

Payment Declaration Form 付款聲明書
(To be completed by Policy Owner 由保單主權人填寫)

- (A) Policy owner is required to submit copy of bank receipt / bank account statements for payer identification if the total payments made by bank draft, cashier order or cheque without account holder name issued by HKMA registered bank by policy owner and payment amount is over HK\$400,000.00 / USD50,000.00 for the same policy in the same year (the past 365 days).
 如款項是以於香港金融管理局註冊的銀行發出的本票、匯票或沒有列印銀行戶口持有人姓名的支票支付，並且每保單每年（過去 365 日）累計繳交金額為 400,000.00 港元 / 50,000.00 美元 以上，保單主權人**必需**提交銀行收據 / 銀行賬戶報表的副本以識別付款人身份。
- (B) If payment is below or equals to HK\$400,000.00 / USD50,000.00 for the same policy in the same year (the past 365 days), please submit either copy of bank receipt / bank account statements for payer identification or complete this form.
 如每保單每年（過去 365 日）累計繳交金額為 400,000.00 港元 / 50,000.00 美元 或以下，請提交銀行收據/銀行賬戶報表的副本以識別付款人身份或填寫此表格。
- (C) If payment is made by a company owned by policy owner, please provide (i) a copy of Business Registration Certificate or Certificate of Incorporation, and (ii) a copy of latest Annual Return.
 如款項是由保單主權人擁有的公司繳付，請提供(i)商業登記證或公司註冊證明書之副本及(ii)最新周年申報表之副本。
- (D) If payer is third party, "Third Party Payment Declaration Form" is also required. Proof of relationship is required for payment over HK\$1,000,000.00.
 如付款人為第三方，必需另外填寫「第三方付款聲明書」。繳付金額超過 1,000,000.00 港元，需提供關係證明。
- (E) If bank draft, cashier order or cheque without account holder name is NOT issued by a bank registered in HKMA, regardless amount, copy of bank receipt or bank account statements for payer identification is required. Policy owners need to complete this form.
 如本票、匯票或沒有列印銀行戶口持有人姓名的支票不是由在香港金融管理局註冊的銀行發出，任何金額，必須提供銀行購單據或銀行月結單以識別購票人或付款人身份。保單主權人必須填寫此表格。

Policy Owner and Payment Information

POLICY OWNER INFORMATION 保單主權人資料	
Policy No. 保單編號	Name of Policy Owner 保單主權人姓名

Please tick the appropriate box. 請在適當方格內填上✓號。

PAYMENT DETAILS 付款人資料及付款詳情	
Payment Date 付款日期	No. of bank draft, cashier order, cheque 本票、匯票或支票號碼 _____
Payment Amount 付款金額 <input type="checkbox"/> HKD 港元 <input type="checkbox"/> USD 美元 <input type="checkbox"/> RMB 人民幣 \$ _____	Purpose of Payment 款項用途 <input type="checkbox"/> New Business 新生意 <input type="checkbox"/> Lump sum/Top up 整付保費 <input type="checkbox"/> Renewal Premium 續期保費 <input type="checkbox"/> Loan repayment 償還貸款

Payment is made by 款項是由 <input type="checkbox"/> Policy owner 保單主權人支付 <input type="checkbox"/> Third Party (Third Party Payment Declaration Form" is required.) 第三方支付 (請填寫「第三方付款聲明書」)

A. DECLARATION AND SIGNATURE 聲明及簽署

I, the policy owner of the above policy, hereby declare that all information given and representations made in this form and in the related documents submitted together with this form are, to the best of my knowledge and belief, true, accurate and complete.

本人，本保單主權人，謹此聲明所有在本聲明書內及隨本聲明書遞交的相關文件內所提供之資料及所作出的陳述，就本人所知及所信乃準確無誤真實及為事實之全部。

Personal Data Collection and Use 個人資料收集及使用

I/We confirm that I/We have read the Personal Information Collection Statement ("PICS") of Sun Life and understood its effect and impact in respect of my/our personal data collected or held by the Company (whether contained in this form or otherwise). 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 subject to my/our right of objection. I/We understand that the updated version of the PICS is available in the Company website (http://www.sunlife.com.hk). I/We understand it is subject to change and agree that my/our information will be handled accordingly.

