

## 財務需要分析表 Financial Needs Analysis Form

### 重要事項 IMPORTANT NOTES

- 此表格應由(準)保單持有人以正楷填寫及簽署。This form is to be filled in BLOCK LETTERS and signed by (Proposed) Policyholder.
- 請在適當的格內填上「√」。Please tick the appropriate boxes where applicable.
- 請回答此財務需要分析的所有問題。如有任何未回答的問題未被刪去，請不要在表格上簽署。Please answer all questions in this Financial Needs Analysis. Do NOT sign on this form if any questions are unanswered and have not been crossed out.

(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 I

A. (準)保單持有人之個人資料 Personal Particulars of (Proposed) Policyholder			
(準)保單持有人姓名 (Proposed) Policyholder's Name		出生日期 Date of Birth	____/____/____ 年 Year 月 Month 日 Day
性別 Sex	<input type="checkbox"/> 男 M <input type="checkbox"/> 女 F	婚姻狀況 Marital Status	<input type="checkbox"/> 未婚 Single <input type="checkbox"/> 已婚 Married <input type="checkbox"/> 其他 Others
職業 Occupation		需要供養的家庭成員數目 No. of Dependent(s)	
聯絡電話 Contact No.		教育程度 Education Level	<input type="checkbox"/> 小學或以下 Primary or below <input type="checkbox"/> 中學 Secondary <input type="checkbox"/> 大專或以上 Post Secondary or above
住宅地址 Residential Address			
閣下是否患有殘障或疾病(如失明、末期疾病等)而可能令閣下(1)難以理解保險產品或(2)陷於財政困難而難以維持生計? Are you suffering from any impairments or illness(es) (e.g. blindness, terminal illness(es) etc) which may cause you (1) have difficulty in understanding insurance product(s) or (2) suffer financial hardship in sustaining your living?			<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No

B. (準)保單持有人之個人財務狀況 Personal Financial Details of (Proposed) Policyholder			
收入 Income	每月收入 Monthly Income (HK\$)	家庭開支 Financial Outgoings	每月支出 Monthly Outgoings (HK\$)
薪金 Salary		家庭生活支出 Family Living expenses	
花紅 Bonus		保險保費 Insurance premium	
租金收入 Rental Income		按揭供款/租金 Mortgage Repayment/rental	
其他經常收入(如家用) Other recurring income e.g. family contributions		其他開支(如私人貸款等) Other expenses(e.g. personal loan etc)	
每月總收入 Monthly Total Income (A)		每月總支出 Monthly Total Outgoings (B)	
每月淨收入 Monthly Net Income	(C) = (A) - (B)	HK\$	
全年總淨收入 Total Annual Net Income	(D) = (C) x 12	HK\$	

C. (準)保單持有人之個人資產狀況 Personal Wealth Details of (Proposed) Policyholder			
流動資產 Liquid Assets	HK\$	債務 Liabilities	HK\$
現金及銀行存款 Cash and deposit(s) in bank		欠債/貸款額 (物業按揭貸款除外) Outstanding debts/loan (excluding mortgage loan) (F1)	
其他流動資產 Other liquid assets (如股票/證券/債券/互惠基金/單位信託等 e.g. Stocks / Securities / Bonds / Mutual Funds / Unit Trust etc)		物業按揭貸款額 Outstanding mortgage loan (F2)	
流動資產總值 Total Liquid Assets (E)		總債務 Total Liabilities (F3) = (F1) + (F2)	
流動資產總淨值 Total Net Liquid assets	(G) = (E) - (F1)	HK\$	
固定資產值(如房地產) Fixed Assets(e.g. Real Estate )	(H)	HK\$	
資產總淨值 Total Net Assets	(I) = (E)+ (H) - (F3)	HK\$	

  

