

Encashment/Surrender form for single premium

整付供款提款／退保表格

Policy no.
保單號碼

Important notes 重要事項

1. Form submission 提交表格

Please complete and return the form to us by:
請將填妥的表格透過以下方式交回：

- sending it to your licensed insurance intermediary,
送交閣下的持牌保險中介人；
- emailing to helppoint.hk@hk.zurich.com with your registered email address; or
以閣下的登記電郵寄往helppoint.hk@hk.zurich.com；或
- mailing it to 25-26/F, One Island East, 18 Westlands Road, Island East, Hong Kong
郵寄至香港港島東華蘭路18號港島東中心25-26樓
Telephone 電話：+852 3405 7150

2. Contact details 聯絡資料

We adhere to strict confidentiality procedures when we communicate with our customers. For security purposes, the details you provided will be considered as 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，閣下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，請通知我們。

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 also 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，信託人亦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 declare 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. Place of residence 居住地

Please note that where any of the policyholders/trustees are UK residents for tax purposes, they are required to advise the HM Revenue & Customs of any chargeable gains made on their policies. In certain circumstances Zurich International Life Limited ("Company", "Zurich", "we/us") will also be required to provide information to the HM Revenue & Customs regarding payments and/or gains made on offshore policies by policyholders who, to the best of our knowledge, are UK residents. Note: If we do not have this information, we will not be able to complete your encashment/surrender. If you require any assistance completing this form, please contact your licensed insurance intermediary or our Customer Care Hotline on +852 3405 7150.

請注意，若任何保單持有人／信託人就稅務來說是英國居民，則須就其保單所賺取的任何應課稅收益通知英國稅務和海關總署（HM Revenue & Customs）。在若干情況下，蘇黎世國際人壽保險有限公司（「本公司」、「蘇黎世」、「我們」）亦須就我們所知屬英國居民的保單持有人因離岸保單的付款及／或收益，向英國稅務和海關總署提供資料。註：若我們並未獲提供有關資料，我們將無法為閣下完成提款／退保。若閣下在填寫本表格時需要任何協助，請聯絡閣下的持牌保險中介人，或致我們的客戶服務熱線 +852 3405 7150。

5. Non-admittance of liability 免責聲明

The issue of this form does not imply admittance of any liability to pay the claim by the Company.

簽發本表格並不代表本公司承擔支付索償的任何責任。

6. Encashment/Surrender options 提款/退保選項

The investment choices and the amount and currency required should be specified in the options and payment method sections.
投資選擇及所需金額和貨幣須列載於選項及付款方法部分。

Important note for UK residents: The encashment/surrender options you choose may have a significant impact on your liability to income tax. Please refer to "UK tax consequences of taking capital from an offshore non-qualifying single premium life plan" for guidance. However, if you are in any doubt which option to choose, we strongly recommend that you seek advice from your licensed insurance intermediary.

英國居民的重要須知：閣下所挑選的提款/退保選項可能對閣下的入息稅責任造成重大影響。有關指引請參閱「從一項離岸不合格整付保費人壽保險計劃提取資金的英國稅務後果」。然而，若閣下對挑選哪個選項有任何疑問，我們強烈建議閣下向閣下的持牌保險中介人尋求意見。

Option A – total encashment/surrender

選項A – 全部提款/退保

There are alternatives to encash/surrender your policy and before deciding on the option you wish to take, we recommend that you take advice from your licensed insurance intermediary. To terminate your policy we must sell all its investment choice holdings and deduct outstanding charges (as applicable) to obtain the final cash in value.

閣下可以不同方式提款/退保閣下的保單。在決定閣下有意挑選的選項前，我們建議閣下尋求閣下的持牌保險中介人的意見。若要終止閣下的保單，我們必須出售保單所持的全部投資選擇，並扣除尚未支付的費用（如適用），以獲取最終套現價值。

Once we have received a total 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.

一旦我們接獲全部提款/退保指示，閣下將不可改變有關決定，該決定將構成閣下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。

Option B – partial encashment/surrender across all individual policies/investment choices

選項B – 從所有個別保單/投資選擇部分提款/退保

This means that you take an equal amount across all policies within the policy to raise the amount required. The value of your partial encashment/surrender will be deducted from all investment choices held.

