抵押性權益轉讓詳情 (只適用於個人受讓人) Details of Collateral Assignment (Applicable for Individual Assignee)



申請 / 保單編號 Application / Policy Number	
擬保單權益人/保單權益人姓名 Name of Proposed Policyowner / Policyowner	
代理銀行 Servicing Bank	

重要指示

Important Notes

如上述擬保單權益人/保單權益人(下稱為「轉讓人」)考慮將上述保單轉讓作抵押予上述受讓人以作貸款(無論是普通貸款或保單逆按),請小心閱讀以 下重要指示。在轉讓人簽署本表格前,建議先尋求獨立法律或專業意見。香港人壽保險有限公司 (「香港人壽」) 對有關貸款或權益轉讓或其有效性、 可執行性或合法性之意見均不負上任何責任。

If the above Proposed Policyowner / Policyowner (hereinafter called "Assignor") is considering assigning the above policy to the above Assignee as collateral for a loan (whether it is a usual loan or under a policy reverse mortgage), please carefully read the Important Notes below. The Assignor is recommended to seek independent legal or professional advice before signing this form. Hong Kong Life Insurance Limited ("Hong Kong Life") assumes no responsibility for advising on any matters relating to the loan or the collateral assignment or their validity, enforceability or legality.

重要指示

Important Notes

- 根據貸款的條款 (無論是普通貸款或保單逆按),在某些情況下 (例如貸款未有及時償還或保單逆按貸款到期),受讓人可能執行保單或指示香港 人壽(i)於扣除任何保單欠款金額後,將該筆款項 (包括任何退保或現金價值) 直接支付予受讓人,或(ii)遵從所有由受讓人於轉讓保單下所行 使之權利,包括但不限於在冷靜期內取消保單,退保及提取保單價值之權利。換言之,保障將會被減少,或甚至下跌至零。轉讓人應向受讓人 徵詢因貸款 (無論是普通貸款或保單逆按) 可能影響轉讓人權利的意見。
 - Under the terms of the loan (whether it is a usual loan or under a policy reverse mortgage), upon occurrence of certain events (such as where loan repayment is in default or, in the case of policy reverse mortgage, the loan is due), the Assignee may enforce the policy and instruct Hong Kong Life to: (i) pay directly to it all such money as are payable under the Assignor's policy (including any surrender or cash value), after deduction of any amount that the Assignor may owe under the policy, or (ii) comply with all of its directions insofar as the Assignee is exercising its rights of the policy under the Assignment, including but not limited to the right to cancel the policy within the cooling-off period, surrender the policy and make cash withdrawals under the policy. As a result, the benefit coverage will be reduced or even may become zero. The Assignor should therefore seek advice from the Assignee on how the loan (whether it is a usual loan or under a policy reverse mortgage) may affect the Assignor's rights under the policy.
- 2. 香港人壽沒有參與是次權益轉讓並且沒有獲得任何利益。 Hong Kong Life does not participate nor has any interest in the Assignment.
- 3. 在轉讓保單作為抵押前,轉讓人必須閱讀及明白受讓人所訂定有關權益轉讓的條款及細則。 The Assignor should read and understand the terms and conditions of the Assignment set out by the Assignee before using the Assignor policy as security.

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香港人壽保險有限公司 Hong Kong Life Insurance Limited

B. 抵押性轉讓權益詳情 Collateral Assignment Details								
轉讓原因 (請在適合方格内「✓」)								
	rpose of Assignment (Pl	_	riate)					
	· F(貸款				保	 單融資		
	Loan		Premium Financing			licy Financing		
受護	夏人資料					-,		
	gnee Information							
	姓名	須與身份證明文件相	同as shown on Identity Document					
	Full Name	英文	姓		中文	姓		
		In English	Surname		In Chinese	Surname		
			名			名		
			Given Name			Given Name		
2.	身份證明文件號碼	香港居民	香港永久性居民身份證		香港居民身份證 號碼			
	Identity Document	HK Resident	HK Permanent Resident ID Ca	rd	HK Resident ID	Card No.		
	No		身份證		護照	號碼		
		非香港居民	ID Card		Passport	No.		
		Non-HK Resident	簽發國家		有效期至	/ /		
			Country of Issue		Expiry Date	日dd 月mm年y	ууу	
3.	姓別	□ 男 □	女	4.	出生日期/年齡	/ /		
	Sex	Male	Female		Date of Birth/Age	日dd 月mm 年yyyy	年齡Age	
5.	出生國家			6.	國籍			
	Country of Birth				Nationality			
7.	通訊地址	室	樓數 座數		大廈/屋邨名稱			
	Correspondence	Flat/Room			Name of Buildin			
Address 街道名稱及號數/地段路數			城市	國家				
	₩&&なたことでい!	Name & No. of Street/Lot No.		⊐C. 4E	City	Country		
8.	聯絡資料 Contact Particulars	香港電話號碼 HK Tel. No.	住宅 Home			辦公室 Office		
	Contact Particulars	國際區號	nome	Mobile O A A A A A A A A A A A A A A A A A A		Office		
		Country Code						
		電郵地址:			13003 1011 1101			
		Email Address						
9.	僱主名稱			10.	業務性質			
	Name of Employer				Nature of Business			
11.	辦公室地址	郵政信箱恕不接受 P.O. Box address is not accepted						
Office Address 室 樓數 座數 大廈/屋邨名稱								
		Flat/Room			Name of Buildin			
		街道名稱及號數/地段路數 Name & No. of Street/Lot No.			城市 國家			
					City Country			
12.	職業							
	Occupation							
13.	13. 與擬保單權益人/保單權益人之關係							
	Relationship to Proposed Policyowner/Policyowner							

