保單權益轉讓申請表
Request for Change of Ownership

PSF-PCO

持牌保險中介人資料 Licensed Insurance Intermediary's Information		
持牌保險中介人編號 Licensed Insurance Intermediary Code	**持牌保險中介人姓名 (姓氏先行) Licensed Insurance Intermediary's Name (Surname First)**	**持牌保險中介人聯絡電話號碼 Licensed Insurance Intermediary's Contact Phone No.**

保單資料 Policy Information		
保單號碼 Policy No.	**保單持有人姓名 (姓氏先行) Policy Owner's Name (Surname First)**	**保單持有人聯絡電話號碼 Policy Owner's Contact Phone No.**

注意事項 Notes

1. 請在適當方格內加上✓ 號，並用正楷填寫。
2. 保單持有人 / 承讓人 / 不可撤換受益人（如適用）的簽名必須與中國太平洋人壽保險（香港）有限公司（以下簡稱「太保壽險香港」或「本公司」）的存檔相符，並必須在此表格內任何更改或修改的地方以完整簽署作實。切勿在空白表格或尚未填妥的表格上簽署。
3. 請於簽署日起計 30 天內遞交至本公司辦理手續。
4. 現時及新保單持有人 / 承讓人 / 不可撤換受益人（如適用）（以下簡稱「相關人士」）明白及同意：
   i. 任何所有擁有權之更改均須根據本公司的政策和規則獲得本公司批准。保單擁有權之更改只會藉本公司簽發之修訂文件作證明並由該修訂文件之日期起生效。
   ii. 太保壽險香港有權隨時更新此申請表，並接受或拒絕未符合太保壽險香港要求的申請表。
   iii. 此項申請受保單條款和條件所約束，且不會導致任何保單條款之更改或修改，除非該等更改或修改已於保單契約內或任何修訂文件內另有清楚註明。
   iv. 保單持有人之轉換有可能涉及稅務及 / 或其他影響。新保單持有人於簽署此項申請和同意作為新保單持有人前，須仔細閱讀保單內之條款和條件，並清楚明白其授予之權利與責任。新保單持有人須自行評估履行保單支付保費與保費徵費責任之能力，及按需要自行諮詢獨立法律 / 稅務顧問。轉換保單持有人申請一旦被太保壽險香港確認及記錄，新保單持有人需承擔所有受保單條款約束的責任（就香港保單而言，包括但不限於繳付太保壽險香港代保監局收取的保費徵費），及受保單條款和條件約束。
   v. 除非另有指示，申請更改保單持有人不會更改此保單之受益人。
   vi. 若現有自動轉賬賬戶持有人並非新保單持有人，新保單持有人必須按情況重新設立自動轉賬、遞交「付款聲明書」或更改繳款方式。
   vii. 現時保單持有人保證擬進行的更改保單持有人之申請不受約束於事先協定、合約義務、法律訴訟及 / 或法院指令而限制、局限或禁止更改保單持有人。倘若任何此類限制已存在，現時保單持有人必須連同該(等)人士的適當書面同意書向本公司申請。現時保單持有人確認及同意倘因作出更改保單持有人後才發現的責任，以致太保壽險香港不接納更改保單持有人之申請（或轉換持有人必須先取得非現時持有人之第三者同意），更改保單持有人的申請將即時失效。如太保壽險香港因此更改而引致有任何損失、損害、法律責任、訴訟、索償、要求及開支，現時保單持有人同意對太保壽險香港作出彌償並保證太保壽險香港不受損害。
   viii. 太保壽險香港需要遵守或已同意遵守某些法律、法規和/或其他要求（"報告要求"），因此，相關人士明確同意本公司有權就報告要求提供有關相關人士的個人資料和保單資料予政府部門、監管機構、和/或任何其他人士。此類披露可能涉及個人資料在司法管轄區以外的跨境轉移，並且此類披露可能有關於 i) 相關人士的個人資料或本保單有關的任何資料； ii) 其中由任何相關人士持有的任何其他保單有關的任何資料。如果相關人士拒絕給予上述明確同意，本公司將無法向相關人士出售任何保險產品及提供任何服務。
5. 本公司對此申請的有效性擁有最終決定權，就有關更改必須根據公司政策和規則獲得批准並在我們發出修訂文件證明後才生效。
6. 如需協助，歡迎聯絡您的持牌保險中介人，或聯絡我們的客戶體驗大使。我們非常樂意為您服務。
   - (香港) 客戶服務熱線：(852) 3169 5500
   - (內地) 客戶服務熱線：95500
   - 電郵：wecare@cpiclife.com.hk

1. Please ✓ the appropriate box and complete in BLOCK LETTERS.
2. The Policy Owner / Assignee / Irrevocable Beneficiary's signature (if applicable) must correspond with the record in China Pacific Life Insurance (H.K.) Company Limited (hereafter called "CPIC Life (HK)" or the "Company"), and must endorse any changes or amendments in this form in full signature. Please do not sign on blank or incomplete form.
3. This form must be received by the Company within 30 days from the date of its signing.
4. The existing and new Policy Owner / Assignee / Irrevocable Beneficiary (if applicable) ("the Parties") understand and agree that:
   i. Any change of ownership shall be approved by the Company subject to the Company's policies and rules. A change of ownership shall be effective only if evidenced by an Endorsement issued by the Company and with effect from the date of that Endorsement.
   ii. The Company has the right to update this form from time to time and to accept or reject the request if the Company's requirements are not fulfilled.
   iii. This application is subject to the terms and conditions of the Policy, and shall not result in a change or modification in any policy provision, unless as expressly stated in the policy or any Endorsement.
   iv. There may be tax and / or other implications as a result of transferring ownership. The New Policy Owner is asked to carefully study the terms and conditions of the Policy and first get a comprehension of what the rights and obligations would be conferred upon him / her before signifying his / her consent to become the New Policy Owner of the Policy. The New Policy Owner is asked to make his / her own assessment on the ability to meet the premium and levy payment obligations, and consult his / her own independent legal and / or tax advisors prior to making any application if necessary. Upon confirmation and recorded by the Company of the transfer of the ownership of the Policy, the New Policy Owner shall assume all the obligations bound by and subject to the terms and conditions of the Policy (which include but not limit to, in respect of policies issued in Hong Kong, the obligation of levy payment collected by the Company on behalf of the Insurance Authority).
   v. Unless instructed otherwise, any Request for Change of Ownership does not change the beneficiary.
   vi. If the current autopay account holder is not the New Policy Owner, the New Policy Owner must setup a new autopay authorization, submit "Payment Declaration Form" or change the payment method, depending on the scenarios.
   vii. The current Policy Owner warrants that the change of ownership is not subject to any prior agreement, contractual obligations, legal proceedings and / or orders by the Court / tribunal, which may restrict, limit or otherwise prohibit such change of ownership as contemplated. If any such restriction exists, the current Policy Owner must produce the Company proper written consent from such person(s) together with the request. The current Policy Owner expressly acknowledges and agrees that in the event of any obligations become known subsequent to the change of ownership being made, which if then made known to the Company, would have caused the Company not to process any request for change of ownership on the Policy (or not to change ownership without the consent of a party other than the current Policy Owner), the change of ownership will become immediately void and the current Policy Owner shall indemnify and hold the Company harmless from any and all losses, damage, liabilities, proceedings, claims, demands and expenses arising out of and in connection with such request of change of ownership.
   viii. The Company is subject to, or have agreed to, comply with certain legal, regulatory and / or other requirements (the "Reporting Requirements"). As such, the Parties provide their express consent that the Company shall have the right to provide such personal data and policy information to any governmental authorities, regulatory bodies and / or any other person(s) in respect of the Reporting Requirements. Such disclosures may involve the cross border transfer of personal data outside the jurisdiction and that such disclosures may be with respect to i) the personal data of the Parties or any information relating to this Policy; and ii) any information relating to any other policies held by the Parties or any of them. The Company will not be able to sell any insurance product to the Parties and provide any service if the Parties refuse to give the said express consent.
5. The Company has the final decision on the approval of this change request and such approve is subject to the Company's policies and rules and becomes effective only if it is evidenced by our Endorsement.
6. For any assistance, please feel free to contact your Licensed Insurance Intermediary or our Customer Experience Ambassador. We are always delighted to serve you.
   - Hong Kong Customer Service Hotline：(852) 3169 5500
   - Mainland Service Hotline：95500
   - Email：wecare@cpiclife.com.hk

