

大額問卷 LARGE AMOUNT QUESTIONNAIRE

(所有金額應是港幣顯示。如需要，請註明其貨幣值 All amount should be in HK\$. Please specify the currency if necessary.)

(準)受保人姓名 Name of (Proposed) Insured	(準)保單持有人姓名 Name of (Proposed) Policyholder	要保書/保單編號 Application/Policy No.
保險中介人姓名 Insurance Intermediary's Name	保險中介人註冊編號 Insurance Intermediary's Registration Code	分行/中介人編號 Branch/ Intermediary's Code

第一部份 Part 1: 一般資料 General Information

1. 投保目的 PURPOSE OF INSURANCE				
<input type="checkbox"/> 家庭入息保障 (只須填第一部份) Family Protection (Complete Part 1 Only) <input type="checkbox"/> 要員保障 (須填寫第一及第二部份) Keyman Insurance Protection (Complete Part s1 & 2) <input type="checkbox"/> 合伙人保障 (須填寫第一部份及第三部份) Partnership Insurance Protection (Complete Parts 1 & 3) <input type="checkbox"/> 抵銷債務保障 (須填寫第一及第四部份) Loan Repayment / Mortgage Cancellation Protection (Complete Parts 1 & 4) <input type="checkbox"/> 其他 (請詳述之) Others (Please provide details) _____				
2. 請提供(準)受保人、其家庭成員及*公司合夥人現時仍生效或正在申請之壽險資料。Please give details of life insurance in force or being applied on (Proposed) Insured/Insured's family members and *business associates. (*只適用於合伙人壽險 applicable for partnership insurance)				
保險公司 Insurance Company	(準)受保人姓名 Name of (Proposed) Insured	要保書/保單編號 Application / Policy No.	承保金額 Coverage	投保日期 Application Date
3. 請詳細列明保額的計算方法 Please specify how the sum assured amount was calculated.				
4. 入息資料 Income Details - HK\$				
	年份 Year _____	年份 Year _____	年份 Year _____	
工作所得之年薪/入息 Earned Annual Income				
花紅/佣金 Bonuses/Dividends				
其他收入 Other Earned Income				
過去 12 個月所有非工作賺取之收入 Unearned Income in the past 12 months – HK\$				
租金收入 Rental Income		銀行存款利息收入 Interest from Bank Deposit		
商務投資淨利潤 Net Business Investment Profit		股份所得紅利 Dividend from Shares		
其他(請詳述) Others(please give details)				
5. 資產 Assets - HK\$				
申請書上聲明的居住地方是: Residence as stated on application is		<input type="checkbox"/> 擁有 owned <input type="checkbox"/> 租用 rented		
其他自置物業 (如多於三項，請另加紙填寫) Other Properties Owned (if more than three properties, please use separate paper)				
地址 Address	購買日期 Date of Purchase	購入價 Purchase Price	時值 Current Value	



現金及儲備 Cash and savings		持有股票及債券 Stocks and Bonds	
擁有私家車數量 No. of car(s) owned		擁有私家車型號 Model of the car(s) owned	
其他(例如持有的士牌照)Others (e.g. ownership of taxi license.)			
6. 負債 Liabilities			
按揭 Mortgage(s)	HK\$	私人貸款/透支/其他 Personal Loan(s) Overdraft / Others	HK\$
7. 估算淨資產值 Estimated Net Worth		HK\$	
8. 在職資料 Employment Information			
(準)受保人職業 (Proposed) Insured's occupation		入職日期 Commencement Date of Employment	
(準)受保人在公司主要職務 Main duties of the (Proposed) Insured			
9. 業務資料 Business Information - HK\$			
(準)受保人是否持有申請書上所述公司的股份或是該公司的合伙人? Is (Proposed) Insured a shareholder in the company or partner in the business as stated on the application? (請列明(準)受保人所佔比率及必須提供詳細資料 Please state the percentage owned by (Proposed) Insured and give details)			<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No
公司名稱 Name of Company		業務性質 Nature of Business	
擔任職位及年期 Position held and for how long		員工人數 No. of employee	
資產總值 Total Assets:		總債務 Total Liabilities	
所佔股份有限公司比率 Percentage of shares owned		淨商業資產值 Estimated Net Worth of the Business:	
	年份 Year _____	年份 Year _____	年份 Year _____
營業額 Business Turnover			
總收入/毛利 Gross Profit			
純利 Net Profit			
10. 生活方式 Family Life Style	a) 供養人數 No. of Dependents	b) 關係 Relationship	

