



請掃二維碼登入
客戶專頁，即時
辦理保單更改或
查閱進度。

<https://cs.chinalife.com.hk>

更改保單持有人/ 受益人為信託人之保障聲明書

Declaration and Indemnity Form for Change of Policyholder/Beneficiary to Trustee

保單持有人姓名 Name of Policyholder	受保人姓名 Name of Insured	保單編號 Policy No.

*若受保人並非保單持有人，請填寫此部份。 If the Insured is different from the Policyholder, please complete this part.

保險中介人資料 Insurance Intermediary's Information	
保險中介人姓名 Name of Insurance Intermediary	
分行/中介人編號/註冊編號 Branch/ Intermediary Code/ Registration Code	聯絡電話 Contact No.

重要須知 Important Notes	
1. 本保障聲明書所用之「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，「保單」之表述指第二部份所述保單，「該信託」之表述指第三部份所述信託，「此申請」之表述指變更之保單持有人及/或受益人為信託人的申請。The expression "the Company" or "your Company" used in this form refers to China Life Insurance (Overseas) Company Limited. The expression "the Policy" used in this form refers to the policy stated in Part II. The expression "the Trust" used in this form refers to the trust stated in Part III. The expression "the Application" used in this form refers to an application to change the Policyholder and/or the Beneficiary to the Trustee. 2. 請填寫本保障聲明書，聯同保單權益轉讓申請表(CS-CHG02)¹或保單捐贈及更改保單受益人申請表(CS-CHG06)²（視乎何者適用）及信託合約副本，或根據信託條款提供其他證明文件交回本公司處理。本保障聲明書的內容構成此申請的一部份。Please complete this Declaration and Indemnity Form and return it to the Company for processing, together with Request for Change of Policy Ownership Transfer (CS-CHG02)¹ or Policy Donation and Beneficiary Appointment Form (CS-CHG06)² (whichever is applicable) and a copy of executed Trust Deed, or other supporting documents provided in accordance with the terms of the Trust. The contents of this Declaration and Indemnity Form constitute part of the Application. 3. 本保障聲明書應由原保單持有人及/或受保人及信託人以正楷填妥及簽名，簽名式樣須與保單上的記錄相符。任何資料如有更改，原保單持有人必須在更改的位置簽署作實。This Declaration and Indemnity Form shall be completed and signed in BLOCK LETTERS by the current Policyholder and/or the Insured and Trustee with the signature same as recorded in the Policy. Any information is changed, the current Policyholder shall sign at the changed part to confirm that the change is true. 4. 所有遞交的身份證明文件，必須經由本公司的保險中介人認證。All identity documents submitted shall be certified by the insurance intermediary of the Company. 5. 保險中介人或銀行職員收到此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. 6. 根據信託人的身份及/或類別，原保單持有人所需提交的證明文件亦會不同，詳情請與本公司 / 保險中介人聯絡。Depending on the identity and/or type of the Trustee, the current Policyholder may have to submit different supporting documents. Please contact the Company/insurance intermediary for details. 7. 在有需要的情况下，本公司保留權利索取額外地址證明以作核實。The Company reserves the right to ask for an address certification for verification purpose, if necessary. 8. 若對此申請表及其效果於香港或其他地區的權力或責任或稅務地位有任何疑問，請自行諮詢財務、法律或稅務顧問。本公司不會提供，亦從無提供任何財務服務、法律或稅務建議，並且不會亦從無保證使用信託結構持有保單的效力或影響。本公司不會就因執行本保障聲明書或與本保障聲明書相關而產生的任何法律或稅務後果負責。If you have any questions about this Application Form and its effect, and the power or responsibility or tax status of this Application Form in Hong Kong or other regions, please consult your financial, legal or tax advisors. The Company will not provide, nor has it ever provided, any financial services, legal or tax advice; and will not guarantee, nor has it ever guaranteed the validity or impact of using a trust structure to hold the Policy. The Company shall not be responsible for any legal or tax consequences arising from the implementation of this Declaration and Indemnity Form or in connection with this Declaration and Indemnity Form. 9. 本公司有權隨時更新此申請表，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. 10. 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 the Company's requirement(s).	
註 Notes:	
1. 只適用於更改 i) 保單權益轉讓；或 ii) 保單權益轉讓及保單受益。Only applicable to changes of: i) Policy Ownership Transfer or ii) Policy Onership Transfer and Policy Beneficiary.	
2. 只適用於更改保單受益人。Only applicable to change of Policy Beneficiary.	

