

仅留结有人辦夕 Nama of Daliayhaldar



投資相連壽險計劃服務申請表

Request for Investment-Linked Assurance Scheme Policy Services

請在適當的格內填上「√」。Please tick the appropriate boxes where applicable.

M手17月八江口 Name of FolicyHolder	文 M 八 左 T Name of moured	l-	小牛咖啡 Fulley No.									
保險中介人資料 Insurance Intermediary's Information												
保險中介人姓名 Name of Insurance Intermediary												
												_
保險中介人代碼 Insurance Intermediary's Code	聯絡電話 Conta	ct No.										
		1 1 1	<u> </u>	1	1	1		1	ı	1	ı	J

重要須知 IMPORTANT NOTES

- 本表格只適用於康富盈豐投資保險計劃。This form is only applicable for Wealth Builder Investment-Linked Plan.
- 本表格中所用之「本公司」或「貴公司」之表述指中國人壽保險(海外)股份有限公司。The expression "the Company" used in this form refers to China Life Insurance (Overseas) Company Limited.
- 只接受正本表格及本表格應以正楷填寫及由保單持有人簽名、簽名式樣須與本公司的記錄相符。保單持有人亦必須於本表格內任何曾 修改的地方簽署作實。Only original form is accepted and this form is to be completed in BLOCK LETTERS and signed by the Policyholder with the signature correspond with the Company's record. Any amendments in this form must be countersigned by the Policyholder in full signature.
- 保險中介人或銀行職員收到本表格並不代表本公司亦已收妥。Receipt of this form by Insurance Intermediary or Bank Staff does not constitute receipt by the Company.
- 本公司有權隨時更新本申請表格·並接受或拒絕未符合本公司要求的申請表。請登入本公司網站 www.chinalife.com.hk 瀏覽及下載最新版 本 • The Company has the right to update this form from time to time and to accept or to reject the form if the Company's requirements are not fulfilled. Please visit our website www.chinalife.com.hk to view and download the latest version of the form.
- 如有任何稅務地區變更·請提交《自我證明表格》。If there is any change of the tax residence, please submit "Self-Certification Form".
- 如申請未能符合本公司的有關規定·本公司有權拒絕有關申請。The Company shall have right to reject the application if the application fails to fulfill Company's requirement(s).
- 閣下在申請投資選項轉換或更改新供款分配前,請閣下必須了解該投資選項及相關基金的性質及風險,如交易對手風險、信用風險: 流動性風險、外匯風險和市場風險等・並需要持有足夠的淨資產承擔與所選投資選項有關的相關風險並承擔有關的潛在損失;否則・ 閣下不應選擇該投資選項。Please consider the nature and risks of the investment option(s) and its underlying fund(s) such as counterparty risk, credit risk, liquidity risk, foreign exchange risk, market risk, etc, and make sure you have sufficient net worth to assume the risks and bear the potential losses of trading in relation to the investment option(s) selected before applying for switching of investment option(s) or change of new contribution allocation. Otherwise, please do not select.
- 閣下在申請投資選項轉換、更改新供款分配時投資選擇的風險水平可能與閣下在最新的《風險承擔能力問卷》中所述的風險承受程度 不一致,這投資選項轉換或投資選項分配更改可能並不符合閣下的最佳利益。 因此,閣下須注意有關不一致所引致的潛在風險。如果 閣下想轉換或更改投資選項分配與閣下的風險承受程度不一致的投資選擇,建議閣下再次進行《風險承擔能力問卷》,或者在適當的情 況下閣下應尋求專業建議。Please be aware that the risk level of the investment option(s) that you intend to select for switching or change of new contribution allocation may be inconsistent with your risk tolerance level stated in the latest Risk Profile Questionnaire ("RPQ") and such switching or change of investment option allocation may not be in your best interest. Therefore, you should be aware of the possible risks associated with such mismatch and is recommended to conduct a RPQ again if you would like to switch into or change of new contribution allocation to the investment option(s) that would result in a mismatch or you should seek professional advice where appropriate.
- 如閣下所選的投資選項連繫至的相關基金被歸類為衍生產品基金,閣下或因而可能需承受額外相關風險。此等相關基金的波幅或因衍 生產品的使用而上升或下降,或因而出現虧損。詳情請參閱各相關基金的銷售文件。You may be exposed to additional associated risks if you are investing in investment option(s) of which underlying fund(s) is/are classified as derivative fund(s). The volatility of these underlying fund(s) may increase or decrease from their derivative usage, and may suffer losses. Please refer to the offering documents of the respective underlying fund(s) for details.



