

Death Claim Form - Part I (To be completed by the claimant(s)/beneficiary(ies)) 人壽保險索償表格 - 第一部份 (由索償人或受益人填寫)

、壽	保險索償表格 - 第-	−部份 (由索償人或受益人均	寫)			
Fillin	g in this form 請填妥下列	J表格				
at 12/ 請填到	F, Lincoln House, Taikoo Place, 979 K	is form and return it together with the requ ng's Road, Quarry Bay, Hong Kong. If you h 香港鰂魚涌英皇道 979 號太古坊林肯大原 聯絡。	ave any enquiries	, please contact us	at (852) 2169 03	00.
	licy Number (s) : 單編號		of Deceased: 保人姓名			
	ID/Passport No: 巷身份證 / 護照號碼	Date o 出生日	f Birth: 期 <u> </u>	dd 日	mm 月	yyyy 年
	se provide all relevant details and 供所有有關資料。如有需要,可另同	information on separate continuation 付頁書寫。)	sheet of paper i	f necessary.)		
1. De	etails of the Incident 事故	z詳情				
1.	Date & Place of Death 死亡日期及地點					
2.	Cause of Death 死亡原因					
3.	Residence at Death 死者身故時的住址					
4.	Occupation at Death 死者身故時的職業					
5.	Has there been / will there beer sees of the end of th	e an autopsy or a coroner's inques 會,請提供詳情:	? If yes, please	give details:		
	When 時間	Where 地點		Results 結果		
6.	What were the sign and symp 死者身故前之最後徵象及病徵	otoms of the last illness of the dece	eased?			
7.	When did the deceased first complain of or give indications of the last illness? 死者首次察覺或發現最後疾病之日期					
8.	When did the deceased first 死者首次因最後疾病而向醫生或	consult any physicians/hospitals fo 醫院求診之日期	r the last illnes	ss?		
9.	five years preceding death:	physicians/hospitals the deceased a 曾診治死者的醫生或醫院的資料:	attended during	g the last illnes	s, and during	the past

10. Have any of the deceased	d's family membe	66 1.6			
工业的妇员 做不中于400半3		rs suffered from	n a similar illness? I	f yes, pleas	e give details:
	死者的親屬曾否患有相同或類似的疾病?如有,請提供詳情: Relationship with the Deceased Nature of illness			First Dia	anosis Dato
與死者之關係	fileaseu Na 有i	關疾病的性質			gnosis Date 患有該疾病的日期
	d with other insu	rance companie	s2 If yes please giv	- details:	
死者有否向其他保險公司投付	保?如有,請提供詢	羊情:	s: II yes, piedse giv	e details.	
Name of Company 保險公司名稱	Type of Polic 保單類別	У	Sum Insured 保額		Policy Start Date 保單生效日期
	_				
	_				
Payment Details 賠償資	· :料				
		E 益明笠 2 五→計照			
Please refer to the explanatory r				NA-III A-I	du()
Name of all Claimant(s) / Beneficiary(ies)	HK ID / Passport No 香港身份證 /	Number(s)		Mailing Add 通訊地址	dress(es)
所有索償人/受益人之姓名			與死者之關係		
1)					
2)					
3)					
4)					
Each of the Claimant(s) / Benefic 每位索償人 / 受益人須單獨提交一	ciary(les) must subl 份「自我證明表格」	nit a separate "Se 。	If-Certification Form".	•	
Payment Currency* 賠償貨幣 *	☐ HK Dollars 港幣		JS Dollars 美元	□ Poli 保單	cy Currency
* If payment currency selected is				1.1.1	~~
* 如賠償貨幣與保單貨幣不同,兌) 換率以恒安標準人	專(亞洲)有限公司	公佈為準。	c acciai ca b	y Freng / III Staridard Elic (/ Isla) Eli
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Declaration & Authorisa					
	ation 聲明及授 on behalf of myself/ evant Persons") that if my/our knowledg me/us to the Compa obtained by me/us their personal information collection statement the Company may in 者、索償人、受益人 本人/我們親手所寫 人資料收集聲明所調	ourselves, the deco all statements and e and belief compl eny (whether prov in compliance wit mation to the Com . I/We agree to ind ncur arising out of . 及其他在此人壽保 . 為本人 / 我們所 . 索償申請或從其他 . 成之目的就此索償申	eased, the claimants, to deased, the claimants, to all questifete and true. I/We furthed under this claim and the Personal Data (Personal Da	ons herein we her declare to application of trivacy) Ording sclaim application demonstrates, on demonstrates, any breach 是及之人士("本人/吾等再獎、/吾等在遵守人資料。本人	whether or not written by my / chat any personal information or otherwise provided) in relation hance and the Relevant Persons action for the purposes as set hand, the Company against all of the declaration set forth in thi 相關人士") 聲明及同意所述一切聲明,由本人 / 吾等就此索償申請予個人資料 (私隱) 條例的情況下 / 吾等同意應貴公司要求,就貴么
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Death Claims - Authorisation 死亡索償 - 授權書

Filling in this form 請填妥下列表格

	of HKID card number	, do hereby
	ysician, medical practitioner, hospital, clinic, other med	
bank, government institution, any ass	sociation, federation or similar organisation of insura	ince companies, other organisation,
institution or person that has any rec	cords or knowledge of the late,	of HKID
card number	(relationship to me) to disclose any
records or knowledge of, and any oth	her information relating to, the deceased and who ha	s attended to the deceased to disclose
such information to Heng An Standa	rd Life (Asia) Limited. This authorisation shall survive	me and my estate and remain valid
notwithstanding incapacity. A photoc	copy of this authorisation shall be as valid as the origi	nal.
I/We hereby declare that any person	al information of third parties provided by me/us to t	he Company (whether provided under
this application or otherwise provide	ed) in relation to this application has been obtained by	y me/us in compliance with the PDPO and
the relevant third party has agreed to	o the disclosure of his/her personal information to th	e Company in relation to this application
for the purposes as set out in this pe	ersonal information collection statement. I/We agree t	to indemnify and hold harmless, on
demand, the Company against all los	sses, liabilities and costs which the Company may incu	ur arising out of, or in connection with,
any breach of the declaration set for	th in this paragraph.	
本人	身份證號碼	,謹此授權任何僱主、
	、其他有關醫療機構、保險公司、銀行、政府機構、其	
他組織、機構或人士,凡知道任何有同	關死者之紀錄者,及曾診驗死者	(身份證
號碼)(與本人之關係),均可將該等資料提供給恒安
標準人壽(亞洲)有限公司。此授權對	対本人之遺產承繼人均具有約束力;即使本人死亡或無	行為能力時,此授權仍具效力。本授權書
的影印副本跟正本同樣有效。		
本人 / 吾等特此聲明,由本人 / 吾等家	就此申請提供予貴公司的任何第三方個人資料(無論載	
		於此中請書或從其他恁徑所提供)乃田本
人 / 吾等在遵守個人資料(私隱)條例	列的情況下獲得,且有關第三方已同意為此等個人資 料	
	列的情況下獲得,且有關第三方已同意為此等個人資料 公司要求,就貴公司因發生任何違反本條款所載的聲明	中收集聲明所載之目的就此申請向貴公司提
供其個人資料。本人 / 吾等同意應貴公	公司要求,就貴公司因發生任何違反本條款所載的聲明	中收集聲明所載之目的就此申請向貴公司提
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Explanatory Notes 註釋

