

# REQUEST FOR CHANGE FORM OF BASIC PLAN / SUPPLEMENTARY CONTRACT

更改基本計劃/附加契約申請表

Policy Number 保單號碼	Name of Insured 受保人姓名	Name of Owner 持有人姓名		IMo			
Area Code 區域編號	L Agency / Broker Name 營業員組別 / 經紀名稱	e :碼					
				06112123			
Agency Code 營業員組別編號	Agent / TR's Name 營業員 / 業務代表姓名	Agent / TR's Tel. No 營業員 / 業務代表聯					
TR Membership Number 業務代表會員號(For Brokers only 僅供經紀使用)	IA III	ANG					
and follow up my request.	er / IFA on this form is not my current servicing AIA 哑紀 / 獨立理財顧問並不是本人目前的財務策劃顧問	•					
PLEASE USE A SEPARATE FORM Please tick the appropriate box 請	FOR EACH POLICY NUMBER 每一份 在適當的空格內劃上"√"號	分保單請填寫一份申	請表				
Important Notes: 重要事項:							
1. Health Certificate is required for addition of rider(s), Upgrade of Benefit(s), and Change of Basic Plan. 增加附加契約 /提升保障級別 / 更改基本保險計劃須提交健康證明書。 2. For Hong Kong Policies Financial Needs Analysis ("FNA") is compulsory for Addition / Upgrade / Plan Change to FNA In-scope Products. 香港保單適用增加附加契約 /提升保障級別 / 更改基本保險計劃至非豁免FNA產品須提交財務需要分析表格。 For Macau Policies Financial Needs Analysis ("FNA") and Declaration of Customers Understanding on Premium Information are compulsory for Addition / Upgrade / Plan Change. 澳門保單適用增加附加契約 /提升保障級別 / 更改基本保險計劃須提交財務需要分析表格和客戶對保費資訊理解之聲明。 3. PGS illustration is compulsory for Plan Change to PGS In-scope Basic Plans. 更改至非豁免PGS基本計劃須提交保單建議書。 4. Please complete Part C if you are applying AIA Vitality Series. 如申請AIA健康系列,請填寫丙部。  PART A: Affordability Assessment 甲部:負擔能力評估Only applicable to FNA out-scope product(s) (for Hong Kong policies) R連用於FNA豁免產品類別(香港保單適用)  Note: You must reply at least either question 1 or 2 and 3. If you do not wish to answer either one of them, please cross it out. Please note that we will reject your application if you choose not to respond to both question 1 and 2. 註:您必須至少回答問題1或2及3,如您不能回答其中一條,請將之删去。如您選擇不回應問題1和2,本公司必須拒絕您的申請。Please pay attention: We shall assume level and unchanged annualized premium when assessing your ability to pay premium. Yet, the premium schedule of some products are not level and shall change in accordance with the insured's age or other factors (such as inflation or claims experience).							
請注意:本公司於評估您繳付保費的負擔能力時,將假設年度保費均衡及不變;唯部分產品的保費並非均衡並會隨著受保人年齡增長或其他因素而有所改變(如通脹或賠償經驗)。  1. Disposable Income 可動用收入*							
•	nthly Income minus Monthly Expenses 每月可動用	引收入等於每月收入減去每	<b>写月開支</b>				
1a. What is your average monthly income 在過去二十四個月裡,您從所有收入來			HK\$ 港幣				
	r allowances / compensations, property rental inco ies and dividend from shares, etc. 包括薪金、 礼 券利息及股息等)			/ Month 月			
1b. What are your average monthly exper 在過去二十四個月裡,您每月平均開支	HK\$ 港幣						
(Including mortgage installment, rent, clc 租金、衣服、交通、 借貸及保險費用等)	nthing, transportation, loans, insurance premiun	n, etc. 包括樓宇按揭、		/ Month 月			
1c. What percentage of your monthly disposable income (i.e. after deducting the expenditure) from all sources (including income from liquid assets) would you be able and willing to use to pay for the insurance premium (excluding your existing insurance policy(ies)) throughout the entire term of the insurance policy? (tick one) 在整個保單期內,閣下能夠及願意繳付的保費(不包括閣下現有的其他保單)佔透過所有收入來源(包括流動資產收入)獲得的每月可動用收入(即經扣除開支)的比率為?(請選一項)							
	21%-40% 41%-60%	01/0-00/0	5176-10076				