這意味著閣下從保單內的所有保單提取等額，以籌集所需金額。閣下的部分提款/退保價值將從所持的全部投資選擇扣除。

Option C – partial surrender across all individual policies from specific investment choices (For International Wealth Account plan and IWA only)

選項C – 從個別投資選擇的所有個別保單選擇部分退保（只適用於「國際創富」計劃及「景緻人生」）

This means you can specify which investment choice(s) you would like to deplete. If the value of the requested investment choice(s) is/are insufficient to allow the withdrawal to take place, we will need to obtain alternative instructions from you. This will lead to delays in providing you with the cash in amount. This means you can specify which investment choice(s) you would like to deplete. If the value of the requested investment choice(s) is/are insufficient to allow the withdrawal to take place, we will need to obtain alternative instructions from you. This will lead to delays in providing you with the cash in amount.

這意味著閣下可訂明希望減持的投資選擇。若所要求的投資選擇的價值不足以讓閣下提取款項，我們須向閣下取得其他指示，而套現金額將延遲提供。

Option D – maximum partial encashment/surrender across all individual policies and investment choices

選項D – 從所有個別保單及投資選擇部分提款/退保金額的上限

A maximum partial encashment/surrender is the most you can take from your policy without fully encashing/surrendering it. 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。

7. Encashment/Surrender charge 提款/退保費用

For Elite International Bond, if you make a partial encashment and the remaining policy value falls below 15% of the original contribution, then we will fully encash the policy, deduct any outstanding early encashment charge or other charges and pay you the balance.

若閣下選擇從「卓越精英」國際投資計劃部分提款，而餘下的保單結餘跌至低於最初供款額的15%，我們將閣下的保單執行全部提款，並在扣除任何尚未支付的期滿前提款費用或其他費用後向閣下支付餘額。

For International Wealth Account, if you make a partial surrender and the remaining policy value is less than HKD 125,000 (or currency equivalent) or twice the outstanding surrender charge (whichever is the greater), then we will fully surrender the policy, deduct any outstanding surrender charge or other charges and pay you the balance. If you fully surrender one or more individual policies during the first five years, or within five years of making an additional contribution, a surrender charge will apply which will be deducted from the value of the surrender individual policies before payment is made to you. This surrender charge will apply pro-rata according to the number of individual policies surrendered. For additional contributions, the surrender charge will only apply to those contributions made within the last five years.

若閣下選擇從「國際創富」計劃部分退保，而餘下的保單價值低於125,000港元（或其他貨幣等額）或尚未支付的退保費用的兩倍（以較高者為準），我們將閣下的保單執行全部退保，並在扣除任何尚未支付的退保費用或其他費用後向閣下支付餘額。若閣下在首五年內或作出額外供款的五年內全部退保一項或或多項個別保單，將須支付退保費用，在向閣下付款前，該費用將從已退保的個別保單的價值中扣除。這項退保費用將根據已退保的個別保單數目按比例計算。就額外供款來說，退保費用將僅適用於在過去五年內作出的供款。

8. The effect of exchange rates and unit prices on claim value 匯率和單位價格對索償價值的影響

The value of your claim will depend on the unit prices applicable on the date of payment. As exchange rates and unit prices change daily, there may be a difference between your payment and any amount quoted at any earlier date.

閣下的索償價值將取決於付款日適用的單位價格。由於匯率及單位價格每天轉變，閣下所收取的付款金額與任何較早日期所報的金額可能不同。

9. 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. If you are not satisfied with our handling of your claim, please refer to our complaints procedure.

若閣下對我們處理索償的過程有任何不滿，可參考我們的投訴程序。

11. Please complete this form in English and ✓ the appropriate box.

請以英文填妥本表格及✓適用之方格。

Section A 部 : Policyholders details 保單持有人資料

Policyholder 1 第一保單持有人

Title 稱銜

Mr. 先生 Mrs. 太太 Miss 小姐 Ms. 女士
 Dr. 博士 Other (please specify)
其他 (請註明)

Family name 姓

Given name 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)

Nationality 國籍

Do you hold nationality in another country?

閣下有否持有多於一個國家的國籍?

Yes 有 No 沒有

If "Yes", please specify the country.

如答案為「有」, 請註明國家名稱。

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 from residential address)

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.

請說明為何閣下的通訊地址有別於閣下的住址。視乎所提供的說明, 我們或會詢問更多資料。

Policyholder 2 (where applicable) 第二保單持有人 (如適用)

Title 稱銜

Mr. 先生 Mrs. 太太 Miss 小姐 Ms. 女士
 Dr. 博士 Other (please specify)
其他 (請註明)

Family name 姓

Given name 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)

Nationality 國籍

Do you hold nationality in another country?