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香港人壽保險有限公司 Hong Kong Life Insurance Limited

行政規定及要求

Administration Rules and Requirements

- 所有已簽署的表格及所需文件,請於簽署日期起14個工作天內交回香港人壽。 1.
 - Please return signed forms and required documents to Hong Kong Life within 14 working days from the date of signing.
- 2. 所有簽署必須與香港人壽之紀錄相符。
 - All signatures must correspond to that in Hong Kong Life's records.
- 3. 行政規定及要求如有更改,恕不另行通知。
 - Administration rules and requirements are subject to change without prior notice.

所需文件

Required Documents

neganica bosanichio						
	轉讓人與受讓人之貸款證明。如	重要資料聲明書-保費融資	轉讓人之自我證明表格 -個人/	轉讓人之IRS之W-8表格/W-9表		
	轉讓保單契約或及相關轉讓通知	Important Facts Statement	實體/控權人(如適用)	格與稅務編號(如適用)		
	書	– Premium Financing	Assignor's Self-Certification Form	Assignor's IRS Form W-8/Form W-9		
	Proof of loan between the Assignee &		Individual/Entity/Controlling Person	with TIN Number(if applicable) #2		
	the Assignor. E.g. Assignment of		(if applicable)#1			
	Insurance Policy/Notice of Assignment					
貸款	·/		./	,		
Loan	·		·	•		
保費融資	./	./	./	./		
Premium Financing	·	·	·	·		
保單融資				-/		
Policy Financing	· ·		•	v		

^{#1} 只適用於未曾向香港人壽提供自我證明或稅務居民身份有任何改變的人士

Applicable to person whose self-certification was never provided to Hong Kong Life or there is any change in circumstance relating to the status of tax residency(ies)

#2 只適用於稅務居民身份為美國並未曾向香港人壽提供美國國稅局之W-8(如非美國公民)或W-9(如美國公民)表格或稅務居民身份改變為美國的人士 Applicable to person whose tax residency is United States but has never provided Form W-8(for non-US citizen) or W-9(for US citizen) from the Internal Revenue Service ("IRS") of the United States to Hong Kong Life or the tax residency has been changed to United States

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C 2290 2882 ☑ HongKongLifeCS@hklife.com.hk
F 4 HongKongLife 香港人書
② 2530 5682



香港皇后大道中183號中遠大廈15樓 15/F Cosco Tower, 183 Queen's Road Central, HK

E. 收集個人資料聲明

Personal Information Collection Statement

香港人壽保險有限公司在收集、使用、轉移、保留及儲存個人資料時,會致力遵守《個人資料(私隱)條例(第486章)》(「條例」)。 Hong Kong Life Insurance Limited is committed to complying with the Personal Data (Privacy) Ordinance (Cap. 486) (the "Ordinance") in relation to the collection, use, transfer, retention and storage of personal data.

1. 收集個人資料的重要性

Importance of Personal Data Collection

客戶及其他個別人士 (下稱「資料當事人」)需要不時向香港人壽提供個人資料,使香港人壽可提供保險及 / 或有關的產品及服務予資料 當事人及/ 或處理有關香港人壽簽發的保單之索償、資料當事人的任何和所有要求、查詢及投訴。提供個人資料予香港人壽純屬自願性 質,但若未能按要求提供所需的個人資料,可能會導致香港人壽無法處理保險申請或提供或繼續提供保險產品及服務及/或其他相關產品 及 / 或服務予資料當事人。

From time to time, it is necessary for customers and various other individuals (collectively referred to as "data subject(s)") to provide personal data to Hong Kong Life in connection with the provision of insurance and/or related products and services to the data subjects and/or the processing of claims under insurance policies issued by Hong Kong Life and any and all of the requests, enquiries and complaints from the data subjects. The provision of such personal data is voluntary, but failure to do so may result in Hong Kong Life being unable to process the insurance applications or to provide or continue to provide the insurance products and services and/or the related products and/or services to the data subjects.