本人/我們確認本人/我們已閱讀永明金融個人資料收集聲明(“該聲明”) 及明白該聲明對貴公司所收集或持有之本人/我們的個人資料的影響(不論是否此表格或從其他途徑所取得)。本人/我們特此確認並同意貴公司，根據該聲明使用及轉移本人/我們的個人資料，包括於本人/我們保留反對權利的情況下，在直接促銷中使用及將本人/我們的個人資料提供予其他人士。本人/我們明白該聲明的最新版本可於貴公司網頁(http://www.sunlife.com.hk)下載。本人/我們明白該聲明將會不時更新並同意本人/我們的個人資料將根據相關更新處理。

Signature of Policy Owner 保單主權人簽署 X	Date 日期 (D/M/YY 日/月/年)
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PERSONAL INFORMATION COLLECTION STATEMENT 個人資料收集聲明及授權

I/We understand and consent that, any personal data collected by Sun Life Hong Kong Limited (Incorporated in Bermuda with limited liability) ("Sun Life") (whether collected in this form or otherwise) may be used by Sun Life for the following purposes: (i) processing and evaluating insurance applications and/or any other applications for financial services; (ii) administering and providing services in relation to insurance or financial products; (iii) processing, investigating and settling insurance claims and detecting and preventing fraud (whether or not relating to the policy issued by the Company); (iv) conducting customer surveys; (v) researching and designing financial, insurance or pensions products for clients' use; (vi) selecting and participating in reward, loyalty or privileges program and related service; (vii) contacting clients for the above purposes; (viii) purposes which are directly related to the above purposes; and (ix) complying with applicable laws, regulation or court order or obligation or requirement under an agreement, or other commitment, between Sun Life or any entity within the Sun Life Group and the regulator or government in any jurisdiction (in relation to money laundering, terrorist financing and tax evasion or otherwise) to which Sun Life and its related companies are subject to (of Hong Kong or any other countries); and

Sun Life may also use my/our contact details, demographic information and policy details to contact me/us with marketing information regarding Sun Life and third party pensions, financial and insurance products, including by phone calls, mail, email, SMS or any type of electronic message. Sun Life may not use my/our data for direct marketing unless Sun Life have received my/our consent (which includes an indication of no objection). I/We know I/we can tick the box below if I/we do not consent to receive direct marketing information.

Sun Life may disclose my/our personal data for any of the above purposes: (a) to third parties who provide services in Hong Kong or elsewhere which assist the Company to carry out the above purposes, including claims investigators, insurance adjusters, medical advisors, health care professionals, medical service providers, hospitals, emergency assistance service providers, reinsurers, accountants, solicitors and professional financial advisors; (b) to banks for payment purposes; (c) to insurance brokers who are representing the policy owners or clients directly or indirectly; (d) to the Company's insurance agents and MPF intermediaries; (e) to the Company's related companies (as defined in the Companies Ordinance) including pensions services provider, financial services companies and insurance companies; (f) to the Hong Kong Federation of Insurers (or any similar association of insurance companies) and its members; (g) to the policy owner / employers of an insured employee under a group product; (h) to any third party service provider appointed by the policy owner who provides administrative services for the policy owner (i) to organisations that consolidate claims and underwriting information for the insurance industry; (j) to fraud prevention organisations; (k) to other insurance companies (whether directly or through fraud prevention organisations or other persons named in this paragraph), the police and databases or registers (and their operators) used by the insurance industry to analyse and check information provided against existing information; (l) to any person to whom the Company or its related companies (inside or outside Hong Kong) are under an obligation to make disclosure under the requirements of any law, regulation or court order binding on or applying to or to which the Company or its related companies (inside or outside Hong Kong) are subject to, or under and for the purposes of any guidelines issued by regulatory or other authorities with which the Company or its related companies (inside or outside Hong Kong) are expected to comply and (m) as otherwise required or permitted by law. If third party personal information is supplied to the Company by the clients, clients' service providers, claimants or applicants for services, such clients, service providers, claimants or applicants must inform these third parties about this personal information collection statement before they collect their information and supply it to the Company. For group clients, these information may include but not limited to information belonging to the clients' employees, the group members, the insureds and/or their representatives or dependents.

I/We understand that it is voluntary for me/us to supply the information, but failure to provide the requested personal data may mean Sun Life is unable to process my/our application or continue to provide services to me/us. I/We have the right to seek access to and request correction of any personal data Sun Life holds about me/us by sending a written request to The Manager, Client Service Centre, Sun Life Hong Kong Limited, G/F, MU Tower B, 18 Hung Luen Road, Hung Hom, Kowloon, Hong Kong. Sun Life may charge a reasonable fee for the processing of any such requests.

