港的銀行賬戶付款。

We can only accept instructions from accounts held with HSBC or Hang Seng Bank.  
本公司只接受匯豐銀行及恆生銀行的賬戶。

Please state the policy no. and the full name of the policyholder(s) as the reference to set up the standing order instruction.

\* Policy no. will only be issued after application submission. You can contact your relevant licensed insurance intermediary to get the policy no. before setting up the standing order instruction.

於設立常行指示時，請列明保單號碼及保單持有人的全名以作參考之用。

\* 保單號碼會於投保申請後發出。閣下可於設立常行指令指示前聯絡閣下的持牌保險中介人以獲取保單號碼。

Credit 轉賬予： Zurich International Life Limited

Currency 貨幣： Hong Kong dollar 港幣  
For other currencies, please check with our Customer Care Team in the Hong Kong office.  
如屬其他貨幣，請向香港辦事處客戶服務部查詢。

To 致： HSBC Limited, 1 Queen's Road Central, GPO Box 64, Hong Kong SAR  
香港特別行政區中環郵政總局信箱64號皇后大道中1號匯豐銀行

In favour of 受益人： Zurich International Life Limited

Bank no. 銀行編號： 004

Branch no. 分行編號： 502

Account no. 賬戶編號： 120934-001

**Note:** You have to set up your standing order instruction by yourselves. Once the instruction is set up, please send a certified true copy of the instruction slip to "Policy Data Management Team" at 25-26/F, One Island East, 18 Westlands Road, Island East, Hong Kong.

註：閣下需自行設立常行指令指示。當指示成功設立後，請將該指示收據之認證真實副本傳送至香港港島東華蘭路18號港島東中心25-26樓 Policy Data Management Team。

## 4 Details of telegraphic transfer payment instruction 電匯付款指示詳情

Telegraphic transfer payment instruction is not applicable for Preferred Choice regular premiums and Pacific monthly regular premiums.  
電匯付款指示不適用於繳交「智選人生」定期保費及「翱翔人生」每月定期保費。

Any additional charge made by your bank for collection of your premiums will be met by the payor.  
因選用電匯付款而由銀行收取的附加費用須由付款者支付。

Payment from PRC residents can only be accepted from a bank account in Hong Kong.  
中國居民必須透過香港的銀行賬戶付款。

Please state the policy no. and the full name of the policyholder(s) as the reference to set up the telegraphic transfer payment instruction.

\* Policy no. will only be issued after application submission. You can contact your relevant licensed insurance intermediary to get the policy no. before setting up the telegraphic transfer payment instruction.

於設立電匯付款指引時，請列明保單號碼及保單持有人的全名以作參考之用。

\* 保單號碼會於投保申請後發出。閣下可於設立電匯付款指引前聯絡閣下的持牌保險中介人以獲取保單號碼。

### Credit 轉賬予 : Zurich International Life Limited

#### For Hong Kong local accounts 本地轉賬戶口

##### HK dollar (for payments initiated from Hong Kong) 港元 (在香港進行支付)

To: HSBC Bank, 1 Queens Road Central, Hong Kong In favour of: Zurich International Life Limited Account no.: 502-120934-001  
SWIFT HSBC HSBCHKHCHK

#### For overseas accounts 外地轉賬戶口

##### Sterling 英鎊

To: HSBC Bank plc, HSBC House, Ridgeway Street, Douglas, Isle of Man In favour of: Zurich International Life Limited Account no.: 81058312  
IM99 1AU, British Isles. SWIFT code: MIDLGB22 Sort code: 40-19-38 IBAN: GB53MIDL40193881058312

##### US dollar 美元

To: HSBC Bank plc, International Division, P.O. Box 181, 27-32 Poultry, In favour of: Zurich International Life Limited Account no.: 68770522  
London. SWIFT/BIC code: MIDLGB22 Sort code: 40-05-15 IBAN: GB72MIDL40051568770522

##### Australian dollar 澳元

To: HSBC Bank plc, International Division, P.O. Box 181, 27-32 Poultry, In favour of: Zurich International Life Limited Account no.: 36089396  
London. SWIFT/BIC code: MIDLGB22 Sort code: 40-05-15 IBAN: GB98MIDL40051536089396

##### Japanese yen 日圓

To: HSBC Bank plc, International Division, P.O. Box 181, 27-32 Poultry, In favour of: Zurich International Life Limited Account no.: 68769608  
London. SWIFT/BIC code: MIDLGB22 Sort code: 40-05-15 IBAN: GB15MIDL40051568769608

##### Euro 歐元

To: HSBC Bank plc, International Division, P.O. Box 181, 27-32 Poultry, In favour of: Zurich International Life Limited Account no.: 39143348  
London. SWIFT/BIC code: MIDLGB22 Sort code: 40-05-15 IBAN: GB87MIDL40051539143348

##### Swiss franc 瑞士法郎

To: HSBC Bank plc, International Division, P.O. Box 181, 27-32 Poultry, In favour of: Zurich International Life Limited Account no.: 36354240  
London. SWIFT/BIC code: MIDLGB22 Sort code: 40-05-15 IBAN: GB53MIDL40051536354240

##### HK dollar 港元

To: HSBC Bank plc, International Division, P.O. Box 181, 27-32 Poultry, In favour of: Zurich International Life Limited Account no.: 35307087  
London SWIFT/ BIC code: MIDLGB22 Sort code: 40-05-15 IBAN: GB12MIDL40051535307087

**Note:** You have to set up your telegraphic transfer payment instruction by yourselves. Once the instruction is set up, please send a certified true copy of the instruction slip to "Policy Data Management Team" at 25-26/F, One Island East, 18 Westlands Road, Island East, Hong Kong.

註：閣下需自行設立電匯付款指引。當指引成功設立後，請將該指示收據之認證真實副本傳送至香港港島東華蘭路18號港島東中心25-26樓 Policy Data Management Team。

## 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 no. if applicable, email address, telephone no., 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、身分證明文件資料、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 no., policy no., telephone no. 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與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、身分證明文件編號、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](http://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](http://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 discrepancies 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  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。

### 6 Authorized signatory 授權簽署人資料

Signature of policyholder/  
authorized signatory 1

第一保單持有人／  
授權簽署人簽署

Signature of policyholder/  
authorized signatory 2

第二保單持有人／  
授權簽署人簽署

Day 日 Month 月 Year 年  
Date 日期

Day 日 Month 月 Year 年  
Date 日期

Zurich International Life is a business name of Zurich International Life Limited (a company incorporated in the Isle of Man with limited liability) 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 no. 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

[www.zurich.com.hk](http://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（於人島註冊成立之有限公司）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

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