Documents to be submitted 所需呈交之文件

- 1. Death Claim Form Part I duly completed by the claimant(s) / beneficiary(ies); 人壽保險索償表格 - 第一部份需由索償人或受益人填寫;
- 2. Death Claim Form Part II duly completed by the usual / last Medical Practitioner; 人壽保險索償表格 - 第二部份需由家庭醫生或最後診治之醫生填寫;
- 3. Authorisation Form duly completed by at least one claimant or beneficiary; 授權書需由最少一位索償人或受益人填寫;
- 4. Self-Certification Form duly completed by each of the claimant(s) / beneficiary(ies); 「自我證明表格」- 需由每位索償人或受益人單獨填寫;
- 5. Original* Death Certificate; 死亡證書正本 * ;

按要求提供額外表格。

- 6. Original* identification of the Deceased (e.g. HK ID Card or Birth Certificate or Passport); 死者的身份證明文件正本*(如香港身份證、出生證明或護照);
- 7. Original* identification of the claimant(s) / beneficiary(ies) (e.g. HK ID Card or Birth Certificate or Passport); 索償人或受益人的身份證明文件正本*(如身份證、出生證明或護照);
- 8. Original* proof of relationship between the Deceased and the claimant(s) / beneficiary(ies) (e.g. Birth Certificate or Marriage Certificate, etc.); 索償人或受益人與死者關係的證明文件正本*(如出生證明或結婚證明書等);
- 9. Additional documents might be requested by the Company. 如有需耍,本公司或許要求提供其他文件。

Guidelines for submitting a Death Claim 呈交人壽保險索償指引

- 1. If the document(s) provided is(are) written in a language other than English or Chinese, a translated version duly certified by a notary public or the China Consulate is required.
 - 若提供的文件並非以英文或中文會寫,請連同由公證行或中國領事館核實之譯本一併遞交。
- 2. If the death occurred outside Hong Kong and the Death Certificate is issued by the province / state of another country, the Death Certificate must be certified by the China Consulate located in that country. 若死亡並非在香港發生,或死亡證書並非由香港政府簽發,死亡證需由當地所屬之中國領事館加簽核實。
- 3. If the Death Certificate has not been issued, the claimant or beneficiary can notify the Company by submitting other document(s) for proof of death (e.g. cremation order), but the original* Death Certificate must be submitted to the Company once it is issued. 如死亡證書仍未簽發,索償人或受益人可提交其他有關的死亡證明文件備案(如火葬紙),待死亡證書正本*簽發後立即遞交予本公司。
- 4. The page 2 of this form must be completed by the party(ies) to whom the Death Benefit is claimed to be payable as beneficiary(ies). If there is more than one named beneficiary, each beneficiary may either sign the same form or each beneficiary may complete a separate form. Additional forms will be sent upon request. 第 2 頁表格各欄需由提出索償之索償人或受益人填寫。如受益人超過一位,則每位均需在同一表格簽署,或分別在不同的表格簽署。本公司可
- 5. If the Death Benefit is payable to a minor, the Death Claim Form (Part I) must be completed and signed by the legal guardian. The original* Court Order appointing the legal guardian should be submitted. If the Court Order appointing the legal guardian is being applied for, it is proposed that the legal guardian can notify the Company by submitting other relevant supporting document(s), but the Court Order must be submitted to the Company once it is issued. 如受益人為未成年人士,人壽保險索償表格(第一部份)應由其合法監護人填寫及簽署,並呈交一份委任合法監護人的法庭命令公證正本*。如法庭命令仍在申請中,建議監護人可提交有關文件以作備案,待法庭命令頒發後立即遞交予本公司。
- 6. If the Death Benefit is payable to an estate, the Death Claim Form (Part I) must be completed and signed by the Executor or Administrator. The original* Court Order making the appointment and authorising the Executor or Administrator to act for the estate must be submitted. If the Court Order appointing the Executor or Administrator is being for, it is proposed that the Executor or Administrator can notify the Company by submitting other relevant supporting document(s), but the Court Order must be submitted to the Company once it is issued. 如死亡賠償屬於被保人遭產,人壽保險索償表格(第一部份)應由遺囑執行人或遺產承辦人填寫及簽署,並呈交一份委任及授權遺囑執行人或遺產承辦人代表處理遺產的法庭命令公證正本*。如法庭命令仍在申請中,建議遺囑執行人或遺產承辦人可提交有關文件以作備案,待法庭命令頒發後立即遞交予本公司。
- 7. If the Death Benefit is payable to a corporation or partnership, the Death Claim Form must be completed and executed by a duly authorised officer or partner respectively who has the power and right to make such a claim in the name of the corporation or the partnership. 如死亡賠償是付予法人團體或合夥組織,人壽保險索償表格應由有權代表該等法人團體或合夥組織並有資格提出索償的人士或合夥人填寫及簽署。
- * If you would like to have the original document returned to you, you hereby authorise the Company to make and keep certified true copies of the original document. Please state the name and address of the person to whom the original document should be returned:
- * 如閣下欲取回所遞交之正本文件,則閣下謹此授權本公司影印該等文件及擁有該等文件正本加簽核實之副本。請列明所退還文件之收件人姓名及地址:

Please note that any original document(s) submitted to and returned by the Company is(are) so submitted and returned at the risk of the claimant(s), the beneficiary or any other person(s). The Company shall not be liable for any losses whatsoever suffered or incurred by the claimant(s), beneficiary(ies) or any person(s) as a result of the loss of or damage to the original document(s) whether through the postage system or otherwise, except to extent of any fraud, negligence or willful default on the part of the Company.