2. 個人資料收集目的

Purposes of Collecting Personal Data

香港人壽收集所需的個人資料是為處理投保或其他保險或財務產品及 / 或服務之申請,及提供所有關於該等申請之繼後服務、進行身份審 查或信用審查、處理理賠或其有關分析、處理權益轉讓協議、統計或精算研究用途、訴訟、通訊、內部或外界審計、提供客戶服務(包括 但不限於處理查詢及投訴)及有關活動、資料核對、與任何因香港人壽提供的產品及 / 或服務之機構或人士溝通、促使香港人壽可與實在 或建議的受讓人、或香港人壽對資料當事人的權利的參與人或附屬參與人評核意圖成為轉讓、參與或附屬參與的交易及為符合根據下述適 用於香港人壽或期望香港人壽遵從有關披露及使用資料之責任、規定或安排(包括但不限於):

Hong Kong Life collects necessary personal data for the purposes of processing insurance application or any other applications for insurance or financial related products and/or services and providing all on-going services relating to such applications, conducting identity or credit checks, claim processing or any analysis of it, processing of the Assignment, statistical or actuarial research, litigation, communication, internal or external audit, providing customer services (including but not limited to, processing enquiries and complaints) and related activities, data matching, communicating with any relevant organization or person in respect of any products and/or services provided by Hong Kong Life, enabling an actual or proposed assignee of Hong Kong Life, or participant or sub-participant of Hong Kong Life's rights in respect of the data subjects to evaluate the transaction intended to be the subject of the Assignment, participation or sub-participation, and complying with the obligations, requirements or arrangements for disclosing and using data that apply to Hong Kong Life or that it is expected to comply according to the following (including but not limited to):

- 在香港境內或境外之現存及將來對其具約束力之任何本地或海外法律; any local or foreign law binding on or applying to it within or outside Hong Kong existing currently and in the future;
- 在香港境內或境外之現存及將來並由任何法定、監管、政府、稅務、執法或其他機構,或由金融服務提供者之行業的團體或組織所 (b) 發出或提供之任何指引或指導; any guidelines or guidance given or issued by any legal, regulatory, governmental, tax, law enforcement or other authorities, or industry
- bodies or associations of financial services providers within or outside Hong Kong existing currently and in the future; (c) 香港人壽因其金融、商業、營業或其他利益或活動處於或關連於相關本地或海外的法定、監管、政府、稅務、執法或其他機構或金 融服務提供者之行業團體或組織之司法管轄區而須承擔或獲施加與本地或海外之法定、監管、政府、稅務、執法或其他機構或金融
 - 中介人、或金融服務提供者之行業團體或組織之間的現有或將來之任何合約承諾或其他承諾及/或香港人壽遵守適用稅務法律的義 務,包括但不限於根據香港與美國之間的跨政府協議之《外國賬戶稅務合規法案》和經濟合作暨發展組織作出的規定(包括關於為 履行共同申報準則的主管機關協議的監管機制)。

any present or future contractual or other commitment with local or foreign legal, regulatory, governmental, tax, law enforcement or other authorities or financial intermediaries, or industry bodies or associations of financial services providers that is assumed by or imposed on Hong Kong Life by reason of its financial, commercial, business or other interests or activities in or related to the jurisdiction of the relevant local or foreign legal, regulatory, governmental, tax, law enforcement or other authorities, or industry bodies or associations and/or the obligations of Hong Kong Life to comply with applicable tax laws including but not limited to the Foreign Account Tax Compliance Act pursuant to the Intergovernmental Agreement between Hong Kong and the United States and the provisions issued by the Organization for Economic Co-operation and Development (including the regulatory scheme relating to its Competent Authority Agreement to implement its Common Reporting Standard).

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收集個人資料聲明 (續) E.

Personal Information Collection Statement (Con't)

個人資料的轉移 3.