"Sun Life Group" means Sun Life together with its subsidiaries, subsidiary undertakings and associated companies (whether direct or indirect) from time to time.

本人 / 吾等明白及同意香港永明金融有限公司 (於百慕達註冊成立之有限責任公司) (「永明」) 可以將其所收集的任何個人資料(不論由此表格所收集或由其他途徑取得)作以下用途: (i) 處理及評估申請及/或任何其他金融服務申請; (ii) 管理並提供與保險及/或金融產品相關服務; (iii) 處理、調查和結清保險索償個案、以及偵測和防止欺詐行為(無論是否與公司發出的保單有關); (iv) 進行客戶調查; (v) 為客戶研究及設計金融、保險或退休金產品; (vi) 甄選及參與獎賞、忠實或特選客戶計劃; (vii) 因上述目的與客戶聯絡; (viii) 與上述目的直接有關的任何其他目的; 及(ix) 為遵守適用的法例、法規、法庭命令或永明或永明集團內的任何實體與任何管轄區域的監管機構或政府之間的協議項下的義務或要求或其他承諾(其相關於洗黑錢、恐怖分子資金籌集、逃稅或其他)。

永明亦可使用本人/吾等的聯絡資料, 基本個人資料及保單資料, 就永明及第三方的退休金、金融及保險產品的推廣資訊, 以包括電話、郵件、電郵、電話短訊或任何電子信息等方法聯絡本人/吾等。除非得到本人/吾等之同意 (包括表示不反對), 否則永明不可使用本人/吾等之資料為該用途。本人 / 吾等明白若本人/吾等不同意接受此等推廣資訊, 可於下列方格內填上剔號。

永明可為以上任何目的披露本人/吾等的個人資料予 a) 為協助公司就上述用途 (不論在香港或其他地方) 而提供服務的第三方, 包括索償調查員、保險理算人、醫療顧問、醫護專業人士、醫療服務提供者、醫院、緊急支援服務供應商、再保險公司、會計師、律師、專業理財顧問; (b) 銀行作繳款用途; (c) 直接或間接代表保單持有人或客戶的保險經紀; (d) 公司的保險代理人及強積金中介人; (e) 公司的關連公司(根據公司條例訂明)包括退休金服務提供者、金融服務機構及其他保險公司; (f) 香港保險業聯會 (或任何相似的保險公司協會) 及其會員; (g) 團體產品的保單持有人 / 受保僱員之僱主; (h) 由保單持有人指定及提供行政服務給保單持有人的第三方服務供應商; (i) 整合保險業索償和承保資料的組織; (j) 防欺詐組織; (k) 其他保險公司(無論是直接地, 或是通過防欺詐組織或本段中指定的其他人士、警察和保險業就現有資料而對所提供的資料作出分析和檢查的數據庫或登記冊 (及其運營者)); (l) 公司及其關連公司(不論在香港與否) 為遵守監管當局或其他機構發出之指引或其就法例、法規或法庭頒令所約束或規定之責任而需向其作出披露的任何人士; 及 (m) 按法例要求或准許的其他人士。

假如第三方個人資料是由客戶、客戶的服務供應商、索償人或申請人提供給公司, 該客戶、服務供應商、索償人或申請人必須在收集這些資料前, 將此《個人資料收集聲明》告知有關的第三方才把資料提供給公司。對於團體客戶而言, 這些資料可以包括但不限於屬於客戶的僱員、團體成員、受保人和/或其代表或家屬的個人資料。

本人/吾等明白本人/吾等提供個人資料均屬自願, 然而倘若未能提供所需個人資料, 可導致永明無法處理本人/吾等的申請或繼續提供服務予本人/吾等。本人/吾等有權查閱及要求更正永明持有有關本人/吾等的個人資料, 有關要求可以書面形式郵寄至香港九龍紅磡紅鸞道18號都大中心B座地下, 香港永明金融有限公司客戶服務中心經理。永明可就處理任何該等要求收取合理費用。

“永明集團”指永明及其不時之附屬公司、附屬企業和相聯公司 (無論是直接的還是間接的)。

Signature of Policy Owner 保單主權人簽署 X	Name of Policy Owner 保單主權人姓名	Date 日期 (DD/MM/YY 日/月/年)
Signature of Third Party Payer 第三方付款人簽署 X	Name of Payer 第三方付款人姓名	Date 日期 (DD/MM/YY 日/月/年)