閣下有否持有多於一個國家的國籍?

Yes 有 No 沒有

If "Yes", please specify the country.

如答案為「有」, 請註明國家名稱。

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 from residential address)

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.

請說明為何閣下的通訊地址有別於閣下的住址。視乎所提供的說明, 我們或會詢問更多資料。

Policyholders details (continued) 保單持有人資料 (續)

Policyholder 1 (continued) 第一保單持有人 (續)
Home telephone no. (include international country code, e.g. +852) 住宅電話號碼 (包括國家區號·例如+852)
Region of home telephone no. 住宅電話號碼的地區
Mobile no.# (include international country code, e.g. +852) 手提電話號碼# (包括國家區號·例如+852)
Region of mobile no. 手提電話號碼的地區
Email address 電郵地址#
Is this a US* based telephone no.? 這個是美國*電話號碼嗎? <input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Are you a US* tax-payer? 閣下是美國*納稅人嗎? <input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Are you a US* citizen? 閣下是美國*公民嗎? <input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Please state all countries where you are currently deemed to be resident for tax purposes. 請註明所有目前視 閣下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 no.(s) ^ 稅務參考編號 ^
1 _____
2 _____
3 _____

Policyholder 2 (where applicable) (continued) 第二保單持有人 (如適用) (續)
Home telephone no. (include international country code, e.g. +852) 住宅電話號碼 (包括國家區號·例如+852)
Region of home telephone no. 住宅電話號碼的地區
Mobile no.# (include international country code, e.g. +852) 手提電話號碼# (包括國家區號·例如+852)
Region of mobile no. 手提電話號碼的地區
Email address 電郵地址#
Is this a US* based telephone no.? 這個是美國*電話號碼嗎? <input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Are you a US* tax-payer? 閣下是美國*納稅人嗎? <input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Are you a US* citizen? 閣下是美國*公民嗎? <input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Please state all countries where you are currently deemed to be resident for tax purposes. 請註明所有目前視 閣下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 no.(s) ^ 稅務參考編號 ^
1 _____
2 _____
3 _____

For future communication with you on your policy, please do not leave mobile no. and email address blank. Please put N/A if such information is not available.

請填寫手提電話號碼及電郵地址，以便日後就有關保單事宜聯絡 閣下。若未能提供此項資料，請填寫「N/A」。

* 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 no..

如果 閣下目前為英國的稅收居民，請提供 閣下的國家社會保險號。

Policyholders details (continued) 保單持有人資料 (續)

Corporate/Trust policyholders 企業/信託保單持有人

For completion by those policyholders signing on behalf of a company or a trust 由代表公司或信託簽署的保單持有人填寫

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

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 no.(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。

Section B 部 : Encashment/Surrender details 提款/退保資料

Reason for encashment/surrender 提款/退保原因

All encashment/surrender amounts are deducted in the policy currency.
所有提款/退保金額將以保單貨幣扣除。

You can arrange for the encashment/surrender amount to be paid to you in the currency of your choice by completing the appropriate part of section C – Payment method – on pages 6 and 7.

閣下可透過填寫第6及7頁的C部分 — 付款方法中的適當部分, 安排以 閣下選擇的貨幣向 閣下支付提款/退保金額。

Please select one of the following options only.
請只選擇以下其中一項。

Option A – Total encashment/surrender – this will terminate your entire policy
選項A – 全部提款/退保 – 此將終止 閣下的整個保單

Please note that encashment/surrender charge may apply.
請注意, 期滿前提款/退保費用可能適用。

OR 或

Option B – Partial encashment/surrender across all individual policies and investment choices
選項B – 從所有個別保單及投資選擇部分提款/退保

Amount (in policy currency)
金額 (以保單貨幣計)

OR 或

Option C – Partial surrender across all individual policies from specific investment choices (For International Wealth Account plan and IWA only)
選項C – 從個別投資選擇的所有個別保單選擇部分退保 (只適用於「國際創富」計劃及「景緻人生」)

Amount (in policy currency)
金額 (以保單貨幣計)

Please specify the details on page 6.
詳情請列於第6頁。

OR 或

Option D – Maximum partial encashment/surrender across all individual policies and investment choices
選項D – 從所有個別保單及投資選擇部分提款/退保金額的上限

Encashment/Surrender details (continued) 提款/退保資料 (續)

For International Wealth Account plan and IWA only 只適用於「國際創富」計劃及「景緻人生」

If you would like to sell from particular investment choices, investment choice codes and investment choice names are required to be written in full. Any unclear instructions will not be performed.