第一部份　新保單持有人資料　Section I　Details of New Policy Owner

甲部 - 適用於新保單持有人為個人客戶　Part A - Applicable to Individual New Policy Owner

注意事項
1. 新保單持有人必須為年滿 18 歲或以上的個人。
2. 若新保單持有人爲日本、美國或歐盟成員國的公民或居民，該更改申請將不被接納；
3. 新保單持有人須遞交身份證明文件核實副本及「稅務居民身份自我證明表格」，非香港永久居民須同時提交國籍證明。
4. 若新保單持有人持有中華人民共和國居民身份證，請連同「重要資料聲明書 – 內地人士在港投購 / 人身壽險保單)」一併遞交。
5. 保單權益轉讓或會影響指定產品的某些選項(如身故賠償支付選項、保單繼承選項等)，詳情請參閱相關保單條款。
6. 本公司需要根據「打擊洗錢及恐怖分子資金籌集條例」及其他適用指引，就保單權益轉讓對新保單持有人進行客戶盡職審查。因此，本公司保留權利決定該盡職審查之範圍，並要求作進一步闡述及索取其他文件。
7. 有關保單擁有權更改必須根據本公司政策和規則獲得批准並在本公司發出修訂文件證明後才生效。更改保單擁有權的生效日期應為修訂文件之日期。
8. 若保單為信託持有，新保單持有人只能為信託財產授予人。

Notes
1. The new Policy Owner must be an individual aged 18 or above.
2. If new Policy Owner is citizen or resident of Japan, the United States or European Union Member States, the change request will not be accepted.
3. Please submit certified true copy of identity document and “Self-Certification Form for Tax Residency” of the new Policy Owner. For non-Hong Kong permanent citizens, nationality proof is also required.
4. Please submit Important Facts Statement for Mainland Policyholder (“IFS-MP”)” if the new Policy Owner is holder of PRC Resident Identity Card.
5. Change of ownership may affect certain options of the specified product (such as death benefit settlement option, policy succession option, etc.). For details, please refer to the relevant provisions of the Policy.
6. As required by the Anti-Money Laundering and Counter-Terrorist Financing (Financial Institutions) Ordinance and other applicable guidelines, customer due diligence on new Policy Owner upon change of ownership shall be completed to the satisfaction of the Company. Therefore, the Company reserves the right to determine the scope of such customer due diligence and request for further clarification and additional documents if deemed necessary.
7. A change of ownership shall be approved subject to the Company’s policies and rules and becomes effective only if it is evidenced by our Endorsement. The effective date of the change shall be the date of that Endorsement.
8. If the Policy is currently held under a trust arrangement, this part is only applicable where the proposed policy owner is the settlor of the trust.

英文姓名 (以身份證明文件為準) Name in English (As shown on Identity Document)	姓氏 Surname		**中文姓名 (以身份證明文件為準) Name in Chinese (As shown on Identity Document)**	姓氏 Surname	
	名字 Given Name			名字 Given Name	
更改保單持有人之原因 Reason for Change of Ownership			**與受保人關係 Relationship to Insured**		

通訊地址 Correspondence Address

_____

_____

❑ 香港 Hong Kong　❑ 其他城市 Other City: _____ 國家 Country: _____

住宅地址*Residential Address* （若與通訊地址不同，請填寫此欄）（Complete when different from Correspondence Address）

_____

_____

❑ 香港 Hong Kong　❑ 其他城市 Other City: _____ 國家 Country: _____

永久地址* Permanent Address* （若與通訊地址不同，請填寫此欄）（Complete when different from Correspondence Address）

_____

_____

❑ 香港 Hong Kong　❑ 其他城市 Other City: _____ 國家 Country: _____

*** 恕不接受郵政信箱作為住宅地址或永久地址 * Post office box is not accepted as Residential Address or Permanent Address**

聯絡電話號碼 Contact Phone No.	國家 / 區域名稱 Country / Region name	國家 / 區域編碼 Country / Region code	地區編碼（如適用）及電話號碼 Area code (if applicable) & Phone No.
手提 Mobile			
住宅 Residence			
公司 Office			
電郵 Email			

性別 Sex	❑ 男 Male ❑ 女 Female	**國籍 Nationality**	
教育程度 Education Level	❑ 大學或以上 University or above ❑ 專科/專上學院 Post-secondary/College ❑ 中學 Secondary School ❑ 小學或以下 Primary School or below	**婚姻狀況 Marital Status**	❑ 未婚 Single ❑ 已婚 Married ❑ 喪偶 Widowed ❑ 離婚 Divorced
出生日期 Date of Birth	_____ 日 DD / 月 MM / 年 YYYY	**出生地(城市/國家) Place of Birth (City / Country)**	
身份證明文件類型 Type of the Identity Document	❑ 身份證 ID card ❑ 護照 Passport ❑ 其他(請註明) Others (Please specify) _____	**身份證明文件號碼 No. of the Identity Document**	
僱主名稱 Name of Employer		**公司業務性質/行業 Nature of Business/ Industry**	
職位 Position		**受僱於現職年期 No. of years in current job**	
確實職務 Exact Duties			
每月平均收入 Average Monthly Income	港幣 HKD	**如收入不是來自薪酬，請說明 Please state if the income does not come from salary**	
僱主地址 Address of Employer	_____ ❑ 香港 Hong Kong ❑ 其他城市 Other City: _____ 國家 Country: _____		
財富來源 Source of Wealth (可多選 Multiple Selection)	❑ 薪金 Salary ❑ 儲蓄 Savings ❑ 遺產 Inheritance ❑ 投資收益 Investment Earnings ❑ 租金收入 Rent Income ❑ 生意收入 Business Income ❑ 其他，請詳述 Others, please specify: _____		
資金來源 Source of Fund (可多選 Multiple Selection)	❑ 薪金 Salary ❑ 儲蓄 Savings ❑ 遺產 Inheritance ❑ 投資收益 Investment Earnings ❑ 租金收入 Rent Income ❑ 生意收入 Business Income ❑ 其他，請詳述 Others, please specify: _____		