第二部份 Part 2 :公司要員壽險 Keyman Insurance

1. 請提供(準)受保人為公司要員之原因 Please give details why the (Proposed) Insured is considered as a keyman to the company	
a) 認可的專業資格 Knowledge and Expertise	
b) 原因 Reasons	
2. 請列出(準)受保人公司其他要員的投保詳情(如有)。若否，請提供原因。 Please give details of insurance coverage for other key person(s) in the (Proposed) Insured's company(if any). If no, please provide reasons	
a) 要員姓名 Name of Keyperson	
b) 職位 Position	
c) 壽險金額 Amount of Life Cover(HK\$)	
d) 原因 Reasons	
3. 請詳細列明保額的計算方法 Please specify how the sum assured amount was calculated	



第三部份 Part 3： 合伙人保險 Partnership Insurance

1. 有否簽訂合伙人同意書或買賣合約? Is there a Partnership Agreement and / or Buy & Sell Agreement? (請提供買賣合約及市值報告 please submit Buy & Sell Agreement and current official valuation report)		<input type="checkbox"/> 是 Yes	<input type="checkbox"/> 否 No
2. 公司的資產市值是多少? What is the estimated current value of the Company?		HK\$	
3. 是否所有股東/合夥人均已投保? 如是, 請詳述。若否, 請提供原因。 Are policies affected on all shareholders/ partners? If yes, please give details. If no, please provide reasons.		<input type="checkbox"/> 是 Yes	<input type="checkbox"/> 否 No
合伙人/股東之姓名 Name of Partner(s)/ Shareholder(s)		壽險金額 Amount of Life Cover HK\$	
原因 Reasons			

第四部份 Part 4 :商業借貸保障 Business Loan Protection

請提供貸款合約以作參考。Please submit Loan Agreement for reference.

貸款人姓名 Name of Lender		貸款額 Loan Amount	
還款期 Repayment Period		借款目的 Purpose of the Loan	
借貸日期 Commencement Date of the Loan			

第五部份 Part 5 :僱員福利投保(如適用) For Employee Benefit Application(If Applicable)

(準)保單持有人是否為所有相同職級員工投保相同保險金額? Is it true that the (Proposed) Policyholder has applied or is applying equivalent insurance amount for all employee(s) of similar position?	<input type="checkbox"/> 是 Yes	<input type="checkbox"/> 否 No
如否, 請解釋原因 If No, please explain		

本人謹此聲明, 本人所作以上陳述為事實之全部, 並同意該等陳述將作為本人致中國人壽保險(海外)股份有限公司的上述要保書一部份。如有任何不正確或虛報資料, 續發之保單將根據貴公司的選擇而無效或可使無效。

I declare that the above statements are full, complete and true, and agree that they shall form part of my application above mentioned to China Life Insurance (Overseas) Company Limited and that any untrue or inaccurate statement shall render the policy issued may be void or voidable at the option of the Company.

本人確認已閱讀及明白中國人壽(海外)股份有限公司的收集個人資料聲明。有關最新版本的收集個人資料聲明, 可於 www.chinalife.com.hk 下載或向中國人壽(海外)股份有限公司索取。I confirm that I have read and understood the personal information collection statement of China Life Insurance (Overseas) Company Limited. For the latest version of the personal information collection statement, it can be downloaded from www.chinalife.com.hk or is made available upon request.

保險中介人簽署
Insurance Intermediary's Signature

(準)保單持有人簽署
Proposed Policyholder's Signature

(準)受保人簽署 (若年齡在 18 歲或以上)
Proposed Insured's Signature (If age 18 or above)

_____/_____/_____
年 Year 月 Month 日 Day