若閣下有意從個別投資選擇沽售單位，將須填寫投資選擇代號和投資選擇全稱。任何不清楚的指示將不獲執行。

If you do not specify a percentage allocation, we will make up the amount by cashing in the same percentage value from each of the daily priced investment choices in your policy.

若閣下並無訂明百分比的分配，我們將從閣下的保單中每項每天報價的投資選擇套現相同百分比的價值。

Investment choice code 投資選擇代碼	Investment choice name (including name of fund management company) 投資選擇名稱 (包括基金管理公司名稱)	% of withdrawal amount of each investment choice 提款額佔每項投資選擇的百分比

Section C 部 : 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：

- 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 Mainland 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內地的稅項義務；
- 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
- 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 select one of the following options only.

請只選擇以下其中一項。

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，若閣下並無指定一種付款貨幣，則會自動設定為閣下的保單的計值貨幣。

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

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，將會延誤我們處理閣下的申請。

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，我們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）。

Payment method (continued) 付款方法 (續)

Bank name 銀行名稱

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 no. (Hong Kong only) 銀行編號 (僅限香港)

Branch no. (Hong Kong only) 分行編號 (僅限香港)

Account holder's name(s) 賬戶持有人姓名/名稱

Account no. 賬戶號碼

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 no. (not required for UK banks) ABA號碼 (英國銀行無須填寫此欄)

Building society roll no. (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)

For payments requested outside your country of residence (apart from resident in Mainland China), please provide the reason you are unable to receive the payment to a bank account in your current country of residence.

有關居住國家以外的地方付款要求 (中國內地居民除外) · 請提供 閣下無法通過現在居住國家的銀行賬戶收取款項的原因。

Section D 部: Proof of identity and proof of residential address 身分證明及住址證明

Proof of identity for individual policyholders 個人保單持有人的身分證明

Policyholders must provide one of the following valid primary documents that has been suitably certified (please ✓ 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
1. Passport 護照	<input type="checkbox"/>	<input type="checkbox"/>
2. Government issued ID card 政府發出的身分證明文件	<input 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我們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我們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
1. Utility bill 公用服務賬單	<input type="checkbox"/>	<input type="checkbox"/>
2. 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"/>

If you have a PO Box address, we will need either (please ✓ to confirm which document is attached):

若 閣下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 PO Box address (this must reference your physical residential address)
為郵政信箱付款的證明 (必須提述 閣下的住址)

OR 或

A utility bill referencing your physical residential address
提述 閣下的住址的公用服務賬單

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

Note: In certain circumstances, other forms of ID and/or address verification may be accepted. Your licensed insurance intermediary should refer to the "Customer guide for anti-money laundering requirements", or you can contact our Customer Care Team for further guidance.

註：在某些情況下，我們或會接受其他身分證明文件及/或地址證明。如需其他指引，閣下的持牌保險中介人可參閱「Customer guide for anti-money laundering requirements」或閣下可聯絡我們的客戶服務部。

Information to be included on certified customer 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 to be 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 that 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。」

1. Signature of certifier
核證人簽署
2. 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)
3. Position/Job title
職位/職銜
4. Company name, address, telephone no. and email address
公司名稱、地址、電話號碼及電郵地址
5. Date
日期
6. FSA/HKCIB/MAS/PIBA/QFCRA registration no. (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)
7. Zurich appointed suitable certifier no. (where applicable)
蘇黎世委任的有效核證人編號 (如適用)
8. Details of the certifier's regulatory/affiliate body and their reference no.
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，否則我們可要求閣下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：

1. A regulated introducer or authorized employee of a regulated introducer. Confirmation of the introducer's regulatory reference no. 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。閣下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；
2. An individual introducer who has been accepted as a suitable certifier by the Company (including introducers registered by the FSA, HKCIB, MAS, PIBA and QFCRA);
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、香港專業保險經紀協會及卡達金融中心管理局註冊的中介人)；
3. 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)；
4. French maire (mayor);
市長；
5. 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)；
6. 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)；
7. 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；
8. 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。

Section E 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；
 - 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管局、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 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) 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 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。

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".

若閣下的簽署與護照/身分證上的簽署不同，或若閣下的簽署已更改一段時間，閣下須填妥「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
Full name 姓名	Full name 姓名
Date signed 簽署日期	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"/>	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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Registered in the Isle of Man number 20126C.

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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。

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