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2.	Net Liquid Assets 淨流動資產										
2a.	2a. What is your approximate current accumulative amount of Net liquid assets?  您現時累積的淨流動資產約有多少?  * Note: Net liquid assets = Liquid assets - Current liabilities Liquid assets are assets which may be easily turned into cash. Real estate, coin collection and artwork are not considered as liquid assets.  Current liabilities refer to premium financing and/or pledge loan and / or short-term liabilities (such as personal loan / debt, overdraft, etc) plus any interest accrued and payable  * 註:淨流動資產 = 流動資產 - 流動負債 流動資產是指可以容易變現為現金的資產。物業、錢幣收藏及藝術品均不能被視為流動資產。 流動負債是指保費融資及/或抵押貸款及/或短期債務(例如私人貸款/債務、透支等)及任何應計和應付利息。										
2b.	2b. What percentage of your Net Liquid Assets would you able and willing to use to pay for the insurance premium (excluding your existing insurance policy(ies)) throughout the entire term of the insurance policy? (tick one) 在整個保單期內,閣下能夠及願意繳付的保費(不包括閣下現有的其他保單)佔淨流動資產比率為?(請選一項)										
	☐ ≤10%         ☐ 11%-20%         ☐ 21%-40%         ☐ 41%-60%         ☐ 61%-80%         ☐ 81%-100%										
3.	If you have not completed a FNA form, please provide the following 若您未有填寫財務需要分析表格,請提供以下資料: Applicant's Education Level 申請人教育程度: Primary or below 小學或以下 Secondary 中學 Tertiary or above 大專或以上	g information:									
PA	RT B 乙部										
For For	Ction 1: Addition of Supplementary Benefit 第一部分:增 Hong Kong Policy Only 只適用於香港保單 Please tick the box on the left if you are holding a valid People's Republic of O Policyholder" signed in Hong Kong. 如閣下持有有效的中華人民共和國居 「重要資料聲明書」。 Macau Policy Only 只適用於澳門保單 Please tick the box of the left if you obtain funding from your other policies signed Customer Declaration for Policy Replacement together. 如閣下使 同時,您必須將已簽署的《人壽保險客戶轉保聲明書》一併提交。	China Resident lo 民身份證,請在想 s to purchase the	三列□一欄劃上√,並 supplementary benefi	於香港 it. Bes	·簽署及 sides, yo	遞交專為 ou are r	為抵港向 required	为地人士 d to sub	m設的 omit the		
	Please specify the supplementary contract to be added below 請於 Apply for AIA Vitality Series (if applicable) for selected plans or sup										
	為已選的計劃或附加 / 可附加保障申請AIA健康系列(如適用)。  Does the application of addition of supplementary benefit meet your objective of preparation for health care needs? (Must answer) 此增加附加契約申請是否迎合您的醫療需要作準備的目標? (必須作答)  No 否										
	Yes 是 (Tick one or more可選多於一項)  The product meets my insurance objective of providing protectic insurance product with hospital income protection. 產品迎合為我住院時提供入息保障的保險目標,而此產品為醫療	Ü	· ·	spita	I confin	nement	, and i	it is a n	nedical		
	The product meets my insurance objective of providing protectic it is a medical insurance product with hospitalization expense re產品迎合為我提供保障以應付日益增長的的醫療費用的目標,而	reimbursement l 近此產品為醫療值	benefit. 呆險產品並提供住院	費用	實報實	銷保障					
	The product meets my insurance objective of providing health poffers Lump Sum Payment upon claims of health protection / C產品迎合為我提供健康保障 / 危疾保障以應付將來的健康服務的	Critical Illness.					are s	ervices	s and it		
	注用在日初以及区区区外下,10万万千个区门为不可区域加强。			<b>水г∓</b>	<b>一</b>						
For For	ction 2: Upgrade / Downgrade of Benefit 第二部分:提升 / Hong Kong Policy Only 只適用於香港保單 Please tick the box on the left if you are holding a valid People's Repub Mainland Policyholder" signed in Hong Kong. 如閣下持有有效的中華人民共而設的「重要資料聲明書」。 Macau Policy Only 只適用於澳門保單 are required to submit the signed Customer Declaration for Policy Replacement	olic of China Resi 共和國居民身份證	dent Identity Card, al ,請在左列□□一欄劃上	√,並	位於香港	簽署及述	<b>遞交專</b> 為	為抵港內	nent for 可地人士		
	Benefit Upgrade 提升保障級別 Benefit Downgrade 降低保	· 隐障級別									
Fro	m 由		Apply for AIA Vitalit lans or supplement 导已選的計劃或附 (如適用) 。	tary /	option	al bene	efits.				
					_	_					