請注意所有正本文件不論寄給本公司或本公司退回給索償人或受益人或相關人士,若在郵遞過程中或其它原因令有關正本文件遺失或破損,而導致索償人或相關人士蒙受任何損失,除非本公司因欺騙、疏忽或故意失責所造成的錯誤,否則本公司均不負任何責任。

Death Claim Form - Part II

人壽保險索償表格 - 第二部分

(To be completed by the usual/last attending Medical Practitioner at the claimant's/beneficiary's expense.) (索償人或受益人自費由經常就診或最後主診之醫生填寫)

	青填妥下列表格						
Name of Deceased: 已故受保人姓名							
Deceased's HK ID/Passp 已故受保人香港身份證 / i	oort No. 護照號碼		Deceased's Date o 已故受保人出生日		dd 日	mm 月	уууу
Residence at Death: 身故時之住址			Occupation at Dea 身故時之職業	ith: 			
Employer details at Dea 身故時之僱主資料	th:						
(Please provide all relevan (請提供所有有關資料。如有			tinuation sheet of រុ	paper if necessa	ary.)		
Consultation Inform	nation 診症資料						
1. On what date did the 死者首次向閣下求診的		ult you?					
2. Were you the usual Medical Practitioner of the deceased? If not, please advise the name & address of the physician(s) who has(have) treated the deceased before. 閣下是否為死者之經常就診的醫生?若否,請提供之前為死者治療之醫生的姓名及地址。						ho	
	lease list the details of all medical conditions for which the deceased had ever consulted you: 例出死者曾向閣下求診的所有病情資料:						
Consultation Date 求診日期	Symptoms 病徴	History & I 首次出現病	Duration Te	agnostic ests & Results 斷測試及結果		agnostic & Ti 斷及治療	eatments
4. Date the deceased w 若知情,請提供死者官	was first informed of th 有次知悉未次病患及首-		date the deceased	l first became a	ware of its s	symptoms (if	known).
 5. Hospital Records: 醫院紀錄:							
		Date of Admission 入院及出院日期	n & Discharge	Diagn 診斷及	osis & Treat x治療	ments	
醫院紀錄: Name of Hospital 醫院名稱 6. Please give the date, deceased suffer fron		入院及出院日期 e cause of death. If th	e cause of death w	診斷及 vas an illness, in	2治療		; did the
醫院紀錄: Name of Hospital 醫院名稱 6. Please give the date, deceased suffer fron 請提供死亡日期、地點 7. Did any of the follow	n this illness? 比及導致死亡之直接原[入院及出院日期 e cause of death. If th 因。若閣下認為死亡原 cause of death? If so,	ne cause of death w 因為疾病,請提供歹	診斷及 — vas an illness, in E者患病年期。	2治療		; did the
醫院紀錄: Name of Hospital 醫院名稱 6. Please give the date, deceased suffer fron 請提供死亡日期、地點 7. Did any of the follow	n this illness? 出及導致死亡之直接原原 wing contribute to the 因?若是,請填上剔號。	入院及出院日期 e cause of death. If th 因。若閣下認為死亡原 cause of death? If so,	ne cause of death w 因為疾病,請提供歹 , please tick and giv	診斷及 vas an illness, in E者患病年期。 ve details:	x治療 n your opini		ξ did the
醫院紀錄: Name of Hospital 醫院名稱 6. Please give the date, deceased suffer fron 請提供死亡日期、地黑 7. Did any of the follow 以下是否為其死亡原因	n this illness? 出及導致死亡之直接原即 ving contribute to the 因?若是,請填上剔號。 or injury 舊病或舊傷	入院及出院日期 e cause of death. If th 因。若閣下認為死亡原 cause of death? If so	ne cause of death w 因為疾病,請提供歹 , please tick and giv	診斷及 vas an illness, in E者患病年期。 ve details:	x治療 n your opini		g did the
醫院紀錄: Name of Hospital 醫院名稱 6. Please give the date, deceased suffer from 請提供死亡日期、地黑 7. Did any of the follow 以下是否為其死亡原因 □ Previous illness o	m this illness? HA及導致死亡之直接原原 wing contribute to the 因?若是,請填上剔號。 or injury 舊病或舊傷 生活方式或習慣	入院及出院日期 e cause of death. If th 因。若閣下認為死亡原 cause of death? If so	ne cause of death w 因為疾病,請提供歹 , please tick and giv	診斷及 vas an illness, in E者患病年期。 ve details:	x治療 n your opini		g did the
醫院紀錄: Name of Hospital 醫院名稱 6. Please give the date, deceased suffer from 請提供死亡日期、地點 7. Did any of the follow 以下是否為其死亡原因 □ Previous illness o □ Lifestyle / Habits	n this illness? 出及導致死亡之直接原即 wing contribute to the 因?若是,請填上剔號。 or injury 舊病或舊傷 生活方式或習慣	入院及出院日期 e cause of death. If th 因。若閣下認為死亡原 cause of death? If so	ne cause of death w 因為疾病,請提供歹 , please tick and giv	診斷及 vas an illness, in E者患病年期。 ve details:	x治療 n your opini		g did the

Consultation Information 診症資料

8.	When and by whom the deceased was diagnosed to have the illness which caused the death? 確診死者患有致命疾病的時間及其醫生姓名					
9.	Were there any precipitating factors which may have contributed hastened the death of the deceased? 有否其他因素導致加速死者身亡?					
10.	Have you ever heard of the deceased suffering from any other major, chronic or congenital disease? If yes, please provide details. 閣下有否獲悉死者患有任何其他主要疾病、慢性病或先天性疾病?若有,請提供詳細資料。					
11.	I. Was the deceased a smoker or did the deceased have any alcoholic habits or had the deceased used any illegal substances? If yes, please give details in respect of the type, quantity and duration of consumption of the substance. 死者有否吸煙、酗酒或曾服用任何違禁藥物?若有,請提供詳細藥物類型、劑量及服用年期。					
12.	—————————————————————————————————————					
13.	3. Have any of the deceased's family members suffered from similar or related illnesses? If yes, please provide details. 死者家屬是否患有類似或相關疾病?若是,請提供詳細資料。					
14.	4. Was the deceased referred by another physician to your clinic/hospital? If yes. please provide the name & address of that other physician. 死者是否由其他醫生轉介到閣下的診所 / 醫院?若是,請提供該醫生的姓名及地址。					
rea	would be most grateful if you could provide copies of any sp dings or similar evidence to support the validity of the claim 情閣下提供所有專科 / 醫院報告、與及任何測試及閱讀報告或相關之證	ant's/beneficiary's claim.				
Clai thir info cos 本 (私	I hereby declare that any personal information of third parties provided by me to the Company (whether provided under this Death Claim Form or otherwise provided) has been obtained by me in compliance with the Personal Data (Privacy) Ordinance and the relevant third parties have agreed to the disclosure of their personal information to the Company for the purposes as set out in this personal information collection statement. I agree to indemnify and hold harmless, on demand, the Company against all losses, liabilities and costs which the Company may incur arising out of, or in connection with, any breach of the declaration set forth in this paragraph. 本人特此聲明,由本人提供予貴公司的任何第三方個人資料 (無論載於此人壽保險索償表格或從其他途徑所提供) 乃由本人在遵守個人資料 (私隱) 條例的情況下獲得,且有關第三方已同意為此等個人資料收集聲明所載之目的向貴公司提供其個人資料。本人同意應貴公司要求,就貴公司因發生任何違反本文中所載的聲明,而可能招致或與之相關的任何損失、責任及費用,對貴公司作出賠償,並使貴公司免受損害。					
as g req 本 <i>J</i>	I HEREBY CERTIFY that I personal examined and treated the deceased in connection with the above condition and that the facts as given above represent my opinion of the deceased's condition. I declare that no information has been withheld by me at the request of the deceased's family or the policy beneficiary. I agree to make the declaration on Part II of this Death Claim Form. 本人 謹此證明 已親自為死者就上述狀況進行檢查及治療,並確認上述資料為本人對死者情況作出之意見。本人聲明應死者家屬或保單受益人要求,並無隱瞞任何資料。本人同意就此人壽保險索償表格第二部分作出聲明。					
	me of the Medical Practitioner z姓名	Qualification and Specialty 資格及專業				
	nature of the Medical Practitioner 5簽署	Name and Address of the Hospital 醫院名稱及地址				
 Dat 簽署	e of Signature (dd/mm/yy) 目用 (日 / 月 / 年)	Phone Number(s) 電話號碼				

