

Application/Change/Cancellation For Life Insurance Proceeds Settlement Option

申請/更改/取消人壽保險金支付選擇

Policy Number: 保單編號	Full Name of Insured: 受保人姓名	Full Name of Policyowner: 保單持有人姓名
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- 1) In compliance with the legal and regulatory requirements with respect to the prevention of money laundering and terrorist financing, Chubb Life Insurance Company Ltd. (the "Company") requires to review the customer identity information of the Policy Owner and/or Beneficial Owner ("you") to ensure they are up-to-date and relevant. For any change of customer identity information provided previously, you are required to provide i) the up-to-dated identity information by completing the relevant request form for policy change; and ii) the relevant identification documents proof for the purpose of identification, verification and record keeping.

根據相關法律及監管機構就防止洗錢及恐怖分子資金籌集活動的規定，安達人壽保險有限公司（「本公司」）必須不時覆核保單持有人及/或實益擁有人（「您」）以確保其身份資料反映最新現況及仍屬相關的。如任何身份資料與之前提供的資料有所不同，您必須提供 i) 相關的更改保單事項通知書以更新最新的身份資料；及 ii) 有關的身份證明文件以作識別、驗證及存檔之用。

- 2) In compliance with the legal and regulatory requirements with respect to U.S. Foreign Account Tax Compliance Act (FATCA) and Automatic Exchange of Financial Account Information (AEOI), the Company requires you to provide certain information (including but not limited to place of birth, address, telephone number, citizenship, residency and Taxpayer Identification Number (TIN) etc) by completing the relevant request form for policy change of the Company and other relevant form where it is applicable if you have any change on the tax residence.

根據相關法律及監管機構就美國海外賬戶稅收合規法案及自動交換財務帳戶資料，如您更改稅務居民身份，本公司會要求您填寫相關的更改保單事項通知書以提供相關資料（包括但不限於出生地、住址、電話號碼、公民身份、居籍及稅務編號等等）及其他適用的相關表格。

I, the Policyowner, would like to apply for application/change/cancellation of the Life Insurance Proceeds Settlement Option to the above Policy. I agree the Company to pay the Life Insurance Proceeds to the designated Beneficiary(ies) in the above Policy by way of one of the following options as indicated. This application/change/cancellation supersedes the previous application(s)/change(s)/cancellation(s), if any.

本人保單持有人現就上述保單申請/更改/取消人壽保險金支付選擇。本人同意貴公司按以下所指定之選擇發放人壽保險金予上述保單內指定之受益人。此次申請/更改/取消將取代之前所曾作出之申請/更改/取消(如有)。

Choose one option only 只可揀選一個選擇：

- Installments to Beneficiary(ies)**

以分期形式支付予受益人

Please choose one of the following choices

請選擇以下其中一個選項

Choice 選項	Payment Frequency 分期支付形式	Payment Period (Year) 支付年期 (年)	Minimum Life Insurance Proceeds per Policy# 每張保單的最低人壽保險金#
<input type="checkbox"/>	Annually 按年	10	US\$ 美元 120,000 / HK\$ 港元 936,000
<input type="checkbox"/>	Annually 按年	20	US\$ 美元 120,000 / HK\$ 港元 936,000
<input type="checkbox"/>	Annually 按年	30	US\$ 美元 120,000 / HK\$ 港元 936,000
<input type="checkbox"/>	Monthly 按月	10	US\$ 美元 120,000 / HK\$ 港元 936,000
<input type="checkbox"/>	Monthly 按月	20	US\$ 美元 240,000 / HK\$ 港元 1,872,000
<input type="checkbox"/>	Monthly 按月	30	US\$ 美元 360,000 / HK\$ 港元 2,808,000

If the Life Insurance Proceeds payable is less than the minimum Life Insurance Proceeds per Policy under the selected choice, Life Insurance Proceeds will be paid to Beneficiary(ies) in a lump sum.

如須支付的人壽保險金少於已揀選之選項下每張保單的最低人壽保險金，人壽保險金將會以一筆過的形式支付予受益人。

- Cancellation of Life Insurance Proceeds Settlement Option**

取消人壽保險金支付選擇

Life Insurance Proceeds will be paid to Beneficiary(ies) in a lump sum.

人壽保險金將會以一筆過的形式支付予受益人。

- The below section is only applicable to eligible Policyowners. Please refer to item 11 of the Terms and Conditions.