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		Policy Number 保單號碼							
Section 3: Change of Basic Plan or Reduce Sum Assured / Principal Amount^第三部分:更改基本保險計劃或減少保額/基本金額^ Please note that the revised Sum Assured / Principal Amount^ are subject to the Company's requirements. 請注意,申請完成後的保額/基本金額^需符合公司之要求。 ^ can also be expressed as Principal Sum / Principal Amount / Face Amount in accordance with your Basic Plan Contract. For any medical and accident coverage, this can be defined as Benefit Amount. 視乎閣下的基本計劃契約而定,亦可表達為主要保額/基本金額/基本保額。醫療及個人意外保障則可定義為利益金額。 (Applicable to AIA Assemble basic plan only) Once the Initial Sum Assured of the Life Cover is reduced, the Initial Sum Assured of all Respective Covers of your AIA Assemble policy will be proportionately reduced. The Initial Sum Assured of the Life Cover and all Respective Covers must meet the Company's minimum Initial Sum Assured requirements. (只適用於「自在自選」危疾保基本計劃)當人壽保障類別的原有保額減少,您的「自在自選」危疾保保單下所有相應保障類別的原有保額均會按比例減少。人壽保障類別及所有相應保障類別的原有保額均會按比例減少。人壽For Hong Kong Policy Only 只適用於香港保單  Please tick the box on the left if you are holding a valid People's Republic of China Resident Identity Card, and submit "Important Facts Statement for Mainland Policyholder" signed in Hong Kong. 如閣下持有有效的中華人民共和國居民身份證,請在左列□一欄劃上✓,並於香港簽署及遞交專為抵港內地人士而設的「重要資料聲明書」。  For Macau Policy Only 只適用於澳門保單 You are required to submit the signed Customer Declaration for Policy Replacement together. 您必須將已簽署的《人壽保險客戶轉保聲明書》一併提交。  Change of Basic Plan 更改基本保險計劃									
From 由	To 至	From 由	To 至						
Instructions to customers: For customers who wish to apply for a plan change, you can either scan the QR code on the right or visit our website to read and understand the important information of the plan change. 客戶指引: 就申請更改計劃之客戶,您可掃瞄右方的二維碼(QR Code)或瀏覽我們的網址閱讀及了解更改計劃的重要資料。									
Application for a plan change: I, the policy owner, intend to apply for a plan change. I have read and understood the important information of the plan change available at https://www.aia.com.hk/en/products/further-product-information/important-note-for-plan-change.html and I agree to those important information. I hereby submit my application for a change of my existing insurance plan.  申請更改計劃 本人,保單持有人,計劃申請更改計劃。本人已閱讀及明白於 https://www.aia.com.hk/zh-hk/products/further-product-information/important-note-for-plan-change.html 內有關更改計劃的重要資料,本人同意該等重要資料,及就更改現有本人的保險計劃作出申請。									
I acknowledge and understand that due to my request for change of basic plan, the Basic Policy (including but not limited to the premium and cash values) are amended as illustrated in this illustration. Any rider with coverage and premium correlated to the basic plan will be adjusted accordingly. Except that, the riders (if any) referred to in the Policy Information Page will remain the same unless there is an addition or deletion of rider. (Only Applicable for Plan Change to PGS In-scope Basic Plans) 我確認及明白因應本人更改基本計劃的申請,基本保單(包括但不限於保費及現金價值)已如本建議書所示而更改。任何與基本計劃相關的附加契約的保障金額及保費將相應調整。除此之外,在沒有新增或刪減附加契約的情況下,保單資料頁所列的附加契約(如有)將維持不變。(只適用於更改至非豁免PGS基本計劃)									
Section 4: Deletion of Supplementary Contract 第四部分:取消附加契約									
Please	specify the supplementary contract to be deleted below 請	於下方列明取消之附加契約							
PART C: Declaration for applying AIA Vitality Series 丙部:申請AIA健康系列之聲明									
confirm. 請作     https://w     l, the po     links pro     reference     https://w     本人,你	the link below to read and study these statements which the link below to read and study these statements which the link below to read and study these statements which the read to be link the link own. All also expressly acknowledge that the AIA Vitate only.  www.aia.com.hk/zh-hk/our-products/aia-vitality/vitality-illustration of the link	條件。 請在下列空格內劃上"✓"號. on.html by the paragraphs and statements sh lity illustration displayed in the link is t ration.html	以確認。 nown in the for genera		le box b	elow to			