D. 家庭保障計劃 Family Protection Planning			
家庭負擔 Family Commitments	HK\$	保險保障 Insurance Protections	HK\$
未來家庭生活總支出 Total Future Family Living Expenses		現有人壽保障金額 Existing Life Insurance Coverage	
教育支出需要 Education Expenses Needs		正在申請中的人壽保障金額 Life Insurance Coverage Applying	
負債(按揭/借貸等) Liabilities(Mortgage Loan /Debts etc)		現有及申請中的人壽保障金額 Total Life Coverage Including Applying (K)	
其他支出 (善終費用/遺產稅等) Other Expenses (Funeral Expenses/Estate Duties etc)			
總家庭負擔 Total Family Commitments (J)			
總家庭保障需要 Total Family Protection Needs	(L) = (J) - (K) - (E)	HK\$	

  

E. 退休計劃 Retirement Planning			
預計退休年齡 Expected Retirement age		所需退休生活年期 Years of Retirement Life Needed (N)	
預計每年開支 Expected Annual Expenses (M)	HK\$	退休預算總金額 Total Retirement Budget (O) =(M) x (N)	HK\$
預期退休後可得總額(如公積金/強積金) Expected Total Available Monies After Retirement (e.g. ORSO /MPF) (P)	HK\$		
總退休儲備需要 Total Retirement Fund Needed	(Q) = (O) - (P)	HK\$	

  

F. 儲蓄計劃 Savings Planning			
預期每年可儲蓄金額 Intended Annual Savings (R)	HK\$	預期可負擔儲蓄年期 Years of Savings Affordable (S)	
預期總儲蓄金額 Expected Total Savings Amount	(T) = ( R ) x (S)	HK\$	

  

G. 危疾/醫療保障計劃 Critical Illness/Medical Protection Planning			
預期危疾/醫療保障需要 Critical Illness /Medical Protection Needs (U)	HK\$	現有危疾/醫療保障金額 Existing Critical Illness/Medical Coverage (V)	HK\$
危疾/醫療保障需要 Critical Illness/Medical Protection needs	(W) = ( U ) - (V)	HK\$	



## 第二部份「財務需要分析」Part II Financial Needs Analysis

[註：閣下必須回答此問題。請不要留空。如閣下不回答，本公司必須拒絕閣下的申請。]

[Note: You must reply this question. Do not leave it blank. We will reject your application if you do not reply.]

1 閣下選購本公司產品的目標為何？(可選多於一項)

What are your objectives of buying our product? (tick one or more)

- ☐ (a) 為應付不時之需的財務保障 (例如：死亡、意外、殘疾等) Financial protection against adversities (e.g. death, accident, disability etc)
- ☐ (b) 為醫療需要作準備(例如：危疾、住院等) Preparation for health care needs (e.g. critical illness, hospitalization etc)
- ☐ (c) 為未來提供定期的收入(例如：退休收入等) Providing regular income in the future (e.g. retirement income etc)
- ☐ (d) 為未來需要儲備(例如：子女教育、退休等) Saving up for the future (e.g. child education, retirement etc)
- ☐ (e) 投資Investment
- ☐ (f) 其他Others(請詳述Please specify \_\_\_\_\_)

[註：閣下必須回答此問題。請不要留空。如閣下不回答，本公司必須拒絕閣下的申請。]

[Note: You must reply this question. Do not leave it blank. We will reject your application if you do not reply.]

2 閣下考慮以哪種類型的保險產品迎合閣下上述的目標？(可選多於一項)

What type(s) of insurance products you are looking for to meet your objectives above? (tick one or more)