Personal Information Collection Statement 個人資料收集聲明

Throughout this Personal Information Collection Statement (this "Statement" or "PIC Statement"), and the Foreign Tax Reporting and Withholding Obligations Statement (the "Tax Obligations Statement"), certain words and phrases have defined meanings as follows: 本個人資料收集聲明 (「本聲明」或「個人資料收集聲明」) 及外地稅報呈報 / 稅務責任聲明 (「稅務責任聲明」) 中,若干詞彙的定義如下:

'Company 「公司」

means Heng An Standard Life (Asia) Limited; 指 恒安標準人壽 (亞洲) 有限公司;

"Company's affiliates" 「公司聯屬公司」

means any of the Company's affiliates within the Company's group; 指 任何屬公司集團內的聯屬公司;

"Company's group"

means Heng An Standard Life (Asia) Limited registered in People's Republic of China (registered number 120000400008883) having its registered office at 18F, Tower II, The Exchange, 189 Nanjing Road, Heping District, Tianjin, People's Republic of China, 300051 together with its subsidiaries (including but not limited to the Company), subsidiary undertakings and associated companies (whether direct or indirect) from time to time and a "member of the Company's group" shall be construed accordingly;

「公司集團」

指。根據公司法於中華人民共和國註冊的恒安標準人壽保險有限公司(註冊編號為 120000400008883),註冊辦事處位於中國天津市和平區南京路 189 號津滙廣場 2 座 18 層 (郵編 300051) 及其不時直接或間接擁有的子公司 (包括但不限於本公司)、附屬公司與關聯公司,「公司集團旗下公司」亦按此詮釋;

"Consenting Person" 「同意人士」

means each of the following:

每位以下人士

- (a) the policy owner; 保單持有人;
- each person who has beneficial ownership of the Policy;
- each person who is entitled to access the Policy's value (for example, through withdrawal, surrender, policy claim, benefit payment or otherwise), change a Beneficiary, or claim or receive a benefit payment or any person who is entitled to a future benefit under the Policy, including without limitation any policy claimant, assignee and nominated Beneficiary under the Policy; and 有權透過提款、退保、保單索償、收取利益等方法取用保單價值,更改受益人,索取或接受收取利益的人士,或根據保單每位日後 享有收取利益權利的人士,包括但不限於任何保單索償人、保單持承受人及訂明的受益人;及
- each person who is entitled to receive a payment (such as a policy claimant, policy claimant and nominated Beneficiary) when an obligation to make any payment under the Policy arises or becomes fixed. 當有責任根據保單付款或確定該責任時每位有權接受收取利益的人士 (包括保單索償人及指定的受益人) 。

"Compliance Obligations" means obligations of the Company or of any other members of the Company's group to comply with: 「合規責任」 指 我們或公司集團任何成員須遵守以下規定的責任:

- any applicable local or foreign law, ordinance, regulation, demand, guidance, rules, codes of practice, whether or not relating to an intergovernmental agreement between the governments or regulatory authorities of two or more jurisdictions; and 任何適用的本地或外國法律、法令、規定、要求、指引、條例和守則而不論是否有關兩個或以上司法管轄區的政府之間或監管機構 之間的協議;及
- any agreement between the Company (or that of any other member of the Company's group, as the case may be) and any government or taxation authority in any jurisdiction. 我們或公司集團其他成員 (視情況而定) 與任何司法管轄區的政府或稅務當局之間的協議。

"Customer" 「客戶」

- who is treated generally as a customer by the Company, whether the person is: 被公司一般當作客戶的人士,不論該人士為: (a)
 - a policy owner, proposed policy owner, policy assignee, life insured, proposed life insured, party under a trust, payer of insurance premium, beneficiary, payee of insurance benefits, or financial adviser in respect of a product or service of the Company; or 公司產品或服務下的保單持有人、準保單持有人、保單受讓人、受保人、準受保人,信託下的當事人,保費支付人、受益人、 保險金受款人或理財顧問;或
 - adjrectorushareholder officer companages of a corporate applicant for insurance or corporate policy owner in respect 正在申請或已是公司產品或服務的公司投保人或公司保單持有人之董事、股東、主管或經理;及
- (b) who has provided personal data to the Company and therefore became data subject of the Company; 曾向公司提供個人資料而成為我們資料當事人的人士;

"data subject"

means, in relation to personal data, the individual (not being a corporate person) who is the subject of the data, and all such individuals as a whole shall be referred to as "data subjects"; 指 就個人資料而言,屬該資料的當事人的個人 (並非法人),而所有該等個人統稱為「資料當事人」;

「資料當事人」

"Hong Kong" 「香港」

means the Hong Kong Special Administrative Region of the People's Republic of China; 指中華人民共和國香港特別行政區;

"PDPO" 「私隱條例」 means the Personal Data (Privacy) Ordinance, Chapter 486 of the Laws of Hong Kong; 指 香港法例第 486 章之《個人資料(私隱)條例》

"personal data" 個人資料1

means (as defined in the PDPO) any data: 指 於私隱條例中符合以下說明的任何資料

- (a) relating directly or indirectly to a living individual; 直接或間接與一名在世的個人有關的;
- from which it is practicable for the identity of the individual to be directly or indirectly ascertained; and 從該資料直接或間接地確定有關的個人的身份是切實可行的;及
- in a form in which access to or processing of the data is practicable. 該資料的存在形式令予以查閱及處理均是切實可行的。

"Personal Information" 「個人資料」

in respect of a Consenting Person, means: 有關同意人士的個人資料指:

- where the Consenting Person is an individual, his/her full name, date and place of birth, residential address, mailing address, contact information (including telephone number), and any taxpayer identification number, social security number, citizenships, residency(ies) and tax residency(ies); 倘同意人士為個人,即其全名、出生日期及地點、居住地址、郵寄地址、聯絡資料(包括電話號碼),及任何納稅人識別編號、社會保障號碼、公民身分、居住地及稅務上的常駐國家;
- where the Consenting Person is a corporate/entity, its date and place of incorporation or formation, registered address, address of place of business, tax identification number, tax status, tax residency, registered address, address of place of business or (if applicable) such information as the Company may reasonably require regarding each of its substantial shareholders and (if applicable) assistant and a second of the controlling persons.
 (何同意人士為公司 / 機構,即其註冊或成立日期及地點、註冊地址、營業地址、稅務識別編號、稅務狀況、稅務上的常駐國家或 (何適用) 我們合理要求的主要股東及控權人士資料。

