

保單編號 Policy Number	
保單權益人姓名 Name of Policyowner	
受保人姓名 Name of Life Insured	

**A. 重要指示**  
**Important Notes**

**適用於「晉盈」終身壽險系列**

**Applicable for Grand Fortune Whole Life Protection Series**

- 此津貼僅就一次(i)於香港執業的律師事務所或會計師事務所為保單權益人提供之專業財富傳承稅務或法律諮詢服務或(ii)保單權益人於香港合資格的健康檢查中心進行之身體檢查作一次性支付。  
The Allowance is only payable once either for one time of (i) professional consultation service on Policyowner's tax or legacy planning provided by a legal firm or an accounting firm practicing in Hong Kong or (ii) health check-up received by Policyowner from a qualified service provider in Hong Kong.
- 每一保單只可獲取此津貼一次。  
The Allowance is only payable once per policy.
- 此津貼以實報實銷之形式發放不多於港元 5,000／美元 625(適用於保單繕發時繳付保費總額為美元 500,000 以下之保單)或港元 8,000／美元 1,000(適用於保單繕發時繳付保費總額為美元 500,000 或以上之保單)。  
The Allowance is paid out no more than HKD5,000/USD625 (applicable to the Policy with Total Premiums Paid of below USD500,000 while the policy is issued) or HKD8,000 / USD1,000 (applicable to the Policy with Total Premiums Paid of USD500,000 or above while the policy is issued) on a reimbursement basis.
- 於申請及發放此津貼時保單必須仍然生效。  
The policy must be in force at the time when the Allowance is being applied for and paid out.
- 此津貼只適用於首 3 個保單年度內進行之合資格諮詢服務／合資格身體檢查，任何逾期使用或不合資格之諮詢服務／身體檢查將不獲接納。  
The Allowance is only applicable to the Eligible Consultation Services / the Eligible Health Check-up conducted within the first 3 policy years. Any consultation services / health check-up conducted after the first 3 policy years or ineligible consultation services / health check-up will not be accepted.
- 香港人壽保險有限公司(「香港人壽」)保留隨時更改或終止此津貼，以及修改任何有關條款及細則而毋須對客戶作出預先通知或為此提供原因之權利。  
Hong Kong Life Insurance Limited ("Hong Kong Life") reserves the right to change or terminate the Allowance and amend any terms and conditions of the Allowance at any time without giving prior notice to client or reason therefor.

**適用於「創富未來」多元貨幣計劃**

**Applicable for Wealth Accelerator Multi-Currency Plan**

- 此津貼僅就一次(i)由保單權益人於香港的持牌信託公司成立之保險金信託所收取之年費或(ii)於香港執業的律師事務所或會計師事務所為保單權益人提供之專業財富傳承稅務或法律諮詢服務或(iii)保單權益人於香港合資格的健康檢查中心進行之身體檢查作一次性支付。  
The Allowance is only payable once either for one time of (i) annual fee of insurance standby trust set up by the Policyowner in a licensed trustee company in Hong Kong or (ii) professional consultation service on policyowner's tax or legacy planning provided by a legal firm or an accounting firm practicing in Hong Kong or (iii) health check-up received by policyowner from a qualified service provider in Hong Kong.
- 此津貼以每一保單作單位，每一保單只可獲取此津貼一次。  
The Allowance is offered in terms of each policy and is only payable once per policy.
- 根據保單「保單分拆選項」條款而進行保單分拆，保單及每一張分拆保單之最高津貼金額將根據由保單轉移至每張分拆保單的基本金額之指定分配比例作出相應調整(定義見利益條款)。  
If there is policy split according to the "Policy Split Option" clause, the maximum allowance amount payable in the Policy and each of the Split Policy(ies) will be adjusted accordingly in accordance to the designated portion of the Principal Amount to be transferred from the Policy to each of the Split Policy(ies) (defined in benefit provisions).
- 根據保單「指定後續受保人」條款而更改受保人，指定保單之最高津貼金額將根據保單權益人闡明之指定比例作出相應調整(定義見利益條款)。  
If there is change of Life Insured according to the "Designation of Contingent Life Insured" clause, the maximum allowance amount payable in the Designated Policy(ies) will be adjusted accordingly in accordance to the designated portion (defined in benefit provisions).