- ☐ (a) 純保險產品(沒有任何儲蓄或投資的成份) (例如：定期保險)  
Pure insurance product (without any savings or investment element) (e.g. term insurance)
- ☐ (b) 有儲蓄成份的保險產品(有儲蓄但沒有投資成份) (例如：非分紅保單)  
Insurance product with savings element (with savings but without investment element)(e.g. non-participating policy)
- ☐ (c) 有投資成份的保險產品(投資決定和風險由保險公司承擔) (例如：分紅保單、萬用壽險)  
Insurance product with investment element(Investment decisions and risks borne by insurer) (e.g. participating policy, universal life insurance)
- ☐ (d) 有投資成份的保險產品(投資決定和風險由保單持有人承擔) (例如：投資相連保險計劃)  
Insurance product with investment element (Investment decisions and risks borne by policyholder) (e.g. Investment-Linked Assurance Schemes)
- ☐ (e) 其他Others(請註明Please specify \_\_\_\_\_)

[註：閣下必須回答此問題。請不要留空。如閣下不回答，本公司必須拒絕閣下的申請。]

[Note: You must reply this question. Do not leave it blank. We will reject your application if you do not reply.]

3 閣下投保保單及/或投資計劃的目標得益/保障年期為多久？(請選一項)

What is your target benefit / protection period for insurance policy and/or investment plan? (tick one)

- (a) ☐ 少於 < 1 年 year (b) ☐ 1-5 年 years (c) ☐ 6-10 年 years (d) ☐ 11-20 年 years
- (e) ☐ 超過 > 20 年 years (f) ☐ 終身 Whole of life

[註：閣下必須至少回答 4(a) 或 4(b)。如閣下不欲回答其中一條，請將之刪去。]

[Note: You must reply at least either 4(a) or (b). If you do not wish to answer either one of them, please cross it out.]

4 閣下繳付保費的負擔能力 Your ability to pay premiums:

(a) 在過去兩年裡，閣下由所有收入來源所得的每月平均收入為？(可選多於一項)

What is your average monthly income from all sources in the past 2 years? (tick one or more)

i. ☐ 具體金額 Specific amount: 每月不少於 Not less than HK\$\_\_\_\_\_ per month

或 or

ii. ☐ 在以下範圍內 In the following range:

- (1) ☐ 少於 < HK\$10,000 (2) ☐ HK\$10,000 - HK\$19,999 (3) ☐ HK\$20,000 - HK\$49,999 (4) ☐ HK\$50,000 - HK\$99,999
- (5) ☐ HK\$100,000 - HK\$199,999 (6) ☐ 超過 > HK\$200,000

(b) 閣下現時累積的流動資產約有多少？請註明種類及金額：

What is your approximate current accumulative amount of liquid assets? Please specify type(s) and total amount:

- i. 種類: (1) ☐ 現金Cash (5) ☐ 債券及互惠基金Bonds and mutual funds
- Type: (2) ☐ 銀行存款Money in the bank accounts (6) ☐ 美國國庫債券 US Treasury bills
- (3) ☐ 貨幣市場賬戶Money market accounts (7) ☐ 其他Others(請詳述 Please specify \_\_\_\_\_)
- (4) ☐ 交投活躍的股票Actively traded stocks

及 and

ii. 金額 Amount: HK\$ \_\_\_\_\_

註Note:

流動資產是指可以容易於變為現金的資產。物業、錢幣收藏和藝術品均不被視為流動資產。

Liquid assets are assets which may be easily turned into cash. Real estate, coin collection and artwork are not considered to be liquid assets.

如閣下選擇不在上述4(a)或(b)透露閣下的收入/資產資料，閣下必須在下欄內親筆詳述有關原因。如閣下選擇同時不回應上述4(a)及(b)，本公司必須拒絕閣下的申請。

If you choose not to disclose income/asset information under 4(a) or (b) above, you must indicate your reason(s) **in your own handwriting** in the box below. Please note that we (the insurance company) will **reject your application** if you **choose not to respond to both 4(a) and (b)** above.

((準)保單持有人必須親筆於此欄內提供原因)((Proposed) Policyholder must complete explanation in **own** handwriting in this box.)

[註：閣下必須回答以下 4(c)、(d)及(e)。請不要留空任何一條問題。如閣下不回答，本公司必須拒絕閣下的申請。]

[Note: You must reply 4 (c), (d) and (e) below. Do not leave any of these questions blank. We will reject your application if you do not reply.]