保單號	保單號碼 Policy No.							
第一部份 更改新供款分配 Part 1 Change of New Contribution Allocation								
第一部份 更改新供款分配 Part 1 Change of New Contribution Allocation 重要須知 Important Note: 若閣下進行投資選項轉換或更改新供款分配,而所涉及的投資選項風險級別高於閣下可承受的風部份確認接受有關的風險差異及閣下就此項申請 / 更改的最終決定。 If you apply for switching of invallocation, and any investment option(s) with risk rating higher than your risk tolerance level, please reconsider and such risk mismatch and your final decision to proceed with your application. 1.1 更改新供款投資選項分配 Change of New Contribution Investment Option Allocation 注意事項 Notes: 1.1.1 每項投資選項的分配百分比最少為 20%及必須為整數。The minimum percentage of allocation to ea must be an integer. 1.1.2 每個保費戶口的所有投資選項的投資分配總額必須為 100%。Total allocation of all investment option	ivestme	ent option plete Parameter	art 3 to	o confi	ge of ne rm your 0% and t	w contraccept	ributior ance or centage	
投資選項Investment Options		投資 Code o	選項	代號 stmen	新供 New	款投ī Contri Allocat 基本保	資分配 ibution ion	
□ 中國人壽富達基金 - 環球主題機遇基金 China Life Fidelity Funds – Global Thematic Opportunities Fun	nd		FDIN				.00	
□ 中國人壽富達基金 - 美元債券基金China Life Fidelity Funds – US Dollar Bond Fund			FDUB				.00	
中國人壽富達基金 - 美國基金China Life Fidelity Funds – America Fund		!	FDAM				.00	
中國人壽富達基金 - 大中華基金China Life Fidelity Funds – Greater China Fund			FDGC	;			.00	
新供款投資分配總額Total of New Contribution Investment Option Allocation	I.						100.00	
只適用於所認購之投資選項的相關基金被香港證券及期貨事務監察委員會界定為衍生產品基金。有關衍生產品基金的界定,請瀏覽本公司的網頁 https://www.chinalife.com.hk/zh-hk/customer-service/forms-download/investment-linked-insurance-plan。Only applicable if the corresponding underlying fund(s) of the investment option(s) subscribed is/are classified as derivative fund(s) by the Securities and Futures Commission in Hong Kong. For the classification of derivative fund, please visit our website at https://www.chinalife.com.hk/zh-hk/customer-service/forms-download/investment-linked-insurance-plan. 你是否具有對投資於衍生工具的金融產品有相關的投資知識及經驗(例如曾買賣有衍生工具成份的基金或投資於該類相關基金的投資選項)?Do you have investment knowledge and experience in financial products with derivatives exposure (e.g. prior experience in trading derivative funds or in selecting derivative funds as underlying investment option(s) etc.)? □ 是 Yes □ 否 No (如閣下的答案是"否",請填寫第三部份。Please complete Part 3 if your answer is "NO".)								
1.2 更改保費 Change of Premium								
注意事項 Notes: 自 2021 年 7 月 15 日起,本公司停止接受就康富盈豐投資保險計劃的定期或一筆過額外投資保費 application of Regular or Lump Sum Top-up Premium for the Wealth Builder Investment-Linked Plan on and						r acce	pts the	

減少定期額外投資保費至 Reduce Regular Top-up Premium to (如非取消定期額外投資保費·最低的定期額外投資保費為每月 25 美元/每年 300 美元) If not Cancellation of Regular Top-up Premium, the minimum amount of Regular Top-up Premium is USD25 per month/USD300 per year).

美元 USD

第二部份 調動現有投資選項 Part 2 Switching of Investment Options

重要須知 Important Note:

若閣下進行投資選項轉換或更改新供款分配・而所涉及的投資選項風險級別高於閣下可承受的風險程度・請閣下再慎重考慮・及填寫第三 部份確認接受有關的風險差異及閣下就此項申請/更改的最終決定。If you apply for switching of investment options or change of new contribution allocation, and any investment options with risk rating higher than your risk tolerance level, please reconsider and complete Part 3 to confirm your acceptance of such risk mismatch and your final decision to proceed with your application.