--	--	--	--	--	--	--	--	--	--

第 1 部份 更改類別 Part 1 Type of Application

請選擇更改的類別 (可選多於一項) Please indicate the type of application (more than one can be selected)

- ☐ 更改保單持有人為信託人 Change of Policy Ownership to Trustee
- ☐ 更改保單受益人為信託人 Change of Beneficiary to Trustee

第 2 部份 保單資料 Part 2 Policy Information

保單號碼 Policy Number	
受保人姓名 Name of the Insured	
原保單持有人姓名 Name of the Current Policyholder	
原保單受益人姓名 Name of the Current Beneficiary (ies)	

第 3 部份 信託資料 Part 3 Trust Information**新保單持有人/ 信託人資料 Information of New Policyholder/Trustee**

信託名稱 Name of the Trust	
信託成立日期 Establishment Date of the Trust	
新保單持有人/信託人姓名 Name of New Policyholder/Trustee	
香港身份證號碼/護照編號(如屬獨立受託人) Hong Kong Identity Card Number/Passport Number (if individual Trustee)	
新保單持有人/信託人住宅地址 Residential Address of New Policyholder/Trustee	
商業註冊登記號碼(如屬法人受託人): Business Registration Number (if corporate Trustee)	
財產託管人/委託人名稱 Name of the Grantor / Settlor	
財產託管人/委託人住宅地址 Residential Address of Grantor / Settlor	
信託管轄法律 Governing Laws of the Trust	
通訊地址 Correspondence address	

新保單受益人/ 信託人資料 Information of New Policy Beneficiaries/Trustee

英文全名/ 信託人名稱 Full Name in English/ Name of Trustee	中文全名/ 信託人名稱 Full Name in Chinese/Name of Trustee	香港身份證號碼/ 護照編號/商業註冊 登記號碼 HK ID Card/Passport No./ Company Registration No.	性別 Gender	出生日期 (年/月/日) Date of Birth (YY/MM/DD)	與保單受保人關係 Relationship with Policy Insured	分配百分比 Distribution Proportion
						%
						%
						%
						%

* 只與受保人存有可保利益關係的人才可接受為信託受益人 (通常僅指受保人的丈夫或妻子)

* Only persons who have insurable interests with the Insured can be accepted as the Beneficiary of the Trust (usually only referring to the husband or wife of the Insured).

--	--	--	--	--	--	--	--	--	--

第 3 部份 信託資料(續) Part 3 Trust Information (Continued)

信託人權力 Power of Trustee

如果除了信託人以外該信託有多於一位受託人 (請選擇以下其中一項。 If there are more than one trustee in the Trust besides the Trustee, please choose one of the following

- ☐ 任何受託人有權獨立執行受託人身份之權利。 Any trustee has the right to independently enforce the rights as a trustee.
- ☐ 所有受託人必須共同執行受託人身份之權利。 All trustees have to jointly enforce the rights as a trustee.
- ☐ 其他 (請明確說明) : Others (please specify): _____

除了信託人以外所有獲授權擔任該信託的受託人之人士 (下稱“獲授權受託人”) 的資料
Information on all persons authorized to act as trustees of the Trust other than the Trustee (hereinafter referred to as "authorized trustee")