Policy Nu	umber 保單號碼						
PART D: PRODUCT SELECTION DECLARATION 丁部:產品選擇聲明							
Insurance Knowledge and Experience declaration 保險知識及經驗聲明: - I / We have received the product brochure(s) of the product I / we selected (where applicable).							
本人 / 我們曾收取本人 / 我們所選擇產品之產品小冊子(如適用)。 - I / We have sufficient knowledge and experience to fully understand and accept the p penalties and its associated risks and key exclusions (where applicable).						_	
本人/我們具有足夠認知及經驗作出充分之理解及接受產品特色、利益、費用及收費、退保費I/We hereby declare and agree that 本人/我們現聲明並同意: (A) Having considered the advice and recommendation of the intermediary, the pro	oduct(s) (includin	g FN	IA exe	mpted	d prodi	uct(s))	and the
□□ insurance amount I / we selected are suitable for me / us as they meet my / our disc protection / coverage. And, I / we can afford and anticipate to pay the required premit 本人 / 我們已考慮中介人的意見及建議,並確認本人 / 我們所選擇的產品(包括豁免財有關產品符合本人 / 我們已披露需要之重要性排序及為本人 / 我們提供了額外保障。本(如需要)。	ums continuously 才務需要分析之產	y if n 品)	ecessa 及保險	· iry. 金額述	<b>適合本</b>	人 / 我們	引,蓋因
<ul> <li>(B) Despite the fact that the intermediary has explained to me / us that my / o us with reference to my/our disclosed information during suitability assessment, I / v the application due to the reason below. Besides, I / we can afford and anticipate to 儘管中介人已根據在合適性評估中本人 / 我們所透露的資料向本人 / 我們解釋最終選單本人 / 我們確認這是本人 / 我們的意圖及意願繼續進行此投保申請。同時,本人 / 我們能夠 (a) My / Our own preference 本人 / 我們因自身喜好所作出的決定</li> </ul>	we confirm that ir pay the required 講的保險產品並不 夠負擔及預計會繼	t is n I prei 適合 續支	ny / òu miums 含本人氰 付所選	r dec contii 需要, 擇產品	ision to nuousl 然而基	o proce ly if nec 基於下述	ed with cessary. 证原因,
(b) My / Our decision after going through suitability assessment process 本人 / ∄ (c) My / Our decision as my family member(s) / friend(s) has purchased the 作出的決定	找們經合適性評估 same product(s	後所 6)本.	r作出的 人/我们	)決定 門因親	友購買	夏了同一	-產品所
☐ (d) I / we agree with intermediary's recommendation to purchase the said produ information during suitability assessment process 本人 / 我們贊同中介人的建分析所透露的資料不相符	建議而選購此產品	,縱	使此產	品與乙	1人/		
☐ (e) Others, please specify: 其他,言	請詳述:						
Declaration & Authorization Terms and Conditions:  1) This request is NOT valid until (1) it is recorded as received by AIA (the "Company") d and (2) it is finally confirmed as accepted by the Company by way of Endorsement or		e of I	вотн	the In	sured	and the	Owner
Receipt of this form by AIA Financial Planner or your broker does not constitute reconvalidity of this form rests with the Company.  I / We hereby irrevocably authorize: The Company to enter into arrangements with I	rded receipt by th						
services to me / us (if and as applicable).  2) I / We declare and agree that the mode of payment of my / our Life Policy with t							
insurance or request for change will be effected unless this application has been reconstructed in the above particulars. I will be attached to and form a part of the said Policy. Where this request relates to change that my / our previously nominated beneficiary or beneficiaries (other than the estate cobjected to the contents of this 'Request for Change' form.	orded as received I / We understand ge of beneficiary i	d and d and in res	d approd d agree spect c	oved I that a f this	by the a copy Policy	Compa of this , I / we	any. request confirm