乙部 - 適用於新保單持有人為信託公司 Part B - Applicable to New Policy Owner as Trustee

注意事項
1. 保單權益轉讓至在信託協議下為信託受益人設立的信託所在的信託公司持有時，必須同時更改保單受益人與新保單持有人一致。
2. 若新保單持有人為信託公司，下列保單更改申請將不再被受理：轉換受保人，委任或更改後備保單持有人，更改受益人 / 受益人選項，更改後備受益人 / 後備受益人選項，保單抵押轉讓，保單貸款。
3. 本公司需要根據「打擊洗錢及恐怖分子資金籌集條例」及其他適用指引，就保單權益轉讓對新保單持有人進行客戶盡職審查。因此，本公司保留權利決定該盡職審查之範圍，並要求作進一步闡述及索取其他文件。
4. 有關保單擁有權更改必須根據本公司政策和規則獲得批准並在本公司發出修訂文件證明後才生效。更改保單擁有權的生效日期應為修訂文件之日期。

Notes
1. Change of policy ownership to a new policy owner who is a trustee company holding the policy on trust for the trust beneficiary(ies) of a trust must be accompanied by a change of policy beneficiary request.
2. If new Policy Owner is trustee, these policy changes are not accepted: change of insured, Nomination / Change of Contingent Owner, Change of Beneficiary / Change Beneficiary Option, Change of Contingent Beneficiary / Change Contingent Beneficiary Option, Collateral Assignment, Policy Loan.
3. As required by the Anti-Money Laundering and Counter-Terrorist Financing (Financial Institutions) Ordinance and other applicable guidelines, customer due diligence on new Policy Owner upon change of ownership shall be completed to the satisfaction of the Company. Therefore, the Company reserves the right to determine the scope of such customer due diligence and request for further clarification and additional documents if deemed necessary.
4. A change of ownership shall be approved subject to the Company's policies and rules and becomes effective only if it is evidenced by our Endorsement. The effective date of the change shall be the date of that Endorsement.

信託公司英文名稱 **Trustee Name in English**	
信託公司中文名稱 **Trustee Name in Chinese**	
更改保單持有人之原因 **Reason for Change of Ownership**	
與受保人關係 **Relationship to Insured**	

註冊成立 / 登記 / 成立日期 **Date of Incorporation / Registration / Establishment**	❑ 註冊成立日期 Date of Incorporation _____ 日 DD / 月 MM / 年 YYYY ❑ 登記日期 Date of Registration _____日 DD / 月 MM / 年 YYYY ❑ 成立日期 Date of Establishment _____日 DD / 月 MM / 年 YYYY	**商業登記號碼 /公司註冊證書編號(如有) / 其他註冊號(離岸實體)** **Business Registration No. / Certificate of Incorporation No. (if any) / Other Registration No. (for Offshore Entity)**	❑ 商業登記號碼 Business Registration No. _____ ❑ 公司註冊證書編號(如有) Certificate of Incorporation No. (if any) _____ ❑ 其他註冊號(離岸實體) Other Registration No. (for Offshore Entity) _____
註冊成立 / 登記 / 成立國家 / 地點 **Country / Place of Incorporation / Registration / Establishment**	❑ 註冊成立國家 / 地點 Country / Place of Incorporation _____ ❑ 登記國家 / 地點 Country / Place of Registration _____ ❑ 成立國家 / 地點 Country / Place of Establishment _____	**實際經營所在地點** (如與註冊辦事處地址不同) **Principal Place of Business Operation (Complete when different from Registered Office Address)**	
業務識別碼 **Unique Business Identifier**		**公司業務 / 行業性質** **Nature of Business / Industry**	

通訊地址 Correspondence Address

_____

_____

❑ 香港 Hong Kong ❑ 其他城市 Other City: _____ 國家 Country: _____

業務地址(郵政信箱恕不接受) **Business Address** (Post Office Box is not acceptable)

____

____

❏ 香港 Hong Kong ❏ 其他城市 Other City: ______________ 國家 Country: ______________

註冊辦事處地址 (若與業務地址不同，請填寫此欄) **Address of Registered Office** (Complete when different from Business Address)

____

____

❏ 香港 Hong Kong ❏ 其他城市 Other City: ______________ 國家 Country: ______________

* 恕不接受郵政信箱作為住宅地址或永久地址 *** Post office box is not accepted as Residential Address or Permanent Address**

聯絡電話號碼 Contact Phone No.	國家 / 區域名稱 Country / Region name	國家 / 區域編碼 Country / Region code	地區編碼（如適用）及電話號碼 Area code (if applicable) & Phone No.
公司 **Office**			
手提 **Mobile**			
電郵 **Email**			

聯絡人英文姓名 (以身份證明文件為準) **Name of Contact Person in English** (As shown on Identity Document)	姓氏 Surname		**聯絡人中文姓名** (以身份證明文件為準) **Name of Contact Person in Chinese** (As shown on Identity Document)	姓氏 Surname	
	名字 Given Name			名字 Given Name	
聯絡人職位 Contact Person Position			**聯絡人職位 Contact Person Position**		
信託受益人姓名 (英文 / 中文) Name of Trust Beneficiary (English / Chinese)			信託受益人姓名 (英文 / 中文) Name of Trust Beneficiary (English / Chinese)		
信託受益人姓名 (英文 / 中文) Name of Trust Beneficiary (English / Chinese)			信託受益人姓名 (英文 / 中文) Name of Trust Beneficiary (English / Chinese)		
信託受益人姓名 (英文 / 中文) Name of Trust Beneficiary (English / Chinese)			信託受益人姓名 (英文 / 中文) Name of Trust Beneficiary (English / Chinese)		
信託受益人姓名 (英文 / 中文) Name of Trust Beneficiary (English / Chinese)			信託受益人姓名 (英文 / 中文) Name of Trust Beneficiary (English / Chinese)		

註：若信託受益人數量超過上表，請使用「補充申明書」進行填寫。
Note: If the number of trust beneficiaries exceeds the above form, please fill in the “Supplementary Declaration” form.

第二部份 新保單持有人需要遞交之文件
Section II Documents to be Submitted by New Policy Owner

甲部 - 適用於新保單持有人為個人客戶 **Part A - Applicable to Individual New Policy Owner**	一併遞交 **Attached**
身份證明文件核實副本，非香港永久居民須同時提交國籍證明。 Certified true copy of identity document. For non-Hong Kong permanent citizens, nationality proof is required.	❏
「稅務居民身份自我證明表格」 Self-Certification Form for Tax Residency	❏
「重要資料聲明書 – 內地人士在港投購 / 人身壽險保單」(若持有中華人民共和國居民身份證) Important Facts Statement for Mainland Policyholder (if holding PRC Resident Identity Card)	❏

乙部 - 適用於新保單持有人為信託公司 **Part B - Applicable to New Policy Owner as Trustee**	一併遞交 **Attached**

注意事項:
若新保單持有人為信託公司，請於「信托核實表」提供信託公司身份信息，擁有權和控制權結構圖(如股權結構圖)和所有實益擁有人的身份信息。
Notes:
When new Policy Owner is a trustee company, please complete Verification of Trust and provide identification information of trustee company, chart of ownership and control structure, e.g. shareholding chart and the identity information of all beneficial owners.