注意事項 Notes:

- 1. 如閣下於較早前遞交的《風險承擔能力問卷》內所提供的資料有重大變更及/或閣下所提供的問卷已超過 12 個月·我們建議閣下重新填 寫該問卷以評估閣下之風險承受程度。有關投資選項的風險級別詳情,請瀏覽本公司網頁或聯絡閣下的保險中介人。You are advised to complete the RPQ to assess your risk profile again if there are any material changes to the information in the questionnaire provided previously and / or the questionnaire provided was submitted over 12 months. Please visit our website or contact your insurance intermediary for details of the risk level of investment option(s).
- 2. 最低轉換金額為100美元。Minimum switch amount is USD100.
- 3. 每保單年度的首四次投資選項轉換可以免手續費用·其後每次轉換均需收費5美元。Four free switching in each policy year, exceeding which, each subsequent switching for the policy year shall impose a charge of USD5.
- 4. 調動現有投資選項並不影響現有保費分配·如需更改現有保費的投資分配·請填寫第一部份1.1。Switching of existing Investment Options would not affect the investment allocation of existing premium. Please complete 1.1 of Part 1 for change of investment allocation of existing premium if needed

第二部份 調動現有投資選項 (續) Part 2 Switching of Investment Options (Continued)			
2.1 基本保費投資戶口Basic Premium Investment Account			
投資選項 Investment Options	投資選項代號 Code of Investment Option	轉換出 Switch Out	轉換入 Switch In
□ 中國人壽富達基金 - 環球主題機遇基金 China Life Fidelity Funds – Global Thematic Opportunities Fund	FDIN	.00%	.00%
□ 中國人壽富達基金 - 美元債券基金China Life Fidelity Funds – US Dollar Bond Fund	FDUB	.00%	.00%
□ 中國人壽富達基金 - 美國基金China Life Fidelity Funds – America Fund	FDAM	.00%	.00%
□ 中國人壽富達基金 - 大中華基金China Life Fidelity Funds – Greater China Fund	FDGC	.00%	.00%
2.2 額外投資保費戶口Top-up Premium Investment Account			
投資選項 Investment Options	投資選項代號 Code of Investment Option	轉換出 Switch Out	轉換入 Switch In
一 中國人壽富達基金 - 環球主題機遇基金 China Life Fidelity Funds – Global Thematic Opportunities Fund	FDIN	.00%	.00%
中國人壽富達基金 - 美元債券基金China Life Fidelity Funds – US Dollar Bond Fund	FDUB	.00%	.00%
□ 中國人壽富達基金 - 美國基金China Life Fidelity Funds – America Fund	FDAM	.00%	.00%
□ 中國人壽富達基金 - 大中華基金China Life Fidelity Funds – Greater China Fund	FDGC	.00%	.00%
只適用於所認購之投資選項的相關基金被香港證券及期貨事務監察委員會界定為衍的網頁https://www.chinalife.com.hk/zh-hk/customer-service/forms-download/investment-linked-institund(s) of the investment option(s) subscribed is/are classified as derivative fund(s) by the Securities derivative fund, please visit our website at https://www.chinalife.com.hk/zh-hk/customer-service/form/你是否具有對投資於衍生工具的金融產品有相關的投資知識及經驗(例如曾買賣有項)?Do you have investment knowledge and experience in financial products with derivatives exselecting derivative funds as underlying investment option(s) etc.)? 是 Yes 否 No	urance-plan。Only app s and Futures Commiss is-download/investmen 衍生工具成份的基金	olicable if the corresponsion in Hong Kong. Fo tit-linked-insurance-pla 金或投資於該類相關	onding underlying or the classification of in. 關基金的投資選

第三部份 保單持有人之合適性聲明 Part 3 Policyholder's Suitability Declaration

(如閣下的答案是"否"·請填寫第三部份。Please complete Part 3 if your answer is "NO".)

注意事項Notes:

此部分<mark>只適用於更改新供款投資選項分配 / 調動現有投資選項的申請 。 This part is <u>ONLY applicable for the request of Change of New Contribution</u> <u>Investment Option Allocation/ Switching of Investment Options.</u></mark>

建議閣下應於投資前填寫《風險承擔能力問卷》以評估閣下現時之風險承受程度。否則,我們會以閣下於較早前遞交的《風險承擔能力問卷》內所提供的資料評估閣下之風險承擔能力。如閣下從未填寫《風險承擔能力問卷》,閣下之風險承擔能力將會被假定為最低。You are advised to conduct a RPQ to assess your risk profile before investing; otherwise, we will assess your application based on your risk tolerance level as indicated in your last RPQ in our record or we may assume you have low risk tolerance level if you have not conducted any RPQ on our record.