Transfer of Personal Data

香港人壽或會就上述目的將任何收集或持有之個人資料儲存、使用、透露、發放及 / 或轉交予(不論在香港或海外)任何從事與保險或再 保險業務有關之公司、中介人、第三方管理人、第三方服務供應商(包括但不限於保險公司、銀行、證券、商品及投資公司、消費卡或信 用卡發行公司、第三方獎賞、年資獎勵、聯名合作及優惠計劃供應商、香港人壽之聯名合作夥伴、律師、會計師,以及其他提供行政、電 訊、電腦、付款、印刷、贖回或其他服務以令香港人壽的業務可以運作的第三方服務供應商)、理賠調查員、醫療賬單審查公司、有關提 供保險業務服務之公司、專業顧問、研究人員、政府機構、任何保險業組織或聯會、信貸資料服務機構、收賬代理、伙伴金融機構、任何 對香港人壽有保密責任並已承諾作出保密有關資料的其他人士、香港人壽的任何實在或建議的受讓人或就香港人壽對資料當事人的權利的 參與人或附屬參與人或承讓人、符合法例或法庭頒令的資料披露規定之單位、或根據監管或其他有關機構所發出的指引而作出披露之單 付。

Any personal data collected or held by Hong Kong Life may be stored, used, disclosed, released and/or transferred (whether within or outside Hong Kong) by Hong Kong Life to any other companies carrying on insurance or reinsurance related businesses, intermediaries, third party administrators, third party service providers (including but not limited to insurers, banks, securities, commodities and investment companies, charge or credit card issuing companies, third party rewards, loyalties, co-branding and privileges programme providers, co-branding partners of Hong Kong Life, lawyers, accountants, and other third party service providers who provide administrative, telecommunications, computer, payment, printing, redemption or other services to Hong Kong Life for its business operations), claims investigators, medical bill review companies, other service providers providing services relevant to insurance business, professional advisors, researchers, government authorities, any associations or federations of insurance companies, credit reference agencies, debt collection agencies, partnering financial institutions, any other person under a duty of confidentiality to Hong Kong Life which has undertaken to keep such data confidential, any actual or proposed assignee of Hong Kong Life or participant or sub-participant or transferee of Hong Kong Life's rights in respect of the data subjects, any organizations which meet data disclosure requirements imposed by law or court orders or pursuant to guidelines issued by regulatory or other relevant authorities, for any of the above purposes.

4 查詢及改正資料權利

Data Access and Correction Right

根據條例規定,資料當事人有權知悉香港人壽是否持有他的個人資料及有權查閱該等資料。而香港人壽或會收取處理有關資料的合理費 用。若認為香港人壽持有有關他的個人資料不準確,資料當事人有權要求更改他的個人資料。有關要求查閱及更改個人資料,或對以上的 個人資料收集聲明有任何疑問,請致電2290 2882或以書面形式致函香港皇后大道中183號中遠大廈15樓,向香港人壽資料保護主任提出。

In accordance with the Ordinance, the data subject has the right to check whether Hong Kong Life holds his personal data and the right of access to such data. Hong Kong Life may charge a reasonable fee for the processing of such data. If the data subject believes that his personal data held by Hong Kong Life is incorrect, the data subject has the right to request for correction of his personal data. Any enquiries regarding request for accessing and correction of personal data or the Personal Information Collection Statement, please call us at 2290 2882 or make a written request to the Corporate Data Protection Officer of Hong Kong Life at 15/F, Cosco Tower, 183 Queen's Road Central, Hong Kong.

香港人壽保留權利可隨時且在無須通知的情況下修訂本個人資料收集聲明。若香港人壽更改個人資料收集聲明,香港人壽會更新網站上的 個人資料收集聲明(www.hklife.com.hk)或以書面形式通知。任何有關更改將在刊登後即時生效。

Hong Kong Life reserves the right to amend the Personal Information Collection Statement at any time without any prior notice. If Hong Kong Life changes its Personal Information Collection Statement, Hong Kong Life will either update the Personal Information Collection Statement on its website at www.hklife.com.hk or provide a notification in writing. Should there be any changes to the Personal Information Collection Statement in the future, such changes will become effective upon posting.

我/我們為上述轉讓人及/或受讓人確定我/我們已閱讀、明白及同意「個人資料收集聲明」。

I/We, the above-mentioned "Assignor" and/or Assignee, confirm that I/we have read, understood and agreed the Personal Information Collection Statement.