(c) 閣下能夠及願意支付保單及/或投資計劃的年期為？(請選一項)

For how long are you able and willing to contribute to an insurance policy and/or investment plan? (tick one)

- (1) ☐ 少於 < 1 年 year (2) ☐ 1-5 年 years (3) ☐ 6-10 年 years (4) ☐ 11-20 年 years
- (5) ☐ 超過 > 20 年 years (6) ☐ 終身 Whole of life



(d) i. 就閣下在(c)所選擇的保單/投資計劃之整段供款年內，閣下每月可承擔的保費佔閣下個人可動用收入比率為？(請選一項)  
Approximately what percentage of your disposable income would you be able to use to pay your monthly premium for the entire term of the insurance policy/investment plan in (c) above? (tick one)  
(1) ☐ 少於 < 10% (2) ☐ 10% - 20% (3) ☐ 21% - 30% (4) ☐ 31% - 40% (5) ☐ 41% - 50% (6) ☐ 超過 > 50%

及 and

(d) ii. 就閣下在(c)所選擇的保單/投資計劃之整段供款年內，閣下可承擔的保費佔閣下個人的流動資產總淨值比率為？(請選一項)  
Approximately what percentage of your net liquid assets would you be able to use to pay premium for the entire term of the insurance policy/investment plan in (c) above? (tick one)  
(1) ☐ 少於 < 10% (2) ☐ 10% - 20% (3) ☐ 21% - 30% (4) ☐ 31% - 40% (5) ☐ 41% - 50% (6) ☐ 超過 > 50%

(e) 就閣下繳付保費的能力，請註明閣下的資金來源？(可選多於一項)  
In considering your ability to make payments, what are your sources of funds? (tick one or more)  
(1) ☐ 薪酬 salary (2) ☐ 收入 income (3) ☐ 儲蓄 savings (4) ☐ 投資 investments (5) ☐ 其他 others(請詳述 Please specify \_\_\_\_\_)

5 根據閣下的上述選項，中介人曾與閣下討論下列保險產品的選擇(因應中介人所能提供的產品)，以迎合閣下選購保險產品的目標及滿足閣下的需要：  
Based on your answers to the questions above, the intermediary concerned has explored the following insurance options (as available to the intermediary) to meet your objective(s) and need(s):

i. 選購產品的目標(問題1) Objective(s) of Buying the Product(s) (Q1)	ii. 曾討論的保險產品的類型(問題2) Type(s) of Insurance Product Explored (Q2)	iii. 曾介紹的保險產品名稱(如有) Name of Insurance Product(s) Introduced (if any)	iv. 最終選購的產品(如有) Product(s) Selected (if any)

中介人建議理由 Reason(s) for Recommendation by Insurance Intermediary

## 收集個人資料聲明 PERSONAL INFORMATION COLLECTION STATEMENT

中國人壽保險(海外)股份有限公司(於中華人民共和國註冊成立之股份有限公司)(下稱“本公司”)明白其在《個人資料(私隱)條例》下就個人資料的收集、持有、處理或使用所負有的責任。本公司僅為合法和相關的目的收集個人資料，並將採取一切切實可行的步驟，確保本公司所持個人資料的準確性。本公司將採取一切切實可行的步驟，確保個人資料的安全性，及避免發生未經授權或者因意外而擅自取得、刪除或另行使用個人資料的情況。閣下的個人資料為自願提供。敬請注意，如果閣下不向本公司提供所需的個人資料，本公司可能無法提供閣下要求的資料、產品或服務。