英文全名 Full Name (in English)	中文全名 Full name (in Chinese)	地址 Address	職業 Occupation

獲授權受託人的聲明及簽署 Declarations and Signatures of Authorized Trustees

本人/我們為獲授權擔任該信託的受託人，謹此共同及個別地確認、同意及聲明如下：

I/We am/are authorized to act as trustee(s) of the Trust, and I/we hereby confirm, agree and declare (jointly and individually) as follows:

- 該信託授權信託人為受保人投保、持有和管理人壽保險。The authorized trustee of the Trust insures, holds and manages life insurance for the Insured.
- 本人/我們聲明該信託並沒有以任何方式被撤銷、更改或修訂而導致本保障聲明書包含的陳述不正確。如果該信託以任何方式被修訂以致變更任何在本保障聲明書作出的陳述 (包括對獲授權受託人的任何變更)，本人/我們同意提供新的聲明及簽署。 I/We declare that the Trust has not been revoked, altered or amended in any way to result in incorrect statements contained in this Declaration and Indemnity Form. If the Trust is amended in any way to change any of the statements made in this Declaration and Indemnity Form (including any changes to the authorized trustee), I/We agree to provide new declarations and signatures.
- 本人/我們同意貴公司 i) 不負責決定信託合約的合法性或其條款; ii) 將根據保單標準程序管理保單，並且沒有義務按照該信託的任何條款進行管理; iii) 可依賴信託人的陳述及指示; 及 iv) 沒有責任確定信託人的任何指示或陳述是否與該信託授予信託人的權限一致。 I/We agree that The Company i) is not responsible for determining the legality or terms of the Trust Agreement; ii) shall manage the Policy in accordance with the policy standard procedures and is not obliged to manage it in accordance with any terms of the Trust; iii) can rely on the statements and instructions of the Trustee; and iv) is not responsible for determining whether any instructions or statements of the Trustee are consistent with the authority granted to the Trustee by the Trust.
- 同意賠償 貴公司並使 貴公司免於遭受或承擔任何因依賴本保障聲明書的內容而產生或造成的任何責任、費用、開支、損害、損失、訴訟、索賠或罰款 (包括但不限於合理法律費用)。 I/We agree to indemnify The Company and to exempt The Company from suffering or undertaking any liability, expense, cost, damage, loss, litigation, claim or fine (including, but not limited to, reasonable legal fees) arising or resulting from relying on the contents of this Declaration and Indemnity Form.
- 本人/我們同意提供 貴公司要求的任何關於該信託的額外信息及文件。 I/We agree to provide any additional information and documents regarding the Trust as requested by the Company.
- 就有關信託鑒定事宜，應該自行諮詢本人/我們的財務、法律或稅務顧問，並且完全承擔一切基於信託持有保單所衍生的稅務後果。 In relation to trust certification, I/we shall consult with my/our financial, legal or tax advisors and assume full responsibility for all the tax consequences derived from the holding of the Policy by the Trust.

獲授權受託人姓名 Name of Authorized Trustee	職銜 Title	獲授權受託人簽署 Signature of Authorized Trustee

--	--	--	--	--	--	--	--	--	--

第 4 部份 信託形式 Part 4 Type of Trust

- ☐ 不可撤銷的。不能被財產授予人/委託人修改或撤銷全部或部份。Irrevocable and is in full force and effect. It cannot be amended or revoked, in whole or in part, by the Grantor /Settlor (s).
- ☐ 可撤銷的。能被財產授予人/委託人修改或撤銷全部或部份。Revocable and is in full force and effect. It can be amended or revoked, in whole or in part, by the Grantor /Settlor (s).