以下部分只適用於合資格保單持有人。請參照條款及細則的第11點。

Designated Date of Life Insurance Proceeds Settlement Option

人壽保險金指定支付日期選擇

Name of Beneficiary

受益人姓名 _____

(dd日/mm月/yyyy年)

Name of Beneficiary

受益人姓名 _____

(dd日/mm月/yyyy年)

Terms and Conditions 條款及細則

- (1) This form is not applicable to Perpetual Life Series.
此表格不適用於世代傳承保險系列。
- (2) Life Insurance Proceeds Settlement Option is only applicable to specified products as determined by the Company from time to time. Please contact your Agent or Intermediary for details.
人壽保險金支付選擇只適用於公司指定產品並由本公司不時決定。詳情請與閣下的保險代理 / 中介人聯絡。
- (3) The Life Insurance Proceeds Settlement Option must be selected while the Insured is still alive. Only the Policyowner can apply/change/cancel Life Insurance Proceeds Settlement Option.
人壽保險金支付選擇必須於受保人在生時選擇。只有保單持有人可以申請/更改/取消人壽保險金支付選擇。
- (4) If there is more than one (1) Beneficiary designated, the Life Insurance Proceeds Settlement Options selected by the Policyowner shall be applied to all Beneficiaries. The Life Insurance Proceeds shall be first allocated to the Beneficiary(ies) in accordance with the proportion specified by the Policyowner, if any, before applying the above selected Life Insurance Proceeds Settlement Option.
如有多於一個指定受益人，由保單持有人所選定人壽保險金支付選擇將適用於所有受益人。在執行上述人壽保險金支付選擇前，人壽保險金將會先根據保單持有人指定之個別人壽保險金的份額（如有）分配至受益人。
- (5) If no Beneficiary is designated when the Life Insurance Proceeds are payable, the Life Insurance Proceeds will be paid in lump sum to Policyowner or his/her estate.
如支付身故賠償時沒有指定受益人，人壽保險金將會以一筆過的形式支付至保單持有人或其遺產。
- (6) If the Policy has been assigned / the Policyowner has been changed, Life Insurance Proceeds Settlement Option will be revoked and the Company will pay the Life Insurance Proceeds in a lump sum payment. After the Policy assignment is cancelled / the Policyowner has been changed, the Policyowner / the new Policyowner can apply Life Insurance Proceeds Settlement Option again.
如保單被轉讓/保單持有人被更改，人壽保險金支付選擇將會被撤回，本公司會以一筆過的形式支付人壽保險金。當保單轉讓已被取消或保單持有人已被更改後，保單持有人或新保單持有人可以再次申請人壽保險金支付選擇。
- (7) Installments to Beneficiary(ies) option is subject to minimum requirements, including but not limited to Minimum Life Insurance Proceeds per Policy, as determined by the Company from time to time.
人壽保險金支付選擇須符合由本公司不時決定之最低要求，包括但不限於每張保單的最低人壽保險金。
- (8) If Installments to Beneficiary(ies) option is selected, interest will accrue on any unpaid balance of the Life Insurance Proceeds until the full amount of Life Insurance Proceeds have been paid to the Beneficiary(ies). The interest rate will be determined by the Company from time to time at our discretion. The accumulated interest (if any) will be paid to the Beneficiary(ies) in the last installment.
如已選擇以分期形式支付予受益人，人壽保險金之未付餘額將獲利息直至全數人壽保險金已支付予受益人，其利率由本公司不時決定。積存的利息（如有）將於最後一期支付予受益人。
- (9) In the event a Beneficiary dies before the end of the selected Payment Period, the remaining balance of the Life Insurance Proceeds together with accrued interest (if any) will be paid to the estate of the deceased Beneficiary in a lump sum upon receipt of the proof of death of the Beneficiary. If there is more than one (1) Beneficiary designated, any surviving Beneficiary(ies) shall continue to receive his/her respective own portion of the Life Insurance Proceeds by installments.
如受益人於支付年期完結前身故，並當本公司被通知及收到有關已故受益人死亡證明後，人壽保險金之未付餘額及積存利息（如有）將會以一筆過的形式支付至其遺產。若有多於一名指定受益人，在生的受益人將繼續獲得他/她各自應佔人壽保險金的分期部分。
- (10) Any installments shall be paid to the Beneficiary(ies) through the Company's designated payment method. The Company reserves the right to change the date and/or method for making payment of the installments.
任何分期形式支付將根據本公司指定的付款形式派發予受益人。本公司保留權利更改支付分期支付之日期及 / 或方式。
- (11) The Designated Date of Life Insurance Proceeds Settlement Option is only applicable to the eligible Policyowners entitled in the previous Designated Date of Life Insurance Proceeds Settlement Option campaign offered from the Company.
人壽保險金指定支付日期選擇只適用於本公司於過往人壽保險金指定支付日期選擇的推廣活動中合資格的保單持有人。
- (12) The terms & conditions are subject to the Company's final decision and may be changed from time to time.
條款及細則須視乎公司最終決定及可能會不時修訂。

Declaration: I HEREBY DECLARE AND AGREE THAT: 1. The above request for application/change/cancellation of Life Insurance Proceeds settlement option will not take effect unless the following conditions are met: (i) Any required documents are submitted in full. (ii) The request is approved by Chubb Life Insurance Hong Kong Limited (hereinafter called "the Company") during the lifetime of the Insured or Insureds. 2. The request for application/change/cancellation of Life Insurance Proceeds settlement option shall be the basis for the application/change/cancellation in the settlement option and will form part of the Policy unless otherwise specified. 3. All statements whether or not written by my own hands are to the best of my knowledge and belief complete and true.