目的：本公司不時有必要使用閣下的個人資料作下列用途：

- 向閣下推介、提供和營銷本公司、中國人壽保險(海外)集團的其他公司(“本公司關聯方”)或本公司聯合品牌合作夥伴的產品/服務(參閱下文“為直接促銷目的而使用個人資料”部份)；以及提供、維持、管理和操作該等產品/服務；
- 處理和評估閣下就本公司及本公司關聯方的產品/服務提出的任何申請或要求；
- 向閣下提供後續服務(包括但不限於健康檢測和/或健康管理服務)及執行/管理已發出的保單，例如增加、更改、變更、撤銷、續期或恢復；
- 就本公司和/或本公司關聯方提供的任何產品/服務而由閣下或其他索賠方提出的、針對閣下或其他索賠方提出的、或者其他涉及閣下或其他索賠方的任何索賠相關的任何目的，包括對索賠進行調查；
- 評估閣下的財務需求；
- 為本公司和/或本公司關聯方設計新的產品/服務或改進現有的產品/服務；
- 為本公司和/或本公司關聯方、金融服務行業或相關的監管機構的統計或類似目的進行市場或精算研究；
- 基於本聲明所列的任何目的，將本公司不時持有並與閣下有關的任何資料進行調查；
- 滿足任何適用法律、規則、規例、實務守則或指引規定的要求，或協助在香港或香港以外其他地方的警方或其他政府或監管機構執法及進行調查；
- 進行身份和/或信用核查和/或債務追收；
- 開展與本公司業務經營有關的其他服務；
- 就閣下在本公司持有的任何帳戶或本收集個人資料聲明(“本聲明”)未來的變更發出行政性通訊；
- 根據第112章《稅務條例》中自動交換財務帳戶資料的規定，進行所需的盡職審查程序；及
- 與上述任何目的直接有關的其他目的。

個人資料的移轉：個人資料將予以保密，但在遵守任何適用法律條文的前提下，可移轉予：

- 任何本公司關聯方；
- 就本公司和/或本公司關聯方提供的任何產品/服務而由閣下或針對閣下提出的、或者其他涉及閣下的任何索賠相關的任何人士(包括私人調查方和索賠調查公司)；
- 就本公司和/或本公司關聯方所提供產品/服務提供服務的任何代理、承包商或第三方，包括任何再保險公司、保險中介、基金管理公司、健康管理機構或金融機構；
- 就業務經營關係向本公司和/或本公司關聯方提供行政、技術、數據處理、電訊、電腦、支付、債務追收、電話中心服務、直接促銷服務或其他服務的任何代理、承包商或第三方；
- 協助收集閣下資料或與閣下聯絡的其他公司，例如研究公司、信貸資料機構或(在出現拖欠還款的情況下)追討欠款公司；
- 本公司權利或業務的任何實際或建議的承讓人、受讓方、參與者或次參與者；
- 任何適用法律、規定、法規、實務守則或指引要求或規定本公司和/或本公司關聯方向其作出披露的任何政府部門或其他適當的政府或監管機關(被移轉的資料或會進一步轉交予其他司法管轄區的政府部門或適當的政府或監管機關)；及
- 任何金融服務供應商的行業協會或聯會。

閣下的個人資料可能會提供給上述任何一方(該方可能位於香港境內或境外)。而就此而言，閣下同意將閣下的資料移轉至香港境外。

閣下的個人資料將僅為上文規定的一個或多個有關目的而被移轉。如欲瞭解本公司為推廣或促銷目的而使用閣下的個人資料的政策，請參閱下文“為直接促銷目的而使用個人資料”部份。