第 5 部份 聲明及授權 Part 5 Declaration and Authorization**原保單持有人/受保人及信託人的聲明及授權 Declarations and Authorizations of Current Policyholder/Insured and Trustee**

為使 貴公司同意接受此申請，原保單持有人/受保人及/或信託人，謹此共同及個別地按適用情況確認、同意及聲明如下： In order for The Company to agree to accept the Application, the Current Policyholder/Insured and/or Trustee, as applicable, jointly and individually confirm, agree and declare as follows:

1. 該信託的條款允許信託人為受保人投保人壽保險。The terms of the Trust allow the Trustee to insure life insurance for the Insured.
2. 若原保單持有人/受保人及/或信託人對此申請及其效果對原保單持有人/受保人及/或信託人於香港或其他地區的權力或責任或稅務地位有任何疑問，原保單持有人/受保人及/或信託人應該自行諮詢原保單持有人/受保人及/或信託人的財務、法律或稅務顧問。貴公司不會提供，亦從無提供原保單持有人/受保人及/或信託人任何財務服務、法律或稅務建議，並且不會亦從無保證使用信託結構持有保單的效力或影響。貴公司不會就原保單持有人/受保人及/或信託人因執行此申請或與此申請相關而產生的任何法律或稅務後果負責。If the Current Policyholder/Insured and/or Trustee have any questions about the Application and its effect, and the power or responsibility or tax status of the Current Policyholder/Insured and/or Trustee in Hong Kong or other regions, please consult the financial, legal or tax advisors of the Current Policyholder/Insured and/or Trustee. The Company will not provide, nor has it ever provided, any financial services, legal or tax advice to the Current Policyholder/Insured and/or Trustee; and will not guarantee, nor has it ever guaranteed the validity or impact of using a trust structure to hold the Policy. The Company shall not be responsible for any legal or tax consequences of the Current Policyholder/Insured and/or Trustee arising from the implementation of the Application or in connection with the Application.
3. 貴公司沒有能力亦不負責決定該信託的合法性或其條款（包括但不限於信託契約的條款）、信託人的授權或要求或審閱信託的條款及不為瞭解信託的條款而負責。The Company has no responsibility to determine the legality or terms of the Trust (including but not limited to the terms of the Trust Agreement), the authorization or requirements of the Trustee or to review the terms of the Trust, and is not responsible for understanding the terms of the Trust.
4. 此申請指定任何保單持有人/受益人將受限於保單條款及條件、任何保單負債及任何作出該指定前或後的保單抵用。Any Policyholder/Beneficiary designated by the Application shall be subject to the terms and conditions of the Policy, any policy debts and any policy offsets existing before or after the designation.
5. 此申請不受約束於任何事先協定、合約義務、法律訴訟及/或法院指定而限制或禁止更改保單持有人或受益人。如存在該些限制，原保單持有人/受保人及/或信託人必須連同此申請向 貴公司提交有關人士的書面同意。倘因此申請生效後才發現的責任，以致 貴公司不接納此申請（或轉換保單持有人必須先取得非原保單持有人之第三者同意），此申請將即時失效。如 貴公司因此申請的有關更改而引致有任何損失、損害、法律責任、訴訟索償、要求及開支，原保單持有人/受保人及/或信託人同意對 貴公司作出補償並保證 貴公司不受損害。該信託允許信託人行使由保單的擁有權所提供的全部權力，包括但不限於保單的退保、申請貸款或提款。信託人亦被允許將保單分派給任何該信託的受益人（下稱“信託受益人”）或抵押及轉移保單所有權。貴公司並不負責決定信託人的授權或要求或審閱該信託的條款及不為了解該信託的條款而負責。The Application is not subject to any prior agreement, contractual obligations, legal proceedings and/or court assigning that restricts or prohibits the change of the Policyholder or Beneficiary. If such restrictions exist, the original Policyholder/Insured and/or Trustee shall submit the written consent of the person concerned to your Company together with the Application. If the liability discovered after the Application becomes effective causes your Company not to accept the Application (or the consent of a third party who is not the original Policyholder shall be obtained in order to change the Policyholder), the Application will be invalid. If your Company suffers any loss, damage, legal liability, litigation claims, requests and expenses due to the relevant changes in the Application, the original Policyholder/Insured and/or Trustee agree to compensate your Company and ensure that your Company is suffering any loss. The Trust allows the Trustee to exercise all the powers provided by the ownership of the Policy, including but not limited to surrender of the Policy, application for a loan or withdrawal. The Trustee is also allowed to assign the Policy to any Beneficiary of the Trust (hereinafter referred to as the "Beneficiary of the Trust") or to mortgage and transfer the ownership of the Policy. The Company is not responsible to determine the authority of the Trustee(s) or inquire into or review the provisions of the Trust and shall not be charged with knowledge of the terms of the Trust.
6. 原保單持有人/受保人及/或信託人承認及同意 貴公司沒有能力亦不會就該信託人的申請及出具保單而對該信託的合法性或其條款（包括但不限於信託契約的條款）信託人的身份、能力或權力進行任何審查。原保單持有人/受保人及/或信託人向 貴公司保證信託人有完全身份、能力及權力申請並出具保單，並且可以按照保單及該信託的條款在容許的範圍內以保單持有人的身份履行其責任及行使其權利。就原保單持有人/受保人及/或信託人所知，任何為了支付保單而匯來的款項並非由犯罪行為所得，包括但不限於任何恐怖或洗錢活動。信託的受益權可以並僅會由與受保人的壽命存在血緣、法律，或重要經濟利益關係的人士建立。原保單持有人/受保人及/或信託人同意 貴公司將任何根據保單條款應付的所有款項包括但不限於在受保人身故時應付的身故賠償（統稱“保單款項”）並完全及妥當地解除 貴公司根據保單支付任何保單款項的責任。The current Policyholder/Insured and/or Trustee acknowledges and agrees that, with respect to the Application of the Trustee and the issuance of the Policy, The Company has no responsibility to and will not review the legality of the Trust or its terms (including but not limited to the terms of the Trust Deed), or the identity, ability or power of the Trust. The current Policyholder/Insured and/or Trustee assures the Company that the Trustee has the full identity, ability and power to apply for the issuance of the Policy, and can perform its responsibilities and exercise its rights as a Policyholder within the allowable scope in accordance with the Policy and the terms of the Trust. To the best of our knowledge, any funds remitted for any payment of premium on the Policy are not obtained from any criminal activity, including any terrorist or money laundering activity. The beneficial interests under the Trust can and will only be established for persons who are related to the Proposed Insured who have blood relationship, legal relationship, or important economic interest relationship with the Insured. The Current Policyholder/Insured and/or Trustee agree that all payments made by the Company under the terms of the Policy include, but are not limited to, compensation for the death of the Insured (collectively referred to as "Policy Payment") and fully and appropriately dismiss your Company's responsibility to pay any Policy Payment under the Policy.:
 - i. 支付給信託人或該信託；或 to the Trustee or the Trust; or
 - ii. 按照 貴公司合理相信來自信託人的指示支付給信託受益人 to the beneficiaries of the Trust ("Trust Beneficiaries") in accordance with any instructions it reasonably believes to be from the Trustee;