請填妥此部份如 Please complete this part if

- (i) 所認購/轉入之投資選項的相關基金被定為衍生產品基金·而閣下對投資於衍生工具的金融產品沒有相關的投資知識及/或經驗(例如沒曾買賣相關基金的投資選項)The corresponding underlying fund(s) of the investment subscribed / switched in is /are classified as derivative fund(s), but you do not have any investment knowledge and / or experience in financial products with derivatives exposure (e.g. prior experience in trading investment option(s) etc.)
- 及/或 and/or
- (ii) 將認購 / 或轉入投資選項與閣下的風險承受程度不相符 the risk level of the investment option (s) to be subscribed / switched in is / are inconsistent with your risk tolerance level.

請注意,上述(i)和(ii)錯配的情況反映此等交易可能並不適合閣下,而當中涉及的額外風險可能未能符合閣下的最佳利益。閣下應於投資前填寫《風險承擔能力問卷》以評估閣下現時之風險承受程度。有關投資選項的風險級別詳情,請瀏覽本公司網頁或聯絡閣下的保險中介人。 Please be reminded the mismatch as referred to in (i) and (ii) above implies that such transaction(s) may not be suitable for you and may not be in your best interest with additional risks associated, and you are advised to conduct an RPQ to assess your up-to-date risk profile before investing. Please visit our website or contact your insurance intermediary for details of the risk level of investment option(s).

第三部份 保單持有人之合適性聲明(續) Part 3 Policyholder's So	uitability Declaration (Continued)	
本人/我們(保單持有人)完全明白並同意儘管根據本人/ 能力及知識(包括對衍生產品的相關投資知識)等資料,」 選項組合(例如,投資選項連繫的相關基金具有衍生工具成 並可能因此需承受額外相關風險,但本人/我們(保單持 連壽險計劃保單。I/We, the Policyholder, understand and agree th Scheme ("ILAS") policy and/or my/our selected mix of underlying inve not be suitable for me/us based on my/our risk profile and knowledge of as a result of which I/we may be exposed to additional associated risks as explained below.	此投連壽險計劃保單之特點及/或風險; 战份)可能並不適合本人/我們(保單持 写人)確認基於下述原因·本人/我們(at despite the fact that the features and/or risk I stment option(s) (for example, underlying funds (including investment knowledge in derivatives)	水平及 / 或本人所選擇的相關投資 有人)· 本人 / 我們 (保單持有人) 保單持有人) 打算及意欲申請此投 evel of this Investment-Linked Assurance s selected with derivatives exposure) may , etc. as indicated in the RPQ (if any) and
本人 / 我們(保單持有人)完全明白·中國人壽保險(海外新供款分配及 / 或投資選項轉換申請是否適合本人 / 我們的據本人 / 我們提供的解釋而可能接受或拒絕本人 / 我們的Company Limited is required to take account of my/our stated explanswitching of Investment Option(s) is / are suitable for me/us. I/we unclimited may accept or reject my/our application.	(保單持有人);本人/我們明白中國人 I申請。I/We, the Policyholder, fully understar ation for assessing whether a particular Chang	壽保險 (海外)股份有限公司將根nd that China Life Insurance (Overseas) e of New Contribution Allocation and / or
(/只哭牡夫人),(否协证期内担供区	5 EL . Deliauhaldas saust susuida avulasatios is	this have
(床单持有人必須於此懶內提供房	原因。Policyholder must provide explanation in	tnis dox.)
第四部份 贖回 Part 4 Redemption (請同時填第七部份及第十部份	份 Please complete Part 7 & Part 10)	
注意事項 Notes:	7) Flease complete Fait / & Fait 10)	
1. 每次最低贖回金額為100美元·而贖回後之最低戶口結餘不可	」以少於500美元。Minimum amount for eac	h redemption is USD100 and remaining
account value after redemption could not be less than USD500. 2. 請填寫第七部份「付款指示及領款方式」及第十部分「轉保	聲明」。Please complete Part 7 "Payment Ins	struction and Payment Method" & Part 10
"Policy Replacement Declaration"	•	·
3. 請提交保單持有人的有效身份證明文件副本 · 以便本公司]處理閣下的申請。Please submit a copy	of the Policyholder's valid identification
document(s) to the Company in order to process your request.	戶口類別Account Type	贖回百分比Redemption Percentage
□ 中國人壽富達基金 - 環球主題機遇基金	基本賬戶Basic Account	.00%
China Life Fidelity Funds – Global Thematic Opportunities Fund (FDIN)		.00%
□ 中國人壽富達基金 - 美元債券基金	■ 基本賬戶Basic Account	.00%
China Life Fidelity Funds – US Dollar Bond Fund (FDUB)	── 額外賬戶Regular Top-up Account	.00%
□ 中國人壽富達基金 - 美國基金	基本賬戶Basic Account	.00%
China Life Fidelity Funds – America Fund (FDAM)	☐ 額外賬戶Regular Top-up Account	.00%
□ 中國人壽富達基金 - 大中華基金	■ 基本賬戶Basic Account	.00%
China Life Fidelity Funds – Greater China Fund (FDGC)	■ 額外賬戶Regular Top-up Account	.00%