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聲明

Declarations

我/我們為上述轉讓人,謹此確認並知悉:

I/We, the above-mentioned "Assignor", do hereby confirm and acknowledge that:

- 我/我們將有責任遵守就我 / 我們為公民或居民或作為住所的國家之有關法律、監管政策及 /或其他法例要求; I/we shall be responsible for observing and complying with any applicable law, regulatory policy and/or other statutory requirement of the country of my/our citizenship, residence or domicile:
- 2. 如有疑問,我/我們將徵詢獨立專業顧問有關購買、持有、提款、贖回或以其他方式處置所發保單或行使保單內的權利可能引致的稅務、法律或 法規上的後果。香港人壽沒有就有關我/我們之稅務或個人之公民身份提供任何意見;
 - if in doubt, I/we shall consult independent professional advisers concerning possible tax, legal or regulatory consequences of purchasing, holding, withdrawing, redeeming or otherwise disposing the policy issued or exercising any rights of the policy. Hong Kong Life has not provided any advice to me/us around tax or a person's citizenship status;
- 香港人壽有權,就如需要並在法律許可的範圍內,提供有關我/我們的個人資料和其他有關我/我們的保單或於本表格上所載之投資或以其他方式 刊載的其他資料予政府部門、監管機構、法院、法庭、行政委員會及/或執法機構 (包括本地及海外)。香港人壽也會就上述政府部門、監管機 構、法院、法庭、行政委員會及/或執法機構所提出之任何問題及/或查詢作出回答,及在適當的情況下,會主動提供報告,以符合有關法律,法 規和守則/行為。我/我們明白,如果我/我們拒絕給予上述之明示同意予香港人壽,香港人壽將無法出售任何保險產品, 及提供任何服務給我/我 們;
 - Hong Kong Life shall be entitled to, insofar as necessary and to the extent permitted by laws, furnish the relevant governmental authorities, regulator(s), court(s), tribunal(s), administrative board(s) and/or law enforcement bodies (both local and overseas) with any of my/our personal information and other information relating to my/our policy(ies) or investments contained in this form or otherwise. Hong Kong Life may also answer any question or inquiry received from the said governmental authorities, regulator(s), court(s), tribunal(s), administrative board(s) and/or law enforcement bodies, and as it sees appropriate, makes any report at its own initiative in order to comply with relevant laws, regulations and codes of practice/conduct. I/We understand that Hong Kong Life will not be able to sell any insurance product to me/us and provide any service if I/we refuse to give the said express consent;
- 我/我們授權香港人壽在受讓人不時合理要求下,向受讓人披露此保單之保證現金價值及任何可能對受讓人於此保單下之權利有不利影響的更改; I/we authorize Hong Kong Life to disclose to the Assignee as the Assignee may reasonably request from time to time the Guaranteed Cash Value of the policy and any change thereof which may adversely affect the right of the Assignee under the policy:
- 我/我們謹此宣告由受讓人所簽發之收據,無論在何種情況下都將解除香港人壽之保單的所有責任。 5. I/we further declare that a receipt signed by the Assignee shall in all cases, fully discharge Hong Kong Life from its liabilities and obligations under the policy in respect of which receipt is given.

我/我們確認已細閱、完全明白(有關保單被用作為抵押性權益轉讓的風險及限制)及同意重要指示及聲明。我/我們有權以書面形式致函香港皇后大道中 183 號中遠大廈 15 樓,向香港人壽保險有限公司索取保單的最新保險利益說明。

I/We confirm that I/we have read, fully understood (in particular the risks and limitations relating to policies to be used as collateral assignment) and agreed to the Important Notes and Declarations. I/We have the right to request for updated illustration documents of the policy by sending a written request to Hong Kong Life Insurance Limited, 15/F, Cosco Tower, 183 Queen's Road Central, Hong Kong.

簽署及簽署日期

Signature and Signing Date

擬保單權益人/保單權益人簽署:	擬保單權益人/保單權益人姓名:	簽署日期:			
Signature of Proposed Policyowner / Policyowner :	Name of Proposed Policyowner / Policyowner :	Sign Date :			
			∃DD	月MM	年YYYY
個人受讓人簽署:	個人受讓人姓名:	簽署日期:			
Signature of Individual as Assignee:	Name of Individual as Assignee :	Sign Date :			
			∃DD	月ММ	年YYYY
持牌保險中介人簽署(1)(如適用):	持牌保險中介人全名及牌照號碼(1)(如適用):	簽署日期:			
対解析機士并入競者(主)(知過用)・ Signature of the Licensed Insurance intermediary (1)		Sign Date :			
(if applicable):	(if applicable):	_			
			_	_	
			∃DD	月MM	年YYYY
持牌保險中介人簽署(2)(如適用):	持牌保險中介人全名及牌照號碼(2)(如適用):	簽署日期:			
Signature of the Licensed Insurance intermediary (2)	Full Name and license no. of the Licensed Insurance intermediary (2)	Sign Date :			
(if applicable):	(if applicable):				
			⊟DD	月MM	年YYYY
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見証人簽署(如適用):	見証人姓名(如適用):	簽署日期:			
Signature of Witness (if applicable):	Name of Witness (if applicable):	Sign Date :			
			\exists DD	月MM	年YYYY

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