--	--	--	--	--	--	--	--	--	--

第 5 部份 聲明及授權 (續) Part 5 Declaration and Authorization (Continued)**原保單持有人/受保人及信託人的聲明及授權 (續) Declarations and Authorizations of Current Policyholder/Insured and Trustee(Continued)**

7. 原保單持有人/受保人及/或信託人同意賠償 貴公司並使 貴公司免於遭受或產生任何由下列情況引起的、相關的或導致的所有責任、申索、費用、開支、損害或損失：The Current Policyholder/Insured and/or Trustee agree to indemnify the company and to protect the Company from suffering or undertaking all liability, claims, expenses, costs, damage or loss caused by, or in connection with, or arising from any of the followings:
- 信託人任何違反或不遵守信託內的條款；any breach or non-compliance by the Trustee of the terms of the Trust;
 - 貴公司合理相信來自信託人的指示並按該指示行事；the Company reasonably believes in the instructions from the Trustee and acts in accordance with that instructions;
 - 對該信託的任何質疑或無效；or any doubt or invalidity of the Trust; or
 - 任何信託人或該信託以外的任何人士對 貴公司支付任何保單款項給信託人或信託受益人的申索(視情況而定)；any trustee or any person other than the party of the Trust claims against any Policy Payment paid by The Company to the Trustee or the Beneficiary of the Trust (as the case may be).