## 收集個人資料聲明 PERSONAL INFORMATION COLLECTION STATEMENT

為直接促銷目的而使用個人資料：本公司打算：

1. 使用本公司不時持有的閣下的姓名、聯絡資料、產品和服務的組合資料、交易模式和行為、財政背景和統計數據以進行直接促銷；
2. 就本公司、本公司關聯方和本公司聯合品牌合作夥伴可能提供下列類別的產品和服務進行直接促銷（包括提供獎賞、客戶或會員或優惠計劃）：
  - (a) 保險、年金、銀行、財富管理、退休計劃、投資、金融服務、信用卡、證券以及相關產品和服務；及
  - (b) 有關健康、保健及醫療、餐飲、體育活動、會籍及相關產品和服務；
3. 上述產品和服務將可能由本公司和/或下列機構提供：
  - (a) 任何本公司關聯方；
  - (b) 第三方金融機構；
  - (c) 提供本部份第 2 段所列的產品及服務的本公司和/或關聯方之聯合品牌合作夥伴；
  - (d) 第三方獎賞、客戶或會員或優惠計劃的提供者；及
  - (e) 支援本公司或任何以上所列機構提供本部份第 2 段所列的產品及服務的外部服務提供者。
4. 除由本公司促銷上述產品和服務外，本公司亦有意將本部份第 1 段所述的資料提供予本部份第 3 段所述的全部或任何人士，以供該等人士作促銷該等產品及服務之用。
5. 本公司需取得閣下的書面同意（包括表示不反對）方可為任何推廣或促銷目的而使用並向上文所述的第三方提供資料。

閣下可隨時撤回給予本公司有關使用閣下的個人資料及提供予第三方作直接促銷用途的同意，而本公司將在不收取任何費用的情況下停止使用該等資料作直接促銷用途。閣下如欲撤回閣下給予本公司的同意，請聯絡本公司的個人資料保護主任（詳情參閱下文）。

**個人資料的查閱和更正：**根據《個人資料（私隱）條例》，閣下有權查明本公司是否持有閣下的個人資料，獲取該資料的副本，更正任何不準確的資料，以及查明本公司有關個人資料的政策及常規。閣下還可以要求本公司告知閣下本公司所持個人資料的種類。

查閱和更正的要求，或有關獲取政策、常規及所持的資料種類的資料，均應以書面形式發送至：

個人資料保護主任

中國人壽保險（海外）股份有限公司

香港灣仔軒尼詩道 313 號中國人壽大廈 22 樓

電話：(+852) 3999 5519

傳真：(+852) 2892 0520

本公司可能會向閣下收取合理的費用，以抵銷本公司為執行閣下的資料查閱要求而引致的行政和實際費用。

在本聲明中，下列詞語將具有以下的含義：

“中國人壽保險（海外）集團”指本公司、本公司任何附屬公司、本公司任何關聯公司、本公司任何相聯公司、以及本公司的直接和/或間接母公司、任何該等母公司的任何附屬公司、它們的任何關聯公司、它們的任何相聯公司，包括，為避免疑義，中國人壽保險（集團）公司集團內之公司（“集團成員”應作相應解釋）；和  
“附屬公司”、“母公司”和“公司”均具有《公司條例》（第 622 章）項下之含義。

China Life Insurance (Overseas) Company Limited (the “Company”) recognizes its responsibilities in relation to the collection, holding, processing or use of personal data under the Personal Data (Privacy) Ordinance. Personal data will be collected only for lawful and relevant purposes and all practicable steps will be taken to ensure that personal data held by the Company is accurate. The Company will take all practicable steps to ensure security of the personal data and to avoid unauthorized or accidental access, erasure or other use. The provision of your personal data is voluntary. Please note that if you do not provide us with the required personal information, the Company may not be able to provide your requested information, products or services.