"Policy Information"

means any information relating to the Policy including without limitation the Policy number, Policy balance or value, gross receipts, withdrawals and payments from the Policy. 指 有關保單的任何資料,包括但不限於保單編號、保單結餘或價值、總收入、從保單提取及支付的款項

「保單資料」

"Tax Information" 「稅務資料」

in respect of a Consenting Person, means:

有關同意人士的稅務資料指

- any documentation or information (and accompanying statements, waivers and consents as the Company may from time to time require or the Consenting Person may from time to time give) relating, directly or indirectly, to the tax status of the Consenting Person; 與同意人士稅務狀況直接或間接有關的文件或資料,以及我們不時要求或同意人士不時提供的隨附陳述、放棄及同意文件;
- Personal Information of the Consenting Person; and 同意人士的個人資料;及
- Policy Information. 保單資料
- Nothing in this Statement shall limit the right of Customers as a data subject under the PDPO. 本聲明並不局限客戶作為資料當事人根據私隱條例所享有的權利。 2.
- From time to time, personal data of Customers are (or will be) collected by or on behalf of the Company to enable it to carry on its day-to-day business and to provide services to Customers. Failure to obtain personal data from Customers may result in the Company being unable to process an insurance application or to provide after-sales services to the Customer. 為使公司能進行其日常業務及向客戶提供服務,客戶的個人資料會不時由公司收集或由他人代為收集。若公司未能向客戶取得個人資料,則便可能導致公司無法處理的公司無法。 3. 理投保由請或無法向客戶提供售後服務。
- Personal data of Customers held by the Company will generally be kept confidential, but the Company may provide, disclose or transfer these personal data to the following persons (whether they are in or outside Hong Kong) for one or more of the purposes set out in paragraph 5 below:
 由公司持有的客戶個人資料一般會被保密,惟公司有可能會向以下人士 (不論是在香港境內或境外)提供、披露或轉交該等個人資料以便達到下文第 5 段中述及的一個工程的可以表现
 - (a) any reinsurance company to whom any part of the Company's business is ceded; 任何承保公司業務之任何部分的再保公司;
 - any financial institution or financial service provider who is in a position to process the payment of, or handle the payment instruction or authorization of any monies to or by the Customer; 任何處於適當崗位可處理向客戶支付或收取款項,或可執行向客戶支付或收取款項之付款指示或授權的金融機構或金融服務機構;
 - any healthcare service provider who is engaged to carry out medical assessment on the health of a Customer which will affect the Company's decision on processing an insurance application or a claim; 任何受聘負責檢驗客戶健康狀況而該檢驗結果會影響公司處理投保申請或索償決定的醫療服務機構;
 - any professional adviser or service provider who is engaged to provide independent advice or service in a specialised area to the Company and/or the Company's affiliates; 任何受聘向公司及 / 或公司聯屬公司提供獨立意見或專門範疇服務的專業顧問或服務機構;

 - 任何受時间公司及/ 郊公司辦屬公司提供绚尘息兒或导门範畴版務的等業顧問或服務機構, any person in connection with any claims made by the Customer or otherwise involving the Customer in respect of any products and/or services provided by the Company or the Company's affiliates, including any claims investigation agency; 任何就公司或公司聯屬公司產品及 / 或服務與客戶提出索償 (或以別的形式涉及客戶) 有關的人士,包括任何索償調查機構; any person to whom the Company and/or the Company's affiliates are under an obligation to make disclosure under any Compliance Obligations or the requirements of any present or future laws, rules, regulations, codes, treaties or guidelines binding or enforceable on them, including any regulators, government authorities, international organisations or alliances, courts, adjudicators, and/or any industry bodies, associations or federations; 任何公司及 / 或公司聯屬公司根據所須遵守的任何合規責任或現有或未來法例、規則、法規、守則、條約或指引而對其有披露責任的人士,包括任何監管機構、政府部門、國際組織或聯盟、法院、裁判機構及 / 或任何行業團體 協會或聯會; any insurance intermediaty, authorised by the Company and/or the Company's affiliates to promote sell or provide after-sales services in relation to
 - any insurance intermediary authorised by the Company and/or the Company's affiliates to promote, sell, or provide after-sales services in relation to, any of the products and services of the Company and/or the Company's affiliates; 任何獲公司及 / 或公司聯屬公司授權以進行推廣或銷售公司及 / 或公司聯屬公司任何產品及服務,或就有關產品及服務提供售後服務的保險中介機構;
 - (h) any actual or proposed assignee of the Customer's insurance policy issued by the Company and/or the Company's affiliates; 任何獲發公司及 / 或公司聯屬公司繕發保單的客戶之實際或準受讓人;
 - any actual or proposed purchaser of parts or all of the Company's business and/or those of the Company's group together with its advisers in the transaction; 任何公司及 / 或公司集團部分或全部業務的實際或準買家,及其交易顧問;
 - any agent, contractor or external service provider who is engaged to provide administrative, audit, data processing, document managing, mailing, printing, payment, storage, technology, telecommunication, or other services to the Company and/or the Company's affiliates in connection with the daily operation of their respective businesses; 任何受聘向公司及 / 或公司聯屬公司就其日常之營運提供行政、審計、資料處理、文檔管理、郵遞、印刷、付款、儲存、技術、電訊,或其他服務的代理商、承包商或外界服務供應商;
 - (k) any external service provider who is engaged to provide any service which will enhance or add value to the overall experience of the Customer in enjoying the products and/or service of the Company and/or the Company's affiliates; 任何受聘向客戶提供讓其對公司及 / 或公司聯屬公司產品及 / 或服務更為滿意或享有提升服務的外界服務機構;
 - any research agent or service provider who is engaged to carry out any market surveys or studies; 任何受聘進行市場調查或研究的調查代理或服務供應商;
 - (m) any of the Company's affiliates; and 任何公司聯屬公司;及
 - any person described in paragraph 7(d) below for the purpose of direct marketing, in case the Customer has given consent for using personal data in relation to such purpose. 任何在客戶同意讓其個人資料被用作直接促銷用途的前題下,於下文第 7(d) 段所述的人士。
- The purpose(s) for which the personal data of Customers may be used will vary depending on the circumstances and their context of collection, but the purposes perceived by the Company will include the following: 客戶個人資料的用途會因不同情况及收集的背景有異,惟公司屬意的用途將包括:
 - to offer a quotation for insurance to a Customer, and to assess, evaluate (including the merits and/or suitability of a product or service to a Customer), process, approve and/or underwrite an insurance application, a claim and/or service request from a Customer arising from the application or thereafter;
 - (b) to provide subsequent or ongoing services to a Customer in relation to an insurance application or policy; 提供有關投保申請或保單的跟進或持續服務予客戶; to carry out matching procedures as defined in the PDPO;
 - 執行私隱條例中界定的核對程序;
 - (d) to carry out credit assessments on Customers whose credit worthiness is under regular or special review; 進行客戶信用評估,不論該評估為定期或特別審查;
 - (e) to carry out surveys for gathering Customer opinion and/or statistical analysis on Customer's behavior or mentality; 進行調查以收集客戶意見及 / 或作出客戶行為或心態的統計分析;
 - to process a payment or a Customer's payment instructions and/or direct debit authorisations; (f) 處理付款或執行客戶的付款指示及/或直接付款授權
 - to determine any amount of indebtedness owing to or from a Customer; 確定欠付客戶或客戶欠付的任何款項;
 - to verify a Customer's identity in accordance with any compliance procedures, including those intended to combat terrorist financing, fraud and/or money laundering, or otherwise for the purpose of ensuring the Company Group's Compliance with the Compliance Obligations; 按任何合規程序驗證客戶的身份,包括旨在打擊恐怖活動融資、欺詐及 / 或洗黑錢活動的程序或在其他情況下用以確保公司集團導守合規責任; (h)
 - (i) to maintain an update database of personal data of Customers;