原保單持有人/受保人的聲明及授權**Declarations and Authorizations of Current Policyholder/Insured**

為使 貴公司同意接受此申請，原保單持有人/受保人按適用情況謹此確認、同意及聲明如下：

In order for the Company to agree and accept the Application, the Current Policyholder/Insured, as applicable, hereby confirm agree and declare as follows:

- 原保單持有人/受保人要求由本保障聲明書簽署日期起，按照本保障聲明書內的條款及細則就保單作出更改，將原保單持有人/受保人上述保單的持有權連同所有權利及義務轉為以信託人身份持有。The Current Policyholder/Insured requests to change the Policy in accordance with the terms and conditions in Declaration and Indemnity Form from the date of signature of this Declaration and Indemnity Form, and to change the Current Policyholder/Insured into a trustee to hold the above Policy together with all rights and obligations.
- 如更換保單受益人為信託人，原保單持有人/受保人確認此前為保單指定的受益人(受保人的遺產除外)均完全知悉，及如需獲取其同意，已同意此申請的內容。In the case of changing the Beneficiary to a trustee, the Current Policyholder/Insured confirms that the Beneficiary previously designated for the Policy (excluding the heritages of the Insured) is fully aware and has agreed to the contents of the Application if it is necessary to obtain the consent of such Beneficiary.
- 原保單持有人/受保人向 貴公司作出陳述及保證如下：The Current Policyholder/Insured makes the following statements and warranties to the Company:
 - 原保單持有人/受保人目前並不處於破產狀態或受到破產程序限制，且並無破產程序將會針對原保單持有人/受保人啟動或即將發生或被威脅將要發生；The Current Policyholder/Insured is not currently in bankruptcy or subject to bankruptcy procedures, and no bankruptcy proceedings will be initiated against the Current Policyholder/Insured or will occur soon or is threatened to be initiated;
 - 原保單持有人/受保人目前並不屬於任何根據香港法律第 192 章《婚姻法律程序與財產條例》下稱“MPPO”)有關經濟救助程序的任何一方，原保單持有人/受保人亦無察覺到在規定下任何該類程序將可能針對其提出或被威脅將會被提出。The Current Policyholder/Insured does not currently belong to any party to any financial assistance procedure under the Chapter 192 of Hong Kong Law, Matrimonial Proceedings and Property Ordinance (“MPPO”). The Current Policyholder/Insured is also unaware that any such procedures will be proposed or is threatened to be proposed under the Ordinance.
- 原保單持有人/受保人同意賠償 貴公司並使 貴公司免於遭受或產生，任何針對 貴公司轉移或變更保單持有人/受益人所提出的質疑或無效而發生的、相關的、導致的所有責任、申索、費用、開支、損害、損失(包括但不限於任何違反第17條的財產安排)。The Current Policyholder/Insured agrees to indemnify the Company and to protect the Company from suffering or undertaking all liability, claims, expenses, costs, damage or loss caused by, or in connection with, or arising from any doubt or invalidity against the transfer or change of Policyholder/Beneficiary made by the Company (including but not limited to any property arrangements that violate section 17 of the MPPO).

信託人的聲明及授權**Declarations and Authorizations of Trustee**

為使 貴公司同意接受此申請，信託人按適用情況謹此確認、聲明及同意如下：

In order for your Company to agree to accept the Application, the Trustee, as applicable, hereby confirms, agrees and declares as follows:

- 為了驗證可從身故賠償取得全部或部分利益的任何最終受益人士之身份的目的，在支付身故賠償之時或其他時間提供 貴公司要求的任何信息及文件。For the purpose of verifying the identity of any ultimate beneficiary who may benefit wholly or partly from death compensation, the Trustee shall provide any information and documents required by The Company at the time of payment of death compensation or at any other time.
- 新保單持有人/信託人在該信託被終止前，可以新保單持有人/信託人身份擁有行使所有保單之選擇權、利益或優先權。當該信託被終止，新保單持有人/信託人在此前被賦予之所有權利、擁有權及權力將自動終止。The new Policyholder/Trustee may, prior to the termination of the Trust, have the option, interest or priority to exercise all policies as a new Policyholder/Trustee. When the trust is terminated, all rights, ownership and powers previously granted to the new Policyholder/Trustee will automatically be termination.