所需基本文件 Required Basic Documents			
1	公司註冊證書核實副本 Certified true copy of Certificate of Incorporation		❑
2	商業登記證核實副本 Certified true copy of Business Registration		❑
3	公司組職章程大綱及細則核實副本 Certified true copy of the Memorandum and Articles of Association of the company		❑
4	董事局決議案核實副本 Certified true copy of the board resolution		❑
5	所有直接或間接持有或控制 25%以上股權的股東、有權行使或控制行使公司 25%以上投票權的人士或行使公司最終控制權的人士的資料（包括(a)姓名、(b)國籍、(c)住宅地址及永久地址(若與住宅地址不同) 及(d)身份證明文件核實副本） Identity information of all shareholders who hold or control directly or indirectly more than 25% of the company shares, all persons who have the right to exercise or control more than 25% of the voting rights of the company, or the person who exercises ultimate control over the management of the company (including (a) name, (b) nationality, (c) residential address and permanent address (if different from residential address) and (d) certified true copy of identity document)		❑
6	董事名單及其中兩名董事(包括一名執行董事或董事總經理) 的身份證明文件核實副本 List of all directors and certified true copy of identity document of 2 directors (one of them must be executive director or managing director)		❑
7	所有公司授權人士及獲批准簽訂相關抵押轉讓文件人士的名單、國籍、身份證明文件核實副本、住宅地址、永久地址(若與住宅地址不同)及其簽名式樣，及相關授權文件 List of all authorized persons and persons approved to sign the relevant assignment documents, with their nationality, certified true copy of identity document, residential address, permanent address (if different from residential address) and signature specimens, together with the relevant authorization document		❑
8	「稅務居民自我證明申請表 - 實體」 Self-Certification Form for Tax Residency - Entity		❑
9	「稅務居民自我證明申請表 - 控權人」(如適用) Self-Certification Form for Tax Residency - Controlling Person (if applicable)		❑
10	「受託人及委託人(等)之聲明、確認及同意」 Declaration Acknowledgement and Agreement by Trustee(S) and The Settlor(S)		❑
11	「父母或法定監護人同意書」(如適用) Consent Of Parent or Legal Guardian (if applicable)		❑
12	「信託核實表」 Verification of Trust		❑
13	「補充陳述書 - 適用於法人」(如適用) Supplementary Information Form – Applicable to Entity (if applicable)		❑
14	「重要資料聲明書 – 內地人士在港投購 / 人身壽險保單」(若財產授予人持有中華人民共和國居民身份證) Important Facts Statement for Mainland Policyholder (if Settlor holding PRC Resident Identity Card)		❑
15	簽署保險合同的受託人決議書 Trustee Resolution		❑
16	信託契約副本或等效文件(如信託聲明等) Certified true copy of Trust Contract or equally authentic documents (e.g. Declaration of Trust, etc.)		❑
額外文件 Additional Documents			
香港成立及註冊 Established and registered in HK	**i**	商業登記證核實副本 Certified true copy of Business Registration	❑
	ii	由公司註冊處發出的 6 個月內的查冊核實副本 Certified true copy of company search report within 6 months issued by Companies Registry	❑
非香港成立及註冊 Incorporated and registered outside HK	**i**	6 個月內的董事在職證明書核實副本 Certified true copy of Certificate of Incumbency within 6 months	❑
	ii	良好聲譽證書核實副本 Certified true copy of Certificate of Good Standing	❑
	iii	登記記錄的核實副本 Certified true copy of Record of Registration	❑
於美國註冊或被動非財務實體的控權人為美國公民、美國稅務居民及/或可能與美國有關聯 Registered in the U.S. or Controlling Person of Passive Non-Financial Entity being U.S. citizen, U.S. tax resident and/or may have links to the U.S.	**i**	美國稅務自我聲明書 (例如: W9, W-8BEN 或同等文件) 及相關證明文件(如適用) U.S. tax self-certification form (e.g. W9, W-8BEN or an equivalent form) and relevant supporting documents (if applicable)	❑
	ii	相關股東的身份證明文件核實副本 Certified true copy of identity document of the relevant shareholder(s)	❑

第三部份　新受益人資料（由新保單持有人填寫）
Section III　Details of the new beneficiary(ies) (To be completed by new Policy Owner)

甲部 - 適用於新受益人為個人客戶　Part A - Applicable to Individual New Beneficiary(ies)

注意事項
1. 下列保單受益人之提名取代一切以往的提名紀錄（如有）。
2. 如無特別指明，保單利益將會平均分配給各受益人。
3. 若保單持有人指定以下人士為不可撤換受益人，請註明並一併遞交其身份證明文件之核實副本，18歲或以上之不可撤換受益人需要在身份證明文件之核實副本上簽署以作日後核對之用。
   請注意：當保單持有人申請轉換保單權益、抵押轉讓、更改受益人、提取任何保單價值、部份退保或退保，必須獲得不可撤換受益人簽署同意。
4. 本公司保留權利要求作索取其他資料及文件以處理更改新受益人之批核。
5. 指定或更改受益人只會在獲本公司批准及記錄在案後方為有效。

Notes
1. The following designation of Beneficiary(ies) of the Policy supersedes all prior designations (if any).
2. All policy proceeds will be shared equally among the beneficiaries unless otherwise stated.
3. Please specify and submit this form along with the certified true copy of the identity documents of the respective Beneficiary if the Policy Owner appoints the following person(s) as Irrevocable Beneficiary. Any Irrevocable Beneficiary aged 18 or above is required to sign on the certified true copy of the identity documents as a specimen for future verification.
   Please note: When the Policy Owner applies for change of policy ownership, collateral assignment, change of beneficiary, withdrawal of any policy value, partial surrender or surrender of the policy, consent from the Irrevocable Beneficiary by signing the application form must be provided.
4. The company reserves the right to request for additional information and documents for approval for the change of beneficiary(ies).
5. A designation or change of Beneficiary will be effective only if it is approved and recorded by the Company.

受益人姓名(個人) (英文 / 中文) Name of Beneficiary(individual) (English / Chinese)	身份證 / 護照號碼 ID card / Passport No.	性別 Sex	出生日期 (日/月/年) Date of Birth (DD/MM/YY)	與受保人關係 (如非直系親屬，請註明原因) Relationship to Insured (Please provide a reason if non-direct family member)	分配 (整數百分比) Share (%) (Integer only)

乙部 - 適用於新受益人為信託公司 Part B - Applicable to New Beneficiary as Trustee

注意事項
1. 下列保單受益人之提名取代一切以往的提名紀錄（如有）。
2. 如無特別指明，保單利益將全部分配給作爲新受益人的信託公司。
3. 本公司保留權利要求作索取其他資料及文件以處理更改新受益人之批核。
4. 指定或更改受益人只會在獲本公司批准及記錄在案後方為有效。

Notes
1. The following designation of Beneficiary(ies) of the Policy supersedes all prior designations (if any).
2. All policy proceeds will be shared to the new beneficiary as Trustee unless otherwise stated.
3. The company reserves the right to request for additional information and documents for approval for the change of beneficiary(ies).
4. A designation or change of Beneficiary will be effective only if it is approved and recorded by the Company.