設立及更新客戶個人資料的數據庫;

- to facilitate research or design of insurance or other related financial services and/or products which may be suitable for Customers; 促進研究或設計可能適合客戶的保險或其他相關金融服務及/或產品;
- to enforce a Customer's obligations in respect of an insurance application or policy; 執行客戶在投保申請或保單下的責任;
- to enable an actual or proposed assignee of the Customer's insurance policy, or an actual or proposed purchaser of the Company's business, to evaluate the transaction intended to be the subject of the assignment or purchase; 協助客戶保單的實際或準受讓人或公司業務的實際或準買家,以評估在有關轉讓或買賣交易下的事宜;

- (m) to fulfill the disclosure requirements of any Compliance Obligations, laws, legislation, regulations, codes or guidelines as may in present or future and from time to time be applicable to the Company and/or the persons as listed in paragraph 4 above to whom the Company had transferred personal data of the Customer;
 - 遵守現時或將來不時適用於公司及/或上文第4段所列從公司手上取得客戶個人資料之人士的任何合規責任、法例、法規、規章、守則或指引底下的披露規定;
- (n) to enable the Company to carry on its normal business and day-to-day operations and to meet its liquidity and solvency requirements according to law; 令公司能繼續經營其正常業務及日常運作,以及符合有關法例對流動資金及償付能力的規定;
- (o) to procure any service which will enhance or add value to a Customer's enjoyment of the products and/or service of the Company and/or the

取得任何讓客戶對公司及/或公司聯屬公司產品及/或服務更為滿意或享有額外價值的服務;

- (p) to exercise the Company's rights as more particularly provided in the insurance policy, including the right of subrogation; 行使公司在保單中列明的權利,包括代位權;
- (q) to comply with any obligations, requirements, policies, procedures, directives, or guidelines in respect of sharing data and information within the Company's group and/or any other use of data and information in accordance with group-wide compliance procedures; and/or 遵守公司集團內對共享數據與資料,及 / 或根據集團通用的合規程序將數據與資料用作其他用途的相關責任、規定、政策、程序、指令或指引;及 / 或
- to market the service, product and/or subject as further described in paragraph 7 below. 推廣下文第7段所詳述的服務、產品及/或事項。
- Under the laws, regulations and international agreements for the implementation of automatic exchange of financial account information ("AEOI") and the U.S. Foreign Account Tax Compliance Act ("FATCA"), financial institutions are required to identify account holders (including certain policy owners and beneficiaries) and controlling persons of certain entity policyholders who are reportable foreign tax residents and report their Tax Information (including but not limited to their name, address, jurisdiction(s) of tax residence, tax identification number in that jurisdiction(s), account balance and income information) to the local tax authority where the financial institution operates or directly to the U.S. Internal Revenue Service. The local tax authority will provide this information to the tax authority of the reportable foreign tax resident's country of tax residence on a regular, annual basis. Without limiting the generality of this Personal Information Collection Statement, the Company will use the Tax Information for the purposes of AEOI and FATCA. The Tax Information may be transmitted by the Company to the Hong Kong Inland Revenue Department or any other relevant domestic or foreign tax authority for transfer to the tax authority of another jurisdiction. The Tax Information may be transmitted by the Company to the U.S. Internal Revenue Service.

Jurisdiction. The fax information may be transmitted by the company to the 0.5. Internal revenue service.
根據實施的自動交換財務帳戶資料(「自動交換資料」)和美國海外帳戶稅收合規法案(「合規法案)的法律、法規及國際協定,財務機構須辨別具有須申報外國稅務居民身份的帳戶持有人(包括某些帳戶持有人及保單受益人)和某些實體保單持有人的控權人,並向財務機構營運當地的稅務部門或直接向美國國稅局申報其稅務資料(包括但不限於姓名、地址、稅務居住地、該稅務居住地的稅務編號、帳戶結餘及收入資料)。當地稅務部門將每年定期將上述資料交予須申報外國稅務居民所屬稅務居住地的相關稅務部門。在不限制個人資料收集聲明下,本公司會將收集的稅務資料用於自動交換資料及合規法案。本公司會將稅務資料傳遞給香港稅務局或其他本地或海外稅務部門用於轉交其他司法管轄區的稅務部門。本公司亦可能將稅務資料轉交給美國國稅局。

Use of Personal Data in Direct Marketing 使用個人資料作直接促銷用途

The Company intends to use the personal data of Customers for direct marketing purpose and the Company requires their consent (including an indication of no objection) for the purpose. In this connection: 公司擬使用客戶個人資料作直接促銷用途,惟公司的該用途須取得客戶同意(包括其表示不反對)。就此,請留意:

the name, contact details (including telephone numbers, mailing addresses and email addresses), gender, date of birth, transaction pattern or behavior, financial background, and demographic data (collectively, "Selected Personal Data") being held by the Company may from time to time be wed in direct marketing; and wed in direct marketing; and 公司所持有客户的姓名、聯絡資料(包括電話號碼、郵寄地址及電郵地址)、性別、出生日期、交易模式及行為、經濟背景及人口統計數據 (統稱「選定個人資料」)可被不時用作直接促銷用途;及

- (b) information delivered by post, electronic mails, SMS, telephone calls, and/or other means of communication may be used by the Company in achieving its direct marketing purpose; and 公司可透過以郵寄、電郵、短訊、電話及 / 或其他通訊方式轉遞的資料以達到其直接促銷用途;及
- (c) the classes of service, product and subject in relation to the Company's direct marketing may include: 有關公司作直接促銷的服務、產品及項目可包括:

- (i) insurance, investment, financial planning, asset and wealth management and related services and/or products; 保險、投資、財務策劃、資產和財富管理及相關服務及 / 或產品;
- (ii) lucky draw, games, media event and/or seminar; and 抽獎、遊戲、傳媒活動及 / 或講座;及
- (iii) reward, loyalty, privilege and/or special-offer programs; 獎勵、長期客戶、優惠及/或特惠計劃;
- (d) the classes of service, product and subject described above may be provided or solicited by the Company and/or: 上述服務、產品及項目可能由公司及 / 或下述各方提供或取得:
 - any of the Company's affiliates;

- third party financial institutions, investment firms, investment advisers and investment service providers; and 第三方金融機構、投資行、投資顧問及投資服務機構;及 (ii)
- (iii) third party providers of reward, loyalty, privilege and/or special-offer programs; 獎勵、長期客戶、優惠及 / 或特惠計劃的第三方提供者;
- (e) in addition to marketing the classes of service, product and subject described above for and by itself, the Company also intends to provide the Selected Personal Data of Customers to all or any of the persons described in paragraph 7(d) above for use by them in marketing those classes of service, product and subject, and the Company requires the consent of those Customers (including an indication of no objection by them) for such purpose; and

除為自己或靠自己直接促銷上述服務、產品及項目外,公司亦擬提供選定個人資料予上文 7(d) 段所述之全部或任何人士用於其促銷該等服務、產品及項目上, 惟公司須取得該等客戶的同意 (包括其表示不反對);及

- (f) if a Customer does not wish to allow the Company to use or provide to other persons any of his/her Selected Personal Data for direct marketing purpose, the Customer can exercise his/her right of objection and notify the Company. 客戶如欲拒絕公司使用,或提供選定個人資料予其他人士使用作直接促銷,可行使反對權並通知公司。
- Under and in accordance with the PDPO, a data subject has the following rights: 根據私隱條例,資料當事人有權:

- (a) to check whether the Company holds data relating to him/her and access to such data; 查證公司是否持有其資料及查閱有關資料;
- (b) to require the Company to correct any data relating to him/her which is inaccurate; and 要求公司改正有關其本人不準確的任何資料;及
- (c) to ascertain the Company's policies and practices in relation to personal data and to be informed of the kind of personal data held by the Company; and 查閱公司有關個人資料的政策及實際程序,以及了解公司所持個人資料的種類;及
- (d) to request the Company not to use his/her data for direct marketing purpose and the Company must then cease the use for that purpose without charge. 免費要求公司不得就直接營銷目的使用其資料,以及公司隨後必須停止就該用途使用其資料。
- In accordance with the PDPO, the Company has the right to charge a reasonable fee for processing any data access request. 根據私隱條例,公司有權就處理任何查閱資料的要求收取合理費用。
- The requests described above may be made in writing to the Data Protection Officer, Heng An Standard Life (Asia) Limited, 12/F, Lincoln House, Taikoo Place, 979 King's Road, Quarry Bay, Hong Kong.
 上述要求可以書面形式郵寄予恒安標準人壽(亞洲)有限公司之資料保護主任,地址為香港鰂魚涌英皇道 979 號太古坊林肯大廈 12 樓。
- 11. Foreign Tax Reporting and Withholding Obligations Statement ("Tax Obligations Statement") 外地稅務呈報 / 稅務責任聲明 (「稅務責任聲明」)
 - Provision of information 提供資料
 - - Alwe agree to provide the Company with the Personal Information of myself/ourselves and, where reasonably required by the Company, of any other Consenting Person in such manner, in such form and within such time, as the Company may from time to time require.
 本人 / 吾等同意向公司提供本人 / 吾等的個人資料,亦會應公司的合理要求,按公司不時要求的方式、形式及時間向公司提供其他同意人士的個人資料。

- Where there is any change or addition to the Personal Information of myself, and, where applicable, any other Consenting Person, I/we agree to update the Company promptly (and in any event no later than 31 days of the change or addition) of the change or addition. 倘本人 / 吾等及任何同意人士 (倘適用) 的個人資料有任何更改或增加,本人 / 吾等同意當有更改或增加會盡快 (無論如何不遲於更改或增加後的 31 天) 通知公司有關的更改或增加。

I/We agree that the Company may directly require any other Consenting Persons to provide or confirm accuracy of their Personal Information without involving me/us if the Company reasonably considers it to be appropriate.
本人 / 吾等同意,倘公司有理由認為恰當,可毋須通過本人 / 吾等直接要求其他同意人士提供其個人資料或確認個人資料是否準確。

(b) Disclosure of information

I/We agree that the Company and/or any other members of the Company's group may disclose the Tax Information of myself/ourselves and any other Consenting Person(s) to any government or tax authority in any jurisdiction for the purpose of ensuring compliance with Compliance Obligations (including but not limited to obligations under the laws, regulations and international agreements for the implementation of automatic exchange of financial account information ("AEOI") and the U.S. Foreign Account Tax Compliance Act ("FATCA")) on the part of the Company or on the part of the Company's group.

本人 / 吾等同意公司及 / 或公司集團任何成員可向任何司法管轄區的政府或稅務當局披露本人 / 吾等及任何同意人士的稅務資料,以確保公司或公司集團遵守合規責任(包括但不限於任何實施的自動交換財務帳戶資料(「自動交換資料」)和美國海外帳戶稅收合規法案(「合規法案」)的法律、法規及國際協定)。

- 合規責任(包括但不限於任何實施的自動交換財務帳戶資料(「自動交換資料」)和美國海外帳戶稅收合規法案(「合規法案」)的法律、法規及國際協定)。
 I/We hereby waive, and, where reasonably required by the Company, agree to procure any other Consenting Person(s) to waive, any applicable restrictions which would otherwise hinder the ability of the Company and/or any other members of the Company's group to disclose Tax Information in the manner as described in this paragraph 11(b) of the Tax Obligations Statement (or in the relevant policy provision relating to foreign tax reporting and withholding obligations).

 本人 / 百等華此放棄並(倘公司合理要求)同意促使其他同意人士放棄可能妨礙公司及 / 或 [公司集團] 其他成員按稅務責任聲明第 11(b) 段 (或有關外地稅務呈報或稅務責任的相關保單條文) 所述方式披露稅務資料的任何相關限制。

 I/We agree that the Company may directly require any other Consenting Person to agree to the disclosure as described in this paragraph 11(b) of the Tax Obligations Statement (or in the relevant policy provision relating to foreign tax reporting and withholding obligations) and/or waive any otherwise applicable restrictions on such disclosure, if the Company reasonably considers appropriate.