第 6 部份 個人資料收集聲明 Part 6 Statement on Personal Data Collection

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。

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.

--	--	--	--	--	--	--	--	--	--

第 7 部份 簽署 Part 7 Signature

茲聲明上述內容乃本人/我們所知之事實及全部，並將構成保單之一部份。 I/We hereby declare that to the best of my/our knowledge, the foregoing statements are true and complete and that such disclosures will form part of the basis of the Policy.

本人/我們已閱讀及完全明白本保障聲明書的內容，並接納本保障聲明書之聲明及授權所載各條款及條件。 I/We have read and fully understand the contents of this Declaration and Indemnity Form and accept the terms and conditions set out in the statement and authorization of this Declaration and Indemnity Form.

簽署，蓋章並作為契約交付 Signed, stamped and delivered as a deed by

	原保單持有人 Current Policyholder/Insured			現有受保人 (倘非保單持有人及 18 歲或上) Current Insured (if different from the Policyholder & aged 18 or above)			見證人或保險中介人* Witness or Insurance Intermediary *		
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	日Day	年Year	月Month	日Day	年Year	月Month	日Day

[獨立信託人] [if individual Trustee]

簽署，蓋章並作為契約交付 Signed, stamped and delivered as a deed by

	信託人/新保單持有人 Trustee/ New Policyholder			見證人或保險中介人* Witness or Insurance Intermediary*		
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	日Day	年Year	月Month	日Day

--	--	--	--	--	--	--	--	--	--

第 7 部份簽署(續) Part 7 Signature (Continued)

[法人信託人] [if corporate Trustee]

合法授權代表 its duly authorized representative

	根據公司規章代表公司的 信託人/新保單持有人 Trustee/New Policyholder representing a Company in accordance with Company regulation	公司信託人/ 新保單持有人 Company Trustee/New Policyholder	授權代表 Authorized Representative	見證人或保險中介人* Witness or Insurance Intermediary*
簽署或公司印鑑 Signature and/or Company Chop				
姓名 Name				
身份證/護照號碼 Identity Document/ Passport No.				
日期 Date	年Year 月Month 日Day	年Year 月Month 日Day	年Year 月Month 日Day	年Year 月Month 日Day

- * 若原保單持有人/受保人/信託人以圖章蓋印簽署，必須有一位成年的見證人作證，見證人不能是現有的受益人或將被指定的受益人。見證人之個人資料只會用於處理本保障聲明書及確認本保障聲明書簽署人的身份之用。
- * Where the Current Policyholder/Insured/Trustee stamps with a seal as a signature, an adult witness shall be present to testify. Existing beneficiaries or persons who will be designated as beneficiaries cannot be the witnesses. The personal data of the witness shall only be used to process this Declaration and Indemnity Form and to confirm the identity of the signatories of this Declaration and Indemnity Form.

第8部份 文件核對清單 Part 8 Document Checklist

更改保單持有人/受益人為信託人 Change Policyholder/Beneficiary to Trustee

- ☐ 保單權益轉讓申請表(CS-CHG02)或保單捐贈及更改保單受益人申請表(CS-CHG06)
Change of Policy Ownership Transfer (CS-CHG02) or Policy Donation and Beneficiary Appointment Form (CS-CHG06)
- ☐ 信託契據核證副本 Certified Copy of executed Trust Deed
- ☐ 本保障聲明書 Declaration and Indemnity Form