No Third Party Rights: I / We understand and agree that a person who is not a party or the Beneficiary) has no right to enforce any of the terms of this Policy.  For Addition of rider, upgrade benefit, plan change to VHIS product:	y to this Policy (ii	nclud	ding bu	t not l	imited	to the	Insured
<ol> <li>I have read and understood the information on tax deduction and understood that premiums paid subject to the provisions of the Inland Revenue Ordinance (Cap. 112 provide valid documentation proofs from time to time for the purpose of claiming for tax (Cap. 112). AIA and its intermediaries does not provide tax or accounting advice and for any tax advice.</li> </ol>	I confirm and ax deduction pursual I should consult	undo uant t my	erstand to the own ta	that nland x and	I may I Reve accou	be required be required by the second but the second between the second between the second between the second be required by the second between th	uired to dinance advisors
<ol> <li>If a successive Policy Holder has been selected, such successive Policy Holder has (including but not limited to all the options, benefits or privilege under the VHIS policy been successfully transferred to such successive Policy Holder.</li> </ol>	no right to enforcy) unless or until	the	ny of th owners	e terr hip o	ns of the V	he VHIS 'HIS po	3 policy licy has
3) In case of any discrepancy between the English and Chinese versions of the content Important Note: Payment does not guarantee immediate approval of the application or a scheme / increasing sum assured / removal of exclusion / removal of medical rating, whi we receive the relevant documents and any required amount, including but not limited to outstanding levy amount due and overdue (for Hong Kong policies), and provided that insured's current health condition and other necessary requirements are met to our satis or reject any application.	at all. The reinstanichever is applicate the health certification was accept and	atem able, icate appr	ent / a , will or and fu ove th	dditio nly be ill prei e sati	n of ric come mium, sfacto	effectiv as well ry proo	e when as any of of the
Effective on 1 January 2018, levy is payable on each premium for both new and in-force Order and the Insurance (Levy) Regulation, which includes both regular and top-up prem upon the policy date or the policy anniversary date. The prescribed levy shall be subject to the policy owner is required to pay to us the prescribed levy along with the premium. Any (Levy) Regulation under which the Insurance Authority may impose on the policy owner count take legal proceedings to recover any outstanding levy and penalty as a civil debt.	niums. Different li to change from ti failure to do so n	evy r ime t nay r	rates a to time esult ir	pply, i	which each o	are dep	surance
聲明同意 <u>條款:</u> ************************************		111.44	- D A-	- 4 <del>-</del> 111	VV -> 4-	- 4- 31	<b></b> +- +0
<ul> <li>1) 此申請表需於(1)受保人及持有人生存期間獲友邦(即"貴公司")收到並存檔及(2) 財務策劃顧問或您的經紀收到的申請表並不代表貴公司亦已收到。</li> <li>本人/我們茲授權:貴公司為本人/我們安排醫療網絡組織之服務提供者進行指定之醫療</li> <li>2) 本人/我們聲明及同意採用與本人/我們的壽險保單相同號碼之付款形式,所有未給</li> </ul>	· §服務(如適用)。						
	副本將附於本保單	契約	內,且	1構成	保單契	22約之一	-部份。
內容,而且並無就此申請提出反對。 <b>沒有第三者權利:</b> 本人/我們明白及同意非保單合約一方(包括但不限於受保人及受益/	人)沒有權利執行	<b>于任何</b>	[保單例	樣款。			
<b>只適用於增加附加契約/提升保障級別/更改保險計劃至自顯醫保產品:</b>   1) 本人已閱讀及明白有關稅務扣減之資料並明白本人所支付的保費按《稅務條例》(第   就申請稅務扣減時,本人可能不時需要遞交其他有效的文件以符合《稅務條例》(第	第112章)或能合 [112章)。友邦香	資格 港及	的申請税 其中介	統別 不會	減。本 提供仔	、人確認 E何税發	况明白 ∮或會計