受益人英文姓名(信託) Name of Beneficiary in English (Trust)	受益人中文姓名(信託) Name of Beneficiary in Chinese (Trust)	商業登記號碼 / 公司註冊證書編號 / 業務識別碼 BR No. / CI No. / Unique Business Identifier	與受保人關係# Relationship to Insured	分配 (整數百分比) Share(%) (Integer only)

#新受益人若為信託公司，請填入關係“信託”。
If new beneficiary is trustee, please enter relationship as “Trust”.
註：若信託受益人數量超過上表，請使用「補充申明書」進行填寫。
Note: If the number of trust beneficiaries exceeds the above form, please fill in the “Supplementary Declaration” form.

第四部份　授權 - 個人資料用作直接推廣
Section IV　Authorization - use or provide your personal data for any direct marketing purposes

請在適當方格內加上 ✓ 號以表示您希望更改附件個人資訊收集聲明第6段中列出的關於使用或提供您的個人資料用於直接推廣目的的現有選項。
Please ✓ the appropriate box to indicate your wish to change your existing option regarding the use or provision of your personal data for the direct marketing purpose which are listed out in paragraph 6 of the attached Personal Information Collection Statement.

❑ 本人 / 我們同意將本人 / 我們的個人資料用於直接推廣。
I / We consent the use and provision of personal data for direct marketing purposes.

❑ 本人 / 我們表示不同意將本人 / 我們的個人資料用於直接推廣。
I / We do not consent the use and provision of personal data for direct marketing purposes.

第五部份　聲明及授權書
Section V　Declaration and Authorization

1. 本人 / 我們謹此要求本人之保單依照本申請書之選擇作出更改，並明白及同意此申請將不會生效直至(1)所有有關文件、資料及款項（如適用）收妥及(2)此項申請是經太保壽險香港批核後方可作實。
2. 本人 / 我們聲明及同意上述一切資料，不論是否本人 / 我們親手所寫，就本人 / 我們所知所信，均為事實之全部並確實無訛。
3. 如本人 / 我們不能提供任何此申請所須的資料或未能符合太保壽險香港的有關規定，本人 / 我們明白太保壽險香港可能因此不能接受此保單更改申請。
4. 本人 / 我們謹此確認已閱讀及明白以上申請的所有條款及條件及所有注意事項，並同意受該等條款及條件約束。本人 / 我們謹此同意作出以上指示及聲明。
5. 本人 / 我們確認本人 / 我們已閱讀並明白本表格附件之「個人資料收集聲明」及「中國內地私隱附錄(適用位於中國內地的客戶）」(下稱「私隱附錄」)。本人 / 我們特此確認並同意太保壽險香港根據「個人資料收集聲明」使用和移轉本人 / 我們的個人資料及按照「私隱附錄」所述方式處理、使用和傳輸本人的個人信息以及敏感個人信息。本人 / 我們已取得在此申請提供第三方資料（如有）所需的同意。本人 / 我們確認並同意為「個人資料收集聲明」中所述之目的將本人 / 我們的個人資料移轉至香港境外給「個人資料收集聲明」所述的承轉人的類別。

1. I / We hereby request that my Policy be changed in accordance with the particulars set out in this application and I / we understand and agree that the request for change(s) shall not take effect until (1) any required documents, information and payments (if applicable) are submitted in full and (2) the application is duly approved by CPIC Life (HK).
2. I / We hereby declare and agree that all information in this application whether or not written by my / our own hand are to the best of my knowledge and belief complete and true.
3. If I / we fail to provide any information requested in this application or fulfill CPIC Life (HK)'s requirement(s), I / we understand that it may result in CPIC Life (HK)'s inability to accept this application.
4. I / We hereby confirm that I / we have read and understand all the notes, terms and conditions of the above request, and agree to be bound by them. I / We hereby agree to make the above instructions and declarations.
5. I / We acknowledge and confirm that I / we have read and understand the Personal Information Collection Statement and Privacy Addendum for Mainland China (applicable to customers located in Mainland China) (Privacy Addendum) attached to this form. I / We hereby give my / our acknowledgement and agree to the use and transfer of my / our personal data by the Company in accordance with the Personal Information Collection Statement and CPIC Life (HK) can process, use and transfer my personal data and Sensitive Personal Data as set out in the Privacy Addendum. I / We have obtained the consent to provide the third party information (if any) in this application. I / We acknowledge and consent to the transfer of my / our personal data outside of Hong Kong for the purposes and to the types of transferee as set out in the Personal Information Collection Statement.

現有保單持有人簽署 Signature of existing Policy Owner	簽署日期（日 / 月 / 年） Sign Date (DD/MM/YYYY)
新保單持有人簽署* Signature of new Policy Owner (記錄為新保單持有人之簽名式樣 recorded as the signature specimen of the new Policy Owner)	簽署日期（日 / 月 / 年） Sign Date (DD/MM/YYYY)
承讓人簽署（如適用） Signature of Assignee (if applicable)	簽署日期（日 / 月 / 年） Sign Date (DD/MM/YYYY)
不可撤換受益人簽署（如適用） Signature of Irrevocable Beneficiary (if applicable)	簽署日期（日 / 月 / 年） Sign Date (DD/MM/YYYY)

*若新保單持有人為信託公司，此處須信託公司的授權簽署人進行簽署。
When new Policy Owner is Trustee, the signature must be the Authorized Signatory of the Trustee company.

請參閱下頁的「個人資料收集聲明」及「私隱附錄」。
Please read the Personal Information Collection Statement and Privacy Addendum on next page.

個人資料收集聲明
Personal Information Collection Statement

太保壽險香港尊重和保障您的私隱及承諾遵守〔個人資料（私隱）條例〕(香港特別行政區(「香港」)法例第 486 章)(「私隱條例」)的要求。本聲明適用於太保壽險香港所提供的所有產品和服務，並闡述本公司收集客戶個人資料的原因、資料的擬定用途，可能獲提供個人資料的人士，以及有關查閱、檢視及修改個人資料的方法。本聲明中的「客戶」是指資料當事人（定義見私隱條例），包括現有和未來的保單持有人、受保人、受益人、以及根據保單指定或有權收取款項和 / 或其他利益的其他人。

1. 太保壽險香港所收集及 / 或持有的個人資料

於本聲明內，「個人資料」 的含義與私隱條例中的定義相同，其意包括(a)直接或間接與一名在世的個人有關的；(b) 從該資料直接或間接地確定有關的個人的身分是切實可行的；及(c)該資料的存在形式令予以查閱及處理均是切實可行的數據。本公司所收集及 / 或持有的個人資料包括但不限於您的姓名、身份證號碼、聯絡資料、家族歷史、保單資料、學歷、就業資料、財務資料、健康和醫療資料。

太保壽險香港將保留您的個人資料直至達到收集個人資料的目的及符合法例要求。如果太保壽險香港不再需要您的個人資料以作任何用途，本公司將會採取合理的步驟，安全地刪除或銷毀您的個人資料。