保單號碼 Policy No.

第五部份 供款假期/恢復繳付保費 Part 5 Premium Holiday/Resumption of P	ayment										
注意事項 Notes: 1. 若申請「行使供款假期」,請同時填寫第十部分「轉保聲明」。Please complete Part 10 "Policy Replacement Declaration" when applying for Commencement of Premium Holiday. 2. 申請會在下一個繳至日起開始生效。The request will be effective from the next paid-to-date.											
☐ 行使供款假期Commencement of Premium Holiday											
□ 終止供款假期及恢復繳付保費Cessation of Premium Holiday and resume premium payment											
第六部份 全數退保 Part 6 Full Surrender (請同時填寫第七部份及第十部分	Please complete Par	rt 7 & I	Part 10)							
注意事項 Notes: 1. 請填寫第七部份「付款指示及領款方式」及第十部分「轉保聲明」。Please complete Part 7 "Payment Instruction and Payment Method" & Part 10 "Policy Replacement Declaration".										0	
2. 請退回保險合約·如已遺失保險合約·請剔選「保險合約遺失聲明」 Lost Policy".	Please return the Pol	licy Co	ontract, o	otherwi	se ple	ase se	elect the '	"Declar	ation o	of	
3. 請提交保單持有人的有效身份證明文件副本·以便本公司處理閣下的eto the Company in order to process your request.	申請。Please submit c	copy of	f the Poli	cyhold	er's va	alid ide	entificatio	n docui	ment(s	3)	
保單退保 Policy Surrender 本人現將上述保單全數退保及要求根據以下第七部份「付款指示及領款方式」的指示退回退保價值(如有)。 I hereby fully surrender the above policy and request for disbursement of surrender value (if any) according to the instruction in Part 7 "Payment Instruction and Payment Method". (重要事項:保單一經退保·在任何情況下均不可以復效及/或還原。Important Note: The Policy cannot be reinstated or restored in any circumstance after surrendered.) 保險合約遺失聲明 Declaration of Lost Policy 本人謹此確認已遺失保險合約,並在本人盡力尋找下未有尋獲。如該保險合約今後被尋獲,本人同意將盡快交回 貴公司。I hereby declare that the Policy Contract was lost and could not be found to the best of my/our effort. I agree to return the Policy Contract to the Company if I subsequently recover the Policy Contract.									'.) by		
第七部份 付款指示及領款方式 Part 7 Payment Instruction and Payment Meth	ıod										
7.1 付款指示 Payment Instruction (如沒有註明·款項將以保單貨幣發出	If not indicate, payments	ent will	l be paid	in the	policy	y curre	ncy.)				
☐ 保單貨幣 Policy Currency											
□ 港元 HKD											
7.2 領款方式(請選擇其中一種方式) Payment Method (Please select one	of the options)										
□ 7.2.1 入賬至保單持有人指定香港銀行賬戶 Credit to designated Hong K	Cong Bank Account of	f Polic	cyholder	r							
 銀行賬戶持有人必須為保單持有人。Bank account holder must be the Policyl 請提交銀行存摺首頁影印本或相關資料·顯示銀行賬戶持有人姓名及賬that can show the name of bank account holder and account no 倘未有足夠資料顯示銀行賬戶持有人為保單持有人或因故未能成功/insufficient information to confirm the Policyholder is the holder of the relevant bank paid in cheques and sent to the Policyholder by ordinary post. 	長戶號碼。Please subr 入賬.有關款項將J	以劃絲	線支票	形式郵	郵寄 :	予保單	単持有 <i>人</i>	∖∘ If t	there i	is	
銀行名稱 Name of Bank 銀行編號 Bank No.	分行編號 Branch No.	銀名	行賬戶	號碼 /	4ccou	ınt No.					
		L	1 1]	
	賬戶持有人姓名(剪 Name of bank account I										