<b>重要指示(續)</b> <b>Important Notes (Con't)</b>	
5.	<p>此津貼以實報實銷之形式發放不多於港元 5,000 (適用於保單繕發時基本金額為港元 500,000 - 港元 999,999 / 美元 62,500 - 美元 124,999 / 人民幣 450,000 - 人民幣 899,999 之保單)或港元 8,000 (適用於保單繕發時基本金額為港元 1,000,000 / 美元 125,000 / 人民幣 900,000 或以上之保單)。</p> <p>The Allowance is given out no more than HKD5,000 (applicable to the Policy with Principal Amount of HKD500,000 – HKD999,999 / USD62,500 – USD124,999 / RMB450,000 – RMB899,999 while the policy is issued) or HKD8,000 (applicable to the Policy with Principal Amount of HKD1,000,000 / USD125,000 / RMB900,000 or above while the policy is issued) on a reimbursement basis.</p>
6.	<p>於申請及發放此津貼時保單必須仍然生效。</p> <p>The policy must be in force at the time when the Allowance is submitted and given out.</p>
7.	<p>此津貼包含於合資格人壽保險計劃內，但並不屬於保單的保障範圍。</p> <p>The Allowance is included in the Eligible Life Insurance Plan but not part of the coverage.</p>
8.	<p>此津貼並不應視為香港人壽鼓勵或建議成立保險金信託、進行財富傳承稅務或法律諮詢或健康檢查。客戶應就個人情況，決定上述項目是否符合其需要。客戶亦可於作出任何決定前先諮詢獨立及專業的意見。</p> <p>The Allowance should not be treated as an encouragement or a recommendation from Hong Kong Life to establish an insurance standby trust, conduct tax or legal advisory for legacy planning or undergo a health check-up. Customer should assess his/her personal situation and determine whether the above mentioned items meet his/her needs. Customer may also seek independent and professional advice before making any decision.</p>
9.	<p>此津貼並非保證，香港人壽保留隨時更改或終止此津貼，以及修改任何有關條款及細則而毋須對客戶作出預先通知或為此提供原因之權利。</p> <p>The availability of the Allowance is not guaranteed. Hong Kong Life reserves the right to change or terminate the Allowance and amend any terms and conditions of the Allowance at any time without giving prior notice to client or reason therefor.</p>
10.	<p>合資格保險金信託／合資格諮詢服務／合資格身體檢查由第三方服務供應商提供，香港人壽恕不負責或承擔任何責任。</p> <p>The Eligible Insurance Standby Trust / the Eligible Consultation Services / the Eligible Health Check-up are provided by third-party service provider. Hong Kong Life shall not be liable or responsible for all related matters.</p>
11.	<p>此津貼及其相關條款及細則只適用於香港特別行政區境內及受香港法律所規管。</p> <p>This Allowance and its relevant terms and conditions are applicable within the Hong Kong Special Administrative Region only and governed by the law of Hong Kong.</p>
12.	<p>如有任何爭議，香港人壽保留最終決定權。</p> <p>Hong Kong Life reserves the right of final decision in case of any dispute.</p>

<b>B. 行政規定及要求</b> <b>Administration Rules and Requirements</b>	
1.	<p>所有簽署必須與香港人壽之紀錄相符。</p> <p>All signatures must correspond to the records of Hong Kong Life.</p>
2.	<p>保單權益人可於保單冷靜期屆滿後及首 3 個保單年度內申請此津貼。</p> <p>Policyowner may, apply for the Allowance after the expiry of policy cooling off period and within the first 3 policy years.</p>
3.	<p>請於使用服務日起計 30 天內將已簽署的申請書及附有保單權益人姓名之正本收據及所需文件（如有）交回香港人壽。</p> <p>Please return the signed form, original receipt with Policyowner's name and required documents (if any) to Hong Kong Life within 30 days from the date of the service(s) used.</p>
4.	<p>服務津貼將根據有關保單所提供之適用貨幣作支付，如服務收據之付款貨幣為其以外之其他貨幣，兌換率將以香港人壽當時釐定之匯率為準（如適用）。</p> <p>The allowance will be paid in the currency offered by the relevant policy. If the payment on the service receipt is made in other currency, the exchange rate will be subject to the current rate at such time as determined by Hong Kong Life (if applicable).</p>
5.	<p>行政規定及要求如有更改，恕不另行通知。</p> <p>Administration rules and requirements are subject to change without prior notice.</p>

<b>C. 所需文件</b> <b>Required Documents</b>	
1.	<p>請遞交保單權益人的身分證明文件副本。</p> <p>Please submit a copy of identification document of the Policyowner.</p>
2.	<p>請遞交服務之正本收據及所需證明文件（如有）。</p> <p>Please submit the original receipt of service and the required supporting documents (if any).</p>

D. 申請之津貼 Requested Allowance			
<input type="checkbox"/> 財富傳承稅務或法律諮詢津貼 Tax or Legal Advisory Allowance for Legacy Planning			
<input type="checkbox"/> 健康檢查津貼 Health Check-up Allowance			
<input type="checkbox"/> 保險金信託津貼 Insurance Standby Trust Allowance			

E. 支票貨幣及領取方式 Cheque Currency and Delivery Method			
支票貨幣 Cheque Currency	<input type="checkbox"/>	保單貨幣 Policy Currency	<input type="checkbox"/> 港幣 HKD
領取方式 Delivery Method	<input type="checkbox"/>	經代理銀行轉交 Deliver through servicing bank	<input type="checkbox"/> 郵寄至通訊地址 Send to correspondence address

F. 簽署及簽署日期 Signature and Signing Date				
本人/我們已細閱、完全明白及同意上述之重要指示、行政規定及要求及所需文件。 I/We hereby confirm that I/We have read, fully understood and agreed the Important Notes, the Administration Rules and Requirements and Required Documents.				
<div></div> 保單權益人簽署 Signature of Policyowner		日 DD	月 MM	年 YYYY
<div></div> 受讓人簽署（如適用） Signature of Assignee (if applicable)		日 DD	月 MM	年 YYYY
<div></div> 保險中介人姓名，編號及簽署（如適用） Name, Code and Signature of Insurance Intermediary (if applicable)		日 DD	月 MM	年 YYYY
<div></div> 見證人姓名及簽署（如適用） Name and Signature of Witness (if applicable)		日 DD	月 MM	年 YYYY

S.V.	
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