2. 未能提供個人資料的影響

提供您的個人資料純屬自願。如果您不向我們提供所需的個人資料，我們可能無法向您提供所需的產品及服務。

3. 太保壽險香港收集個人資料的目的

太保壽險香港所持有您的個人資料可能會用於以下目的：

a) 處理保險產品或服務的申請及核實相關的資格；
b) 設計全新或加強現時太保壽險香港所提供的保險產品、服務及相關產品；
c) 管理已簽發的保單；
d) 處理付款指示；
e) 處理任何保險索償；
f) 進行統計及精算研究；
g) 資料核對，或開展核對程序（定義見私隱條例，但廣泛而言包括對資料當事人兩套或更多套的資料進行比對，以採取不利於資料當事人的行動，例如拒絕申請）；內部業務及行政之用；
h) 釐定本公司欠付您或您拖欠本公司的任何款項的金額，及執行您之責任，包括向您或任何已為您的債務向本公司提供任何擔保或承諾的人士追收尚欠金額(如有)；
i) 就您在本公司持有的任何帳戶或本聲明未來的變更發出行政性通訊；
j) 直接推廣；
k) 進行保單檢閱及需要分析；
l) 滿足任何適用法律、規則、實務守則或指引規定的要求，或協助在香港或香港以外的監管機構執法及進行調查；
m) 在收集時列明的其他用途；
n) 與上述任何一項直接有關的其他用途。

4. 轉交

太保壽險香港收集的個人資料將保密處理，但可能會轉交給及向以下不論是位於香港境內或境外的任何一方披露，以作上述第 a) 至 n) 項之用途。

i. 中國太平洋保險（集團）股份有限公司(「太保集團」)及集團內的其他公司；
ii. 任何進行保險及 / 或再保險有關業務的公司；
iii. 任何與太保壽險香港有合約的持牌保險中介人；
iv. 任何保險索償調查人員；
v. 任何夥伴金融機構；
vi. 就業務經營關係向太保壽險香港提供行政、技術、數據處理、電訊、電腦、支付、債務追收、電話中心服務、直接推廣服務或其他服務的任何代理、承包商或第三方管理人員；
vii. 任何不時存在的保險業協會及聯會；
viii. 任何提供保險及 / 或再保險相關業務的其他服務供應商；
ix. 任何政府部門及司法機構或監管機構；
x. 在收集個人資料時已通知您的任何其他團體。

5. 查閱及修改

根據私隱條例，您有權要求查閱及 / 或修改由本公司持有的您的個人資料。如果您想要查閱及 / 或修改由本公司持有您的個人資料，請向本公司的資料保護主任作出書面要求，地址是香港尖沙咀廣東道 25 號港威大廈 2 座 22 樓 2208 室。

6. 直接推廣

太保壽險香港希望就產品優惠及宣傳資料與您保持聯繫，未經您的同意，太保壽險香港不會使用或向其它機構提供閣下之個人資料作直接推廣用途。

太保壽險香港會不時使用和 / 或提供給 (i)太保集團； (ii) 太保集團的成員公司；和 / 或 (iii) 第三方服務提供商(無論是否以獲取利益為目的)您的姓名、住址、聯絡地址、電郵及電話號碼(「該資料」)作直接推廣以下之產品和服務：

- 保險、年金、財富管理、基金投資服務、退休計劃和其他金融相關的產品和服務；
- 與健康、保健和醫療、退休養老、體育活動和會員資格、健身或類似休閒活動、旅行和交通、社交網絡、媒體和醫療保健服務相關的產品和服務；和
- 獎勵、增加現有客戶忠誠度推廣或特權計劃的相關產品和服務。

請您向太保壽險香港的資料保護主任作出書面要求，查閱或取消使用及提供該資料作直接推廣用途，地址是香港尖沙咀廣東道 25 號港威大廈 2 座 22 樓 2208 室。

CPIC Life (HK) respects and protects your privacy and pledges to comply with the requirements of the Personal Data (Privacy) Ordinance (Cap. 486 of the laws of Hong Kong Special Administrative Region ("Hong Kong")) (the "Ordinance"). This statement applies to all products and services provided by CPIC Life (HK) and sets out why the Company collects the personal data about the customer(s), how it is intended to be used, to whom it may be provided to and how to access, review and correct the personal data. "Customer(s)" in this statement means data subjects (as defined under the Ordinance) and includes existing and prospective insurance policy owners, insureds, beneficiaries and other persons designated or entitled to receive moneys and/or other benefits under an insurance policy.

1. Personal data collected and / or held by CPIC Life (HK)

In this statement, "personal data" bears the same meaning as defined under the Ordinance. It includes any data (a) relating directly or indirectly to a living individual; (b) from which it is practicable for the identity of the individual to be directly or indirectly ascertained; and (c) in a form in which access to or processing of the data is practicable. The personal data that the Company collects and/or holds includes but is not limited to name, identity card number, contact information, family history, policy details, education details, employment details, financial details, health and medical information.

CPIC Life (HK) will keep the personal data for as long as necessary to achieve the purpose for which it was collected and to comply with prevailing legal requirements. If CPIC Life (HK) no longer needs the personal data for any purposes, the Company will take reasonable steps to securely delete or destroy personal data.

2. Consequence of failing to provide personal data

The provision of the personal data is voluntary. If you do not provide us with the requested personal data, it may inhibit our ability to provide or continue to provide your requested products and service.

3. Purposes of personal data collected by CPIC Life (HK)

Personal data held by CPIC Life (HK) may be used for the following purposes:

a) processing applications and verifying the eligibility for insurance products or services;
b) designing new or enhancing existing insurance products, services and related products provided by CPIC Life (HK);
c) administering the policies issued;
d) processing payment instructions;
e) processing any insurance claims;
f) conducting statistical and actuarial research;
g) data matching or conducting matching procedure (as defined in the Ordinance, but broadly includes comparison of two or more sets of the data subject's data, for purposes of taking actions adverse to the interests of the data subject, such as declining an application), internal business and administrative purposes;
h) determining amount of indebtedness owed to or by you, and performing your obligations including the collection of amounts outstanding from you or any person who has provided any security or undertaking for your liabilities owing to the Company (if any);
i) sending out administrative communications about any accounts you may have with the company or about future changes to this statement;
j) direct marketing;
k) performing policy review and needs analysis;
l) meeting obligations and requirements imposed by any applicable laws, regulations, codes of practice or guidelines or assisting with law enforcement purposes, investigations by regulatory authorities in Hong Kong or elsewhere;
m) other purposes as notified at the time of collection;
n) other purposes directly relating to any of the above.

4. Transfer

The personal data collected by CPIC Life (HK) will be kept confidential but may be transferred and disclosed to any of the following parties, whether within or outside Hong Kong, for the purposes as specified in a) to n) above:

i. China Pacific Insurance (Group) Co., Ltd ("CPIC Group") and any other companies within the Group;
ii. any companies carrying on insurance and / or reinsurance related business;
iii. any licensed insurance intermediaries who have an agreement with CPIC Life (HK);
iv. any insurance claim investigators;
v. any partnering financial institutions;
vi. any agents, contractors or third parties administrators who provide administration, technology, data processing, telecommunications, computers, payment, debt collection, call centre services, direct marketing services, or other services to CPIC Life (HK) in connection with the operation of its business;
vii. any applicable and relevant associations and federations of the insurance industry that exist from time to time;
viii. any other service providers providing insurance and / or reinsurance related business;
ix. any governmental and judicial bodies or regulators;
x. any other parties as notified to you at the time of collection.