保單號碼 Policy No.

		<u>6</u>	保單號碼 Policy No.							
第七部份	付款指示及領款方式(續) Part 7 Pavm	ent Instruction and Payment Method (Continued	d)							
	支票支付 Cheque Payment	· · · · · · · · · · · · · · · · · · ·	- <i>1</i>							
	平郵寄往保單持有人在本公司記錄的通	配訊地址 By mail to the correspondence address o	f Policyhol	lder in the C	Company	record by	y ordina	ry post		
	經保險中介人轉遞 Deliver via Insurance In	ntermediary								
	親身到分行領取支票 Pick up cheque at Bi	ranch in person								
	分行名稱/編號 Branch Name/Code									
	親身到客戶服務中心領取支票 Pick up cheque at Customer Service Centre in person									
	☐ 授權人領取 Pick up cheque in person	on by authorized person								
	授權人姓名	授權人聯絡電話		授權人	身份證明	月文件號	碼			
	Name of authorized person	Contact no. of authorized person		I.D. no.	of author	ized pers	on			
		L								
第八部份	個人資料收集聲明 Part 8 Personal Information	ation Collection Statement								
www.chinali	<u>ife.com.hk</u> 下載或向本公司索取。I confirm)股份有限公司」的收集個人資料聲明 that I/we have read and understood the Personal li on of the PICS, it can be downloaded from <u>www.ch</u>	nformation	Collection	Stateme	ent ("PICS	S") of Cl			
		of Premium Levy on Individual Life Insurance P								
本人謹此確認: 貴公司就保險業監管局要求並授權向每位保單持有人所持有的有效保單徵收「保費徵費」(下稱「徵費」)·及將收取的保費徵費將會全數轉交予該局。保險業監管局亦可以根據相關條例·將有關的欠付款作為民事債項及向相關的保單持有人追討欠款並有機會徵收罰款。有關收取徵費的詳情·請瀏覽中國人壽(海外)股份有限公司的網頁 www.chinalife.com.hk/levy。 I hereby acknowledge that: China Life Insurance (Overseas) Company Limited, as an authorized insurer, is statutorily required to collect Premium Levy ("Levy") from policyholder on behalf of the Insurance Authority ("IA") and report to IA. IA may take legal proceedings against policyholder in respect of any outstanding Levy as civil debt and may impose pecuniary penalty. For details of the collection of Levy, please refer to the website at www.chinalife.com.hk/levy。								有關收 alf of the		
第十部份	轉保聲明 Part 10 Policy Replacement Decla	aration								
注意事項 若申請贖[Notes:	請填寫此部分內容 ∘ Please complete this part ≀	when app	lying for fu	nd redei	mption, c	ommer	ncement		
閣下是否使用或打算使用此人壽保險保單的部分或全部資金·或使用或打算使用通過減少此人壽保險保單的應付保費而節省的金額·以資助閣下於過去 12 個月內新申請的人壽保險保單(如有)?例如·該等資金或金額可能來自從閣下此投資相連人壽保險單中贖回的基金價值或申請提取保單退保價值·或來自從閣下通過使此投資相連人壽保險單行使供款假期而節省的保費。如是·該等情況將被視為「轉保」。Are you using or do you intend to use some or all of the funds arising from the above-mentioned policy, or any savings made by reducing the premium payable under the above-mentioned policy, in order to fund the new life insurance policy (if any) which is purchased within 12 months prior to the date of this application? For example, such funds or savings may arise from applying fund redemption or policy surrender, or from reducing the premium payable of the above-mentioned policy by commencement of premium. If yes, such conditions will be considered as Policy Replacement.										
是	Yes									
□ 尚非	未決定 Not Yet Decided									
□ 否	No									
polic	cy in the past 12 months)	所的人壽保險保單) Not applicable (Applicable	to those v	who have n	ot purcha	ased a ne	w life in	isurance		
註 Notes: 「轉保」		閣下的權益・請仔細比較現有保單與新保單	直的條款	· 衡量轉係	呆是否?	守合本身	h的最佳	 手利益,		