聲明：本人謹此聲明及同意：1. 上述之申請 / 更改 / 取消人壽保險金支付選擇必須符合下列所有條件方能生效：(i) 所有文件皆全數並完整無缺遞交。(ii) 申請在受保人在生時，經安達人壽保險香港有限公司（以下簡稱「貴公司」）批准。2. 此申請 / 更改 / 取消人壽保險金支付選擇之申請書將成為保單申請 / 更改 / 取消人壽保險金支付選擇之根據，並作為保單一部分（若有其他安排除外）。3. 上述一切陳述，不論是否本人親手所寫，就本人所知所信，均為事實之全部並確實無訛。

Personal Information Collection Statement And Consent 個人資料收集聲明及授權人

I/WE HEREBY ACKNOWLEDGE, DECLARE AND AGREE THAT, by signing this form, any personal information collected or held by Chubb Life Insurance Hong Kong Limited (the "Company") is provided and may be used, processed, stored, disclosed, transferred by the Company to the transferees indicated in and in accordance with the Personal Information Collection Statement set out in my/our Application For Life Insurance, which may include without limitation, any branch, subsidiary, holding company, associated company or affiliates of the Company (the "Group Companies"), its authorized agents, reinsurers, claims investigators, loss adjudicators, medical advisors, recovery agents, insurance industry associations and federations, credit reference agencies, government or judicial or regulatory bodies or any person to whom the Company is under legal and/or regulatory obligation to make disclosure, and the Company's appointed third party agents, contractors and advisors, in each case whether within or outside of Hong Kong and Mainland China. Moreover, the Company is hereby authorized to obtain access to and/or to verify any of my/our personal information with the information collected by the insurance industry associations, the federations, the government and regulatory bodies and medical personnel or organizations. I/We am/are obliged to supply the information required from me/us under this form which is a condition precedent for me/us to apply for the policy change request. Failure to supply the required information may result in the Company being unable to process the form. For more details of the Company's policies on personal information and privacy protection, please read the Company's Privacy Notice available at <https://www.chubb.com/hk-en/footer/chubb-life-privacy-policy.html>. Any questions regarding personal information, access to or correction of personal information should be made in writing and forwarded to The Data Protection Officer of Chubb Life Insurance Hong Kong Limited at 35/F, Chubb Tower, Windsor House, 311 Gloucester Road, Causeway Bay, Hong Kong.

就簽署此申請書，本人/吾等確認、聲明及同意安達人壽保險香港有限公司（「貴公司」）可以使用、處理、儲存、披露、轉移任何貴公司所收集或持有任何本人/吾等的個人資料至在本人/吾等的人壽保險申請書中的個人資料收集聲明所訂明的資料轉移接收方，包括但不限於，貴公司的任何分行、附屬公司、控股公司、聯營公司或聯繫公司（「集團公司」）、其獲授權的代理人、再保險公司、理賠調查公司、理賠調查員、醫療顧問、索償代理、保險行業協會及聯會、信貸資料機構、政府或司法或監管機構或對貴公司具有法律及/或監管責任而須予以披露的任何人士，及貴公司指定的第三方代理、承包商及顧問，不論在香港及中國大陸境內或境外。此外，貴公司獲授權向保險行業協會及聯會、政府及監管機構、及醫務人員或機構取閱及/或核實任何該等機構向本人/吾等收集之個人資料。本人/吾等有責任提供此申請書上所需資料，以作為申請保單更改要求之先決條件。如未能提供所需的資料，可能會導致貴公司無法處理本申請書。有關安達人壽保險香港有限公司個人資料及私隱保障政策的詳情，請參閱安達人壽保險香港有限公司的私隱政策，網址為 <https://www.chubb.com/hk-zh/footer/chubb-life-privacy-policy.html>。如欲查詢有關個人資料事宜，查閱或更正個人資料必須以書面形式向安達人壽保險香港有限公司的資料保護主任提出，並送交至香港銅鑼灣告士打道三一號皇室大廈安達人壽大樓三十五樓。

NOTE 注意：

Please do not sign on BLANK Form

請勿在空白表格上簽署

Signature specimen must be consistent with that as in your policy record

簽署式樣需與保單紀錄相符

Signature of Policyowner

保單持有人簽署

Sign Date (dd/mm/yyyy)

簽署日期（日/月/年）

Signature of Assignee

承讓入簽署

(Only applicable if the policy has been assigned)

(適用於此保單已被轉讓)

Signature of Irrevocable Beneficiary

不可撤銷受益人簽署

(Only applicable if the designated beneficiary is an Irrevocable Beneficiary)

(適用於此保單若指定受益人為不可撤銷受益人)

Sign Date (dd/mm/yyyy)

簽署日期（日/月/年）