 本人 / 百等同意,倘公司有理由認為恰當,可毋須通過本人 / 吾等直接要求其他同意人士同意按稅務責任聲明第 11(b) 段 (或有關外地稅務呈報或稅務責任的相關保單條文) 所述作出按露及 / 或放棄相關按露的相關限制。
- Failure to Provide Information

無法提供資料

I/We agree that: 本人 / 吾等同意:

- where I/we fail to comply with my/our obligations under paragraph 11(a) of the Tax Obligations Statement; or 倘若本人 / 吾等不遵守稅務責任聲明第 11(a) 段所載本人 / 吾等的責任;或
- where any of the other Consenting Persons fails to comply with the Company's requirements described in paragraph 11(a)(iv) or 11(b)(iii) of the Tax Obligations Statement; or 倘若其他同意人士不遵守稅務責任聲明第 11(a)(iv) 段或第 11(b)(iii) 段所述貴公司的要求;或
- where the Personal Information (regardless of whether it is in relation to me/us or any other Consenting Person) is inaccurate, incomplete or not promptly updated; or 倘若個人資料 (不論是否與本人 / 吾等或任何其他同意人士有關) 不準確、不完整或未有及時更新;或
- for whatever reason the Company and/or any other members of the Company's group is prevented (under Hong Kong law or otherwise) from making the disclosure of the Tax Information of myself/ourselves and/or any other Consenting Person(s) to the relevant government or tax authorities in the relevant jurisdiction, 公司及 / 或 [公司集團] 任何其他成員不論任何原因 (根據香港法律或其他原因) 遭禁止向相關司法管轄區的相關政府或稅務當局披露本人 / 吾等及 / 或任何其他同意人士的稅務資料,

the Company may take one or more of the following actions at any time:公司可按其需要隨時採取以下一項或多項行動:

- deduct from or withhold part of any amounts payable under the Policy; 扣滅或不予支付任何保單應付款項;
- (II) terminate the Policy (in which case, the Company will pay me/us the Policy Account Value less any applicable fees and charges and less any withholding or deductions required pursuant to the Compliance Obligations); and 終止保單 (在此情況下,公司會向本人 / 吾等支付經扣減任何相關費用及收費和根據合規責任所指定的任何不予支付或扣減款項後的保單賬戶價值);及
- (III) provide (whether before or after the termination of the Policy) the Tax Information relating to me/us and/or any other Consenting Persons to such government or tax authority(ies) in any jurisdiction, 向任何司法權區的相關政府或稅務當局提供 (不論在保單終止之前或之後) 有關本人 / 吾等及 / 或任何其他同意人士的稅務資料,

as may be required for the Company to ensure its compliance with the Compliance Obligations. 如公司按其需要以確保其遵守合規責任。

Confirmations

I/We confirm and agree that: 本人 / 吾等確認並同意:

- any agreement, waiver, confirmations given in, or to be given pursuant to, the Tax Obligations Statement or the relevant policy provision relating to foreign tax reporting and withholding obligations are irrevocable; 根據稅務責任聲明或有關外地稅務呈報或稅務責任的相關保單條文作出的任何協議、放棄及確認均不可撤銷; (i)
- 根據稅務負性實明或有關外地稅務實報或稅務負性的相關除單條文件面的性刊励嚴、放棄及確認另不可撤銷, neither the Company nor any member of the Company's group shall be liable for any costs or loss that I/we (or any other Consenting Persons) may incur because of the Company and/or any member of the Company's group taking any actions permitted by or exercising any powers under the Tax Obligations Statement or the relevant policy provision relating to foreign tax reporting and withholding obligations; 由於公司或恒安標準人壽(亞洲)有限公司任何成員根據稅務責任聲明或有關外地稅務呈報或稅務責任的相關保單條文所容許或授權採取的行動引致本人 / 吾等(或任何其他同意人士)蒙受的任何費用或損失,公司或恒安標準人壽(亞洲)有限公司任何成員均毋須負責;
- 音等(现任何其他问意人工)家交的任何真用取損失,公司取得支持率人裔(显加)有限公司任何成真与牙須負責,
 //we must obtain or, as the case may be, have obtained the requisite consent from each Consenting Person for the provision of his/her Tax
 Information to the Company and the disclosure of any of such Tax Information by the Company and/or any of the Company's affiliates under
 paragraph 11(b) of the Tax Obligations Statement (or the relevant policy provision relating to foreign tax reporting and withholding obligations);
 本人 / 吾等必須或(視乎情況而定)已經取得每位同意人士所需的同意,以提供被等的稅務資料予公司,而公司及 / 或公司任何聯屬公司可根據稅務責任
 聲明第 11(b) 段(或有關外地稅務主報或稅務責任的相關保單條文)披露任何該等稅務資料;
- (iv)
- (v)
- 聲明第 11(b) 段(或有關外地稅務皇報或稅務責任的相關保單條文)披露任何該等稅務資料;
 l/we must inform each Consenting Person of the Company's powers under the Tax Obligations Statement (or the relevant policy provision relating to foreign tax reporting and withholding obligations);
 本人 / 吾等必須將稅務責任聲明(及有關外地稅務呈報或稅務責任的相關保單條文)所載公司的權力告知每位同意人士;
 the Tax Obligations Statement (and the relevant policy provision relating to foreign tax reporting and withholding obligations) are without prejudice, and in addition, to any of the Company's rights or powers under any other policy provisions or this application form; and 稅務責任聲明(及有關外地稅務呈報或稅務責任的相關保單條文)並不影響任何其他保單條文或本申請表格所載公司的權利或權力並屬於以外的權力;及 Where there is any withdrawal or payment under the Tax Obligations Statement (or the relevant policy provision relating to foreign tax reporting and withholding obligations) for any reason, the withdrawal amount or payment amount will at all times be subject to the exercise of the Company's powers under paragraph 11(c)(l) and (ll) of the Tax Obligations Statement; 無論任何原因凡有稅務責任聲明(或有關外地稅務呈報及稅務責任的相關保單條文)所指的任何提款或付款,提款金額或付款金額均任何時間須受限於稅務責任聲明第 11(c)(l) 及 (ll) 段所公司權力的行使; the Tax Obligations Statement shall form an integral part of the Policy. 稅務責任聲明即屬保單的一部分。 (vi)
- the Tax Obligations Statement 稅務責任聲明即屬保單的一部分
- 12. If there is any inconsistency between the English and Chinese versions of this Statement, the English version shall prevail. 中英文版本如有歧異,概以英文版為準。

Heng An Standard Life (Asia) Limited (662679) is registered in Hong Kong at 12/F., Lincoln House, Taikoo Place, 979 King's Road, Quarry Bay, Hong Kong. Authorised by the Insurance Authority of Hong Kong to write Class A, Class C and Class I long term business in Hong Kong.

恒安標準人壽 (亞洲) 有限公司 (662679) 的註冊公司地址為香港鰂魚涌英皇道 979 號太古坊林肯大廈 12 樓,其已獲香港的保險業監管局授權於香港承保 A 類、C 類及 I 類之長 期業務。

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