閣下應尋求專業意見以了解相關風險及轉保的不利後果·並細閱本公司的網站 www.chinalife.com.hk 的壽險轉保須知以了解有關詳情。You may suffer loss in case of Policy Replacement. To protect your interest, you should carefully consider your existing and the new insurance policies and assess whether the Policy Replacement is in your best interests before making a decision. You should seek professional advice to understand the associated risks and potential disadvantages of Policy Replacement. For details, please visit our website at www.chinalife.com.hk to view the useful tips on Life Insurance Policy Replacement.

保單號碼 Policy No.										

第十一部份 聲明及簽署 Part 11 Declaration & Signature

- 1. 本表格必須於保單持有人簽署日起計30天內交至本公司辦理手續。This form must be received by the Company within 30 days from the date of the Policyholder's signature.
- 2. 若保單持有人以圖章蓋印簽署,必須有一位見證人,見證人必須為年滿18歲或以上的第三者。見證人之個人資料只會用於處理本申請及確認本表格簽署人的身份之用。If the Policyholder uses a signature chop, a witness is required. The witness must be an individual third party aged 18 or above. The personal particulars of the witness will only be used for the purpose of verification and confirmation of the identity of the signatory of this form.
- 3. 請勿在空白表格上簽署。Please DO NOT sign on BLANK form.

本人僅此確認及同意以下各點:I hereby confirm and agree the following points:

- 1. 為準確執行本人的指示,本人須準確地指示所選擇的項目及/或所選擇的投資選項名稱,如指示不完整,將導致指示被延遲處理,貴公司毋須對因延遲而招致的任何直接、間接、特別或相應損失或損害承擔責任。To execute my instruction accurately, I need to indicate my selection and/or instruction clearly. Any incomplete instruction will result a delay in processing my selection or instruction and the Company shall not be liable for any direct, indirect, special or consequential loss of damages arising from such delay.
- 2. 倘若貴公司於任何一日內收到本人就相同或不同交易發出超過一項指示,或於收到本表格時仍有未完成或進行中的交易,貴公司可全權酌情決定處理該等指示的先後次序或延遲處理本人的指示。貴公司亦毋須因此而招致任何直接、間接的損失或承擔任何形式的責任。If more than one instruction is received in respect of the same/different transactions for the same policy on any single day, or if any transactions are pending for investment or processing or is in progress at the receipt date of this instruction, the Company has the sole discretion to determine priority in dealing with such instructions or to defer this instruction. In such circumstances, the Company shall not be liable for any loss/damages whatsoever or howsoever arising from such delay.
- 3. 在填寫本表格前,已仔細閱讀主要銷售刊物、產品資料概要、投資選項刊物及相關文件。I have read the Principal Brochure, the Product Key Facts Statement, Investment Choice Brochure and relevant documents carefully before completing this application form.
- 4. 在本表格上提出的指示是本人的個人決定·並沒有依賴保險中介人所提供的意見。本人完全明白投資在投資相連壽險計劃所涉及之風險·相關基金單位價格可升亦可跌。此計劃的可支付利益與就上述保單所投資的相關基金表現連繫。My instruction as indicated on this application is made based on my own judgment and I have not relied on any advice provided by insurance intermediary. I fully understand that investment in Investment Linked Assurance Scheme involves risks and value of units in underlying funds may rise or fall. The benefits payable under such plan are linked to the performance of the underlying funds invested in respect of the above policy.

本人僅此確認已閱讀及明白以上申請的所有條款及條件·並同意受該等條款及條件約束。本人僅此同意作出以上協議及聲明。I hereby confirm that I have read and understood all the terms and conditions of the above request, and agree to be bound by the same. I hereby agree to make the above agreements and declarations.

and additional											
	保	岩單持有人 Policyhold	er	見證人(如適用) Witness (if applicable)							
簽署或公司印鑑 Signature and/or Company Chop											
姓名 Name											
身份證明文件號碼 Identity Document No.											
日期 Date	年 Year	月 Month	⊟ Day	年 Year	月 Month	⊟ Day					