**Purpose:** From time to time it is necessary for us to use your personal data for the following purposes:

1. offering, providing and marketing to you the products/services of the Company, other companies of the China Life Insurance (Overseas) Group (“our affiliates”) or our co-branding partners (see “Use of Personal Data for Direct Marketing Purposes” below), and administering, maintaining, managing and operating such products/services;
2. processing and evaluating any applications or requests made by you for products/services offered by the Company and our affiliates;
3. providing subsequent services (including but not limited to health inspection / management) to you and administering the policies issued e.g. additions, alterations, variations, cancellation, renewal or reinstatement;
4. any purposes in connection with any claims made by or against or otherwise involving you or other claimants in respect of any products/services provided by the Company and/or our affiliates, including investigation of claims;
5. evaluating your financial needs;
6. designing new or enhancing existing products/services of the Company and our affiliates;
7. conducting market or actuarial research for statistical or similar purposes undertaken by the Company and/or our affiliates, the financial services industry or our respective regulators;
8. matching any data held which relates to you from time to time for any of the purposes listed herein;
9. meeting requirements imposed by any applicable law, rules, regulations, codes of practice or guidelines or assisting with law enforcement purposes, investigations by police or other government or regulatory authorities in Hong Kong or elsewhere;
10. conducting identity and/or credit checks and/or debt collection;
11. carrying out other services in connection with the operation of the Company's business;
12. sending out administrative communications about any account you may have with the Company or about future changes to this Personal Information Collection Statement (“PICS”);
13. performing relevant due diligence procedures in accordance with the Common Reporting Standard (or Automatic Exchange of Financial Account Information) as set out in the Inland Revenue Ordinance (Cap. 112); and
14. other purposes directly relating to any of the above.

**Transfer of personal data:** Personal data will be kept confidential but, subject to the provisions of any applicable law, may be transferred to:

1. any of our affiliates;
2. any person (including private investigators and claims investigation companies) in connection with any claims made by or against or otherwise involving you in respect of any products/services provided by the Company and/or our affiliates;
3. any agent, contractor or third party who provide services in connection with the product/services provided by the Company and/or our affiliates, including any reinsurance company, insurance intermediary, fund management company, health management institution or financial institution;
4. any agent, contractor or third party who provides administrative, technology, data processing, telecommunications, computer, payment, debt collection, call centre services, direct marketing services or other services to the Company and/or our affiliates in connection with the operation of its business;
5. other companies who help gather your information or communicate with you, such as research companies and credit reference agencies or, in the event of default, debt collection agencies;
6. any actual or proposed assignee, transferee, participant or sub-participant of our rights or business;
7. any government department or other appropriate governmental or regulatory authority (which may be further transferred to governmental or regulatory authority of certain other jurisdiction(s)) to whom the Company and/or our affiliates are requested or required by any applicable law, rules, regulations, codes of practice or guidelines to make disclosures; and
8. any financial services provider industry association or federation.

Your personal data may be provided to any of the above parties who may be located in Hong Kong or outside of Hong Kong, and in this regard you consent to the transfer of your data outside of Hong Kong.

Transfer of your personal data will only be made for one or more of the purposes specified above. For our policy on using your personal data for promotional or marketing purposes, please see the section entitled “Use of Personal Data for Direct Marketing Purposes”.



## 收集個人資料聲明 PERSONAL INFORMATION COLLECTION STATEMENT

**Use of Personal Data for Direct Marketing Purposes:** The Company intends to:

1. Use your name, contact details, products and services portfolio information, transaction pattern and behaviour, financial background and demographic data held by the Company from time to time for direct marketing;
2. Conduct direct marketing (including providing reward, loyalty or privileges programmes) in relation to the following classes of products and services that the Company, our affiliates and our co-branding partners may offer:
  - (a) insurance, annuities, banking, wealth management, retirement plans, investment, financial services, credit cards, securities and related products and services; and
  - (b) health, wellness and medical, food and beverage, sporting activities, memberships and related products and services;
3. The above products and services may be provided by the Company and/or:
  - (a) any of our affiliates;
  - (b) third party financial institutions;
  - (c) the co-branding partners of the Company and/or affiliates providing the products and services set out in 2;
  - (d) third party reward, loyalty or privileges programme providers; and
  - (e) external service providers supporting the Company or any of the above listed entities in providing the products and services set out in 2.
4. In addition to marketing the above products and services, the Company also intends to transfer provide the data described in 1 above to all or any of the persons described in 3 above for use by them in marketing those products and services.
5. The Company requires your written consent (which includes an indication of no objection) to use and provide the data to the third parties as set out above for any promotional or marketing purpose.