5. Access and Correction

In accordance with the provision of the Ordinance, you have the right to request access to and / or correction of your personal data held by CPIC Life (HK). If you want to access and / or correct your personal data held by CPIC Life (HK), please make such a request by writing to our Data Protection Officer at Suite 2208, 22/F, Tower 2, The Gateway, 25 Canton Road, Tsim Sha Tsui, Hong Kong.

6. Direct Marketing

CPIC Life (HK) would like to keep in touch with you regarding product offers and promotional materials. Without your consent, CPIC Life (HK) will not use or provide your personal data to any external parties for any direct marketing purposes.

CPIC Life (HK) will use your name, residential address, contact address, email and phone number ("Information") from time to time and/or provide the Information to (i) CPIC Group; (ii) CPIC Group member companies; and/or (iii) third-party service providers (whether or not in return for gain) for direct marketing of the following:

- insurances, annuities, wealth management, fund investment services, retirement schemes and other financial related products and services;
- products and services in relation to health, wellness and medical, healthy ageing and retirement, sporting activities and membership, fitness or similar leisure activities, travel and transportation, social networking, media, medical care services; and
- reward, customer loyalty or privilege programme and related products and services.

Please notify the Data Protection Officer of CPIC Life (HK) in writing to Suite 2208, 22/F, Tower 2, The Gateway, 25 Canton Road, Tsim Sha Tsui, Hong Kong if you wish to access or withdraw your consent to the use and provision of Information for direct marketing purposes.

中國內地私隱附錄
Privacy Addendum for Mainland China

本附錄僅適用於位於中國內地的客戶。本私隱附錄構成太保壽險(香港)的《個人資料收集聲明》的組成部分，僅適用於位於中國內地並從香港接收我們產品及/或產品相關服務的個人客戶。如本附錄與本公司的《個人資料收集聲明》中的條款存有任何衝突或不一致，應以本附錄之條款爲準。

作爲您的保單繕發機構，太保壽險(香港)是您個人信息的處理者。根據中國內地有關信息保護的法律，您可以通過 wecare@cpiclife.com.hk 與我們取得聯繫。根據中國內地法律的要求，當我們向您提供產品及與服務時，我們可能需要就如何使用您的個人信息征得您的同意。對於某些基於中國內地法律被視爲敏感的個人信息，我們可能需要征得您的單獨同意。您的個人信息將被收集、訪問、處理、使用、存儲和/或傳輸至中國內地以外的地區，其類型、目的、方法、權利行使方式和聯繫信息詳見我們的《個人資料收集聲明》。如果您不同意本私隱附錄，我們可能無法向您提供您購買的產品， 並且無法向您提供相關的服務。

根據中國內地有關數據保護的法律，我們將基於您的同意處理您的個人信息，除非您的個人信息屬於以下情況：

- 爲訂立或履行您作爲一方當事人的合同所必需的；
- 爲履行法定義務所必需的；
- 爲應對突發公共衛生事件所必需的；
- 爲保護自然人的生命健康和財產安全所必需的；
- 爲公共利益實施新聞報道、輿論監督行爲在合理範圍內處理的個人信息；或
- 個人自行公開或者已經合法公開的個人信息。

部分我們收集的您的特定個人信息屬中國內地現行數據保護相關法律法規所定義的敏感個人信息，即如果被泄露或被非法使用，可能對您的權益、人身或財產安全產生重大影響的個人信息，包括但不限於金融賬戶、身份證件號碼、醫療健康信息、生物特徵識別、宗教信仰、特定身份、個人行踪軌迹有關的資料或未滿 14 周歲未成年人的個人信息。我們收集敏感個人信息僅用於特定目的，例如簽發您的保單，處理您提出的更改個人信息的要求，以及調查您向我們提交的所有索賠申請。如我們未能處理閣下的敏感個人信息，將無法爲閣下提供相關的產品及／或服務。我們一般不會直接收集未滿 14 周歲兒童的個人信息，但在提供相關服務所需的情況下，我們可能會向兒童的父母或法定監護人收集此類個人信息，而父母或法定監護人可行使未成年人的權利並同意我們使用其個人信息。我們採用和實施嚴格的保安政策，以保護閣下敏感個人信息的機密性和隱私性。

我們將在必要期限內保留您的個人信息，以實現我們的《個人資料收集聲明》和本私隱附錄所述處理您的個人信息的必要目的。我們將通過以下一項或多項的因素來確定您個人信息的保存期限：我們是否與您仍然維持著法律關係；我們必須遵守的法律義務所要求的；以及是否涉及我們的法律地位（如適用的訴訟時效、訴訟、審計或監管調查）。閣下的個人信息此後將被安全刪除或處置。除非由於法定原因我們不得不保留某些信息，否則我們將僅在法律法規要求的限度內處理該等信息且不會將其用於我們的日常業務活動。

爲了管理您的保單以及向您提供產品和服務，我們可能將您的個人信息提供給我們的《個人資料收集聲明》中的持牌保險中介人、承保人、第三方服務提供商、醫療機構例如醫院、 醫療診所以及實驗室測試設施、中國太平洋保險（集團）股份有限公司（「太保集團」）及集團內的其他公司、審計師、法律顧問、財務顧問、再保險人、政府部門及司法機構、監管機構、保險業協會及聯會、銀行、支付結算代理人、第三方支付服務提供商和索賠調查機構。目前，我們將您的個人信息提供給位於中國內地的中國太平洋人壽保險股份有限公司 (life.cpic.com.cn/xrsbx/) 處理，以便向您提供產品和服務，其類型、目的和方法詳見我們的《個人資料收集聲明》。

個人信息的接收方可以收集和處理您的個人信息，並將其返還給我們，以便我們管理您的保單。我們向接收方提供的個人信息類型包括但不限於：您的個人身份信息、醫療信息、過去的健康記錄/信息和財務信息。我們會通過電子或其他方式向接收方提供您的個人信息，並按照我們的指示、私隱政策以及任何其他適當的保密和安全措施，爲我們處理此類信息。根據中國內地適用的法律法規，我們在控制、處理和傳輸您的個人信息和敏感的個人信息時，將採取最高的安全措施。我們還制定了自己的安全政策以保護您的個人信息和敏感個人信息。

除我們的《個人資料收集聲明》中規定的訪問權外，您還有權獲得我們持有的您個人信息的副本、撤回對我們使用閣下個人信息的同意、有權限制或反對他人處理閣下的個人信息並有權在下列任何情形發生時要求刪除您的個人信息：

- 處理您的個人信息的目的已經達到或未能達到，或該個人信息對於達到該目的已無必要；
- 我們已停止提供產品或服務，或保留期限已屆滿；
- 您撤回同意；
- 我們違反了現行數據保護相關的法律法規。