保單持有人必須將規定的保費徵費連同保費一同繳付給本公司。如申請人沒有繳付保費徵費和保費,申請人將會被視為違反《保險業(徵費)規例》,保險業監管局(保監局)將有可能向申請人收取不多於港幣五千元的罰款,並會採取法律行動以民事債項為基礎追收未償付的保費徵費及罰款。

建議。就任何稅務建議,本人應諮詢本人的稅務和會計顧問。 如已訂立保單的承繼人,有關保單的承繼人沒有權利行使自願醫保保單內的任何條款(包括但不限於所有自願醫保保單內的選項,利益及

重要事項: 已付款並不保證申請獲即時批核。有關之復效/增加附加契約/更改基本保險計劃/增加保額/刪除不保事項/刪除額外保費 (以適用者為準)申請,將於本公司收妥相關文件及所需金額,包括但不限於健康證明書,全數保費,及任何到期及逾期而未繳清之保費徵費(香港

保單適用),並獲本公司接納及批准受保人的健康現況證明,及其他所需要求後,方為正式生效。本公司保留權利擱置,拒絕及/或駁回任何申請。保費徵費將於二零一八年一月一日實行。根據《保險業(徵費)令》及《保險業(徵費)規例》,保費徵費是基於新的保單和有效保單的保費收取的,這包括定期保費和額外投資保費。根據保單日期及保單週年日,將會收取不同的徵費率。規定的保費徵費會不時作出調整。

,除非或直至有關自願醫保保單的擁有權成功地轉移至有關保單的承繼人。

如英文版與中文版內容有任何差異,一概以英文版為準。

Policy Number 保單號碼					

### CANCELLATION RIGHTS AND REFUND OF PREMIUM(S) AND LEVY (IF ANY):

(This clause is only applicable to VHIS products)

I, the policyowner, understand that I have the right to cancel this Addition of rider, upgrade benefit, plan change to VHIS product and obtain a refund of any premium(s) and any levy paid (if any) by giving written notice. Such notice must be signed by me and received directly by the Customer Service Centre of AIA International Limited at 12/F, AIA Tower, 183 Electric Road, North Point, Hong Kong within 21 calendar days after this addition of rider, upgrade benefit, plan change request to VHIS product is being effective.

# 撤銷申請及退還保費及保費徵費(如有):

(本條款僅適用於自願醫保產品)

本人,保單持有人,明白,本人有權以書面通知撤銷此增加附加契約/提升保障級別/更改保險計劃申請至自願醫保產品並取回已繳保費及已繳保費徵費(如有)。有關書面通知必須由本人簽署,並確保此增加附加契約/提升保障級別/更改保險計劃至自願醫保產品申請生效後起計二十一個曆日內,呈交至香港北角電氣道一百八十三號友邦廣場十二樓之友邦保險(國際)有限公司客戶服務中心。

#### PERSONAL DATA COLLECTION AND USE

I/We confirm that I/we have read and understood the AIA Personal Information Collection Statement ("AIA PIC").

I / We declare and agree that any personal data and other information relating to me / us or my / our policy(ies) or investments contained in this application or collected, obtained, compiled or held by the Company by any means from time to time may be collected and utilized in accordance with the AIA PIC. I / We acknowledge and consent to the transfer of my / our personal data outside of Hong Kong (for policies issued in Hong Kong) or Macau (for policies issued in Macau), as the case may be, for the purposes and to the types of transferee as set out in the AIA PIC.

The updated version of AIA PIC is available for download from its website: www.aia.com.hk, and is made available upon request.