You may withdraw your consent to the use and provision to a third party of your personal data for direct marketing purposes at any time, and thereafter the Company shall, without charge to you, cease to use such data for direct marketing purposes. If you wish to withdraw your consent, please contact the Company's Personal Data Protection Officer (details below).

**Access and correction of personal data:** Under the Personal Data (Privacy) Ordinance, you have the right to ascertain whether the Company holds your personal data, to obtain a copy of the data, to correct any data that is inaccurate, and to ascertain the Company's policies and practices in relation to personal data. You may also request the Company to inform you of the type of personal data held by it.

Requests for access and correction or for information regarding policies and practices and types of data held should be addressed in writing to:

The Personal Data Protection Officer  
China Life Insurance (Overseas) Company Limited  
22/F, CLI Building, 313 Hennessy Road,  
Wan Chai, Hong Kong  
Telephone: (+852) 3999 5519  
Fax: (+852) 2892 0520

A reasonable fee may be charged to offset the Company's administrative and actual costs incurred in complying with your access requests.

In this statement, the following terms shall have these following meanings:-

"The China Life Insurance (Overseas) Group" means the Company, any subsidiary undertaking of the Company, any related company of the Company, any associated company of the Company, and direct and/or indirect parent undertaking of the Company, any subsidiary undertaking of any such parent undertaking, any of their related companies, any of their associated companies including, for the avoidance of doubt, undertaking within the group of China Life Insurance (Group) Company (and "Group member" shall be construed accordingly); and

The expressions "subsidiary undertaking", "parent undertaking" and "undertaking" bear the meanings under the Companies Ordinance (Cap.622)

**聲明和授權:** 本人/我們確認本人/我們已閱讀並明白收集個人資料聲明(“本聲明”)。本人/我們特此確認並同意公司根據本聲明使用和移轉本人/我們的個人資料, 包括為直接促銷之目的使用和提供本人/我們的個人資料。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/我們確認並同意為本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本聲明所述的承轉人的類別。

**重要提示:** 請於以下簽署部份簽名, 以示閣下同意。若閣下不同意根據“為直接促銷目的而使用個人資料”部份所述為直接促銷之目的而使用和提供閣下的個人資料, 請在以下方格劃上“✓”號。

**Declaration and authorization:** I/We acknowledge and confirm that I/we have read and understood the Personal Information Collection Statement (“PICS”). 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 PICS, including the use and provision of my/our personal data for the purpose of direct marketing. 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 PICS.

**Important:** Please indicate your agreement by signing on the space provided below. If you do not agree to the use and provision of your personal data for direct marketing as set out in the section “Use of data in direct marketing”, please tick the box below.

- ☐ 本人/我們不同意根據以上收集個人資料聲明(參閱“為直接促銷目的而使用個人資料”部份)為直接促銷之目的而使用和提供本人/我們的個人資料, 亦不希望接收任何推廣及直接促銷材料。  
I / We do not agree with the use and provision of my / our personal data for direct marketing purposes as set out above in the Personal Information Collection Statement (see “Use and provision of personal data in direct marketing”) and do not wish to receive any promotional and direct marketing materials.

保險中介人簽署  
Insurance Intermediary's Signature

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

年 Year / 月 Month / 日 Day

**警告:** 請小心細閱及填寫本財務需要分析表格。請不要留空任何問題。如有任何未回答的問題未被刪去, 請不要在表格上簽署。

**WARNING:** Please read and fill in this form carefully. Do not leave any questions blank. Do NOT sign if any questions are unanswered and have not been crossed out.

**注意 Note:**

若財務需要分析表格上填報的資料有重大改變, 閣下在保單未簽發前, 必須通知本公司。

You are required to inform us (the insurance company) if there is any substantial change of information provided in this form before the policy is issued.