您可以通過本私隱附錄中列出的聯繫方式與我們聯繫，以撤回對我們處理您個人信息的同意。如果您撤回對我們處理您的個人信息的同意，我們可能無法向您提供相關產品和/或服務。如閣下有意根據中國個人信息保護法行使閣下的任何權利，可以向本公司的資料保護主任作出書面要求，地址是香港尖沙咀廣東道 25 號港威大廈 2 座 22 樓 2208 室。

如果與本私隱附錄的規定不一致時，包括但不限於定義（例如敏感個人信息），則以中國《網絡安全法》、《個人信息保護法》、《數據安全法》其實施辦法和其他網絡安全和數據保護相關的中華人民共和國法律法規爲準。

我們有權不時更新本私隱附錄，並通過我們網站或應用平台（視具體情況而定）發布本私隱附錄的更新以向您通知相關內容。

This Addendum only applies to you if you are located in Mainland China. This Privacy Addendum forms part and parcel of CPIC Life (HK)'s Personal Information Collection Statement and specific to individual customers who are located in Mainland China and receiving our product(s) and/or service(s) associated with the product(s) from Hong Kong. If there is any conflict or inconsistency between the terms of this Addendum and any terms set forth in CPIC Life (HK)'s Personal Information Collection Statement, the terms of this Addendum shall prevail.

CPIC Life (HK) (hereinafter also referred to as "we", "us" or "our"), the issuer of your insurance policy, is the processor of your personal data and you may reach us via wecare@cpiclife.com.hk in accordance with the applicable data protection laws of Mainland China. As required by the laws of Mainland China, when we provide you with the product(s) and the service(s), we may need to seek your consent on how we use your personal data and, in relation to certain personal data which is considered sensitive based on the laws of Mainland China, we may need your separate consent. Your personal data will be collected, accessed, processed, used, stored, and/or transferred outside of Mainland China, with the types, purposes, methods, way of right exercise and contact information set out in our Personal Information Collection Statement. If you do not consent to this Privacy Addendum, we may not be able to provide you with the product(s) you are purchasing from us and offer you with the service(s).

Under the applicable data protection laws in Mainland China, we will process your personal data based on your consent, unless your personal data are:

- necessary to conclude or perform a contract in which you are a party;
- necessary for us to comply with legal obligations;
- necessary to respond to public health emergencies;
- necessary to protect individuals' life, health, and property safety;
- reasonably processed in news reporting and public opinion oversight for public interests; or
- publicly available, because of your voluntary disclosure or a legal requirement, and reasonably processed.

Certain personal data that we collect about you is sensitive personal data as defined in the applicable data protection laws in Mainland China ("Sensitive Personal Data"), which is personal data that may materially impact your rights and interests, cause harm to your dignity, personal or property safety, if leaked or unlawfully used, including but not limited to financial accounts, national identification number, medical or health-related information, biometric identification, religious belief, specific identity, individual location tracking or any personal data of minors under the age of fourteen. We collect the Sensitive Personal Data only for specific purposes, such as assessing your application for the issuance of an insurance policy to you, processing your request of changes in personal data and investigation on any claims applications submitted to us. We will not be able to provide you with the product(s) and/or service(s) if we fail to process your Sensitive Personal Data. We generally do not directly collect personal data from a child under the age of fourteen but may collect such personal data from the parent or legal guardian of the child where such processing necessary for providing relevant services while the parent or legal guardian may exercise the minor's rights and consent to us. We adopt and implement strict security policies to protect the confidentiality and privacy of your sensitive personal information. We adopt and implement strict security policies to protect the confidentiality and privacy of your sensitive personal information.

We will retain your personal data for the period necessary to fulfill the necessary purposes of processing your personal data as outlined in our Personal Information Collection Statement and this Privacy Addendum. The criteria used to determine our retention periods may include one or more of the following: as long as we have an ongoing relationship with you; as required by a legal obligation to which we are subject; and as advisable in light of our legal position (such as in regard of the applicable statute of limitation, litigation, audits or regulatory investigation). Your personal data will be securely deleted or disposed of thereafter. Unless we have to retain certain data due to legal reasons, we will only process such data to the extent required by laws and regulations and will not use it in our daily business activities.

We may also provide your personal data to other recipients, within or outside Mainland China as set out in our Personal Information Collection Statement including but not limited to any licensed insurance intermediaries, insurers, third party service providers, medical institutions such as hospitals, medical clinics and laboratory testing facilities, China Pacific Insurance (Group) Co., Ltd ("CPIC Group") and any other companies within the Group, auditors, legal advisors, financial advisors, reinsurers, governmental and judicial bodies, regulators, associations and federations of the insurance industry, banks, payment settlement agents, third party payment service providers and claims investigation organizations, for the purpose of the administration of your insurance policies and the provision of product(s) and service(s) to you. Currently, we provide your personal data to China Pacific Life Insurance Co., Ltd. (life.cpic.com.cn/xrsbx/) which is located in Mainland China for processing for the purpose of providing you with the product(s) and service(s), with the types, purposes and methods as set out in our Personal Information Collection Statement.

The recipient(s) of your personal data may collect and process your personal data and return to us for the purpose of the administration of your insurance policies. The types of personal data that we provide to the recipients include without limitation personally-identifiable information, your medical information, your past health records/information, and your financial information. We may deliver your personal data through electronic means or other mode of dispatch to the recipients to process such information for us in accordance with our instructions and in compliance with our privacy policy as well as any other appropriate confidentiality and security measures. In compliance with the applicable rules and regulations of Mainland China, we implement maximum security in controlling, processing and transferring of your personal data and Sensitive Personal Data. We also adopt our own security policies to safeguard your personal data and Sensitive Personal Data.

In addition to the access rights set forth in our Personal Information Collection Statement, you have the right to obtain a copy of your personal data held by us, the right to withdraw consent to use of such personal data, the right to restrict or object processing of such personal data and the right to request us to delete such personal data under any of the following circumstances:

- where the purposes of processing your personal data have been achieved or have failed to be achieved, or the personal data is no longer necessary for achieving the purposes;
- where we have ceased to provide the product(s) or service(s), or the retention period has expired;
- where you have withdrawn your consent; and
- where we have violated the applicable data protection laws and regulations.

You may withdraw your consent to our use of your personal data by contacting us through the contact details set out in this Privacy Addendum. If you withdraw your consent to our processing of your personal data, we may not be able to provide the relevant product(s) and/or service(s) to you. If you wish to exercise any of your rights under the Personal Information Protection Law of China, you may make your request by writing to our Data Protection Officer at Suite 2208, 22/F, Tower 2,The Gateway, 25 Canton Road, Tsim Sha Tsui, Hong Kong.

To the extent inconsistent with the provisions of this Privacy Addendum, including but not limited to definitions (e.g., Sensitive Personal Data), China's Cybersecurity Law, Personal Information Protection Law, Data Security Law, their implementing measures and other Chinese laws and regulations in relation to cybersecurity and data protection will prevail.

We have the right to update this Privacy Addendum from time to time and we will notify you of our updates to this Privacy Addendum by posting it on our website or application platforms (as the case may be).