## 個人資料收集及使用

本人/我們確認本人/我們已閱讀及明白AIA個人資料收集聲明(「AIA個人資料收集聲明」)。本人/我們聲明及同意在本申請所載或貴公司不時以任何方法收集所得、編製或持有的任何個人資料及關於本人/我們或本人/我們的保單或投資的其他資料,可根據AIA個人資料收集聲明收集及使用。本人/我們知悉及同意就AIA個人資料收集聲明所述目的視乎情況轉讓本人/我們的個人資料至香港(如保單在香港繕發)或澳門(如保單在澳門繕發)境外予AIA個人資料收集聲明所載的資料承讓人。

AIA個人資料收集聲明的最新版本可於以下網址下載:www.aia.com.hk,及可向貴公司索取。

By signing below, I / we represent that I am / we are not a U.S. person for purposes of U.S. federal income tax and that I am /we are not acting for, or on behalf of, a U.S. person. I / We understand that the Company, believing this statement to be true, will rely on it and act on it. In the event this statement is incorrect / false, the Company reserves the right and shall be entitled to cancel the policy. Any policy issued may accordingly be considered void in which case the Company shall notify me / us and repay any premium and levy (for Hong Kong policies) less reasonable charges and policy withdrawals / loans.

Note: A false statement or misrepresentation of tax status by a U.S. person could lead to penalties under U.S. law. If your tax status changes and you become a U.S. citizen or resident, you must notify us within 30 days. (This Clause is not applicable to U.S. citizens or residents, who must complete IRS Form W- 9.)

於下方簽署作實,本人/我們聲明,就美國聯邦薪俸稅之有關事項而言,本人/我們並非美國人,及並不代表美國人行事。本人/我們明白貴公司相信此陳述是真實的,並以此為依據及代為行事。倘若此陳述是不正確/虛假的,貴公司保留權利,並有權取消保單。任何依據此陳述而繕發的保單可視作無效。在這情況下,貴公司將通知我/我們償還扣除合理的費用及保單提款/貸款後的保費與保費徵費(香港保單適用)。備註:根據美國法律,任何美國人就其稅務狀況有虛假或失實陳述,將會受到刑罰。若閣下的稅務狀況有更改,並且成為美國公民或居民,請於三十日內通知本公司。(美國公民或居民必須填寫IRS之W-9表格,而以上之有關條款並不適用。)

#### Personal Information Protection Law of The People's Republic of China ("China PIPL")

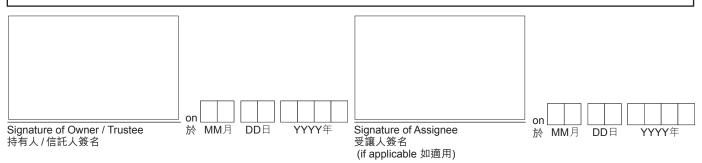
A Privacy Addendum in compliance with the China PIPL is available at: www.aia.com.hk (Privacy Statement), and is made available upon request. It is applicable to you if you are located in Mainland China.

#### 中華人民共和國個人信息保護法(「個人信息保護法」)

遵照個人信息保護法的私隱附錄可於以下網站下載:www.aia.com.hk(私隱權保護政策)。您亦可向我們索取。如您位於中國內地,此私隱 附錄則適用於您。

I have read and understood the Privacy Addendum and agree that the AIA group of companies can process my personal information as set out in the Privacy Addendum.

我已閱讀及明白私隱附錄,並同意友邦保險集團可按照私隱附錄處理我的個人信息。



PLEASE SIGN & RETURN IMMEDIATELY BUT NO LATER THAN 14 DAYS 請簽署後即時但不遲於14天內遞交 PLEASE DO NOT SIGN ON BLANK FORM 請勿在空白表格上簽署

AIA" shall refer to AIA International Limited (Incorporated in Bermuda with limited liability), AIA Company Limited (Incorporated in Hong Kong with limited liability) or AIA Everest Life Company Limited (Incorporated in Hong Kong with limited liability), as the case may be, depending on the issuing company of the relevant insurance policies this form / request / correspondence is subject to.

"AIA"指友邦保險(國際)有限公司(於百慕達註冊成立之有限公司),友邦保險有限公司(於香港註冊成立之有限公司)或友邦雋峰人壽有限公司(於香港註冊成立之有限公司)(視情況而定),具體取決於本表格/要求相關保單的簽發公司



Download our mobile app AIA Connect to manage your policy anytime, anywhere! 下載AIA「友聯繫」手機應用程式以便輕鬆管理您的保單!

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