

Investment-Linked Policy Services Request Form 投資相連計劃服務申請書



Please fill in block letters 請以英文正楷填寫

For services not covered by this form (e.g. change of policy ownership), please contact your advisor/our customer service centre.

若要求的服務並不包括在此表格內(例如:更改保單權益人),請與閣下的顧問/本公司的客戶服務中心聯絡。

Please darken the appropriate circle 請將適當圓圈填滿

Correct method 正確方法: ●

Policy Number 保單號碼	<table border="1"> <tr> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> </tr> </table>																																																																																															
Personal Information 個人資料	Life Insured 被保人		Policy Owner 保單權益人																																																																																													
Name 姓名	<table border="1"> <tr> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> </tr> <tr> <td colspan="14">Family Name 姓氏</td> </tr> <tr> <td colspan="14">Given Name 名</td> </tr> </table>																		Family Name 姓氏														Given Name 名														<table border="1"> <tr> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> <td style="width: 10px; height: 15px;"></td> </tr> <tr> <td colspan="16">Family Name 姓氏</td> </tr> <tr> <td colspan="16">Given Name 名</td> </tr> </table>																		Family Name 姓氏																Given Name 名															
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IMPORTANT NOTE 重要事項：

Risk Disclosure Statements 風險披露聲明

1. Do not select the investment choices unless you understand how it is suitable for you. 除非你已明白相關投資選擇如何適合你, 否則不應選擇該投資。
2. You should select the investment choices for the purposes based on your own decision. 你應該根據個人目的自行決定投資選擇。
3. Please be reminded to visit <http://www.fwd.com.mo> to obtain and review the detailed information of risk profile and derivative exposure from the fact sheet and prospectus of the selected underlying investment choices stated in Part A - item 1, item 2 and item 3. 請瀏覽 <http://www.fwd.com.mo>, 獲取及查閱有關在甲部第一項、第二項及第三項所選相關投資選擇的基金資料匯報及發行章程的風險狀況和衍生工具風險的詳細資料。
4. Please note if there is any material change in the circumstances of yourself or your Risk Profile Questionnaire has expired (which is only valid for 12 months from the date of completion), you are required to re-submit Risk Profile Questionnaire. 請注意如自身情況有重大變更或你的風險狀況問卷已過期(該問卷只有效於完成後的12個月), 你需要重新提交風險狀況問卷。
5. Please seek professional advice from insurance adviser to conduct risk assessment and complete the Risk Profile Questionnaire if required. The completed Risk Profile Questionnaire must be signed and dated by the Policy Owner and the insurance adviser. 如有需要, 請徵詢理財顧問的專業意見以進行風險評估並填寫風險狀況問卷。填寫的風險狀況問卷必須由保單權益人及理財顧問簽署並註明日期。
6. You must understand the nature and risks of the selected underlying investment choices stated in Part A - item 1, item 2 and/or item 3 and has sufficient net worth to be able to assume the risks and bear the potential loses of trading in the selected underlying investment choices. 你必須明白甲部第一項、第二項及/或第三項的相關投資選擇的性質及風險, 而且確認有能力承受所選擇的相關投資選擇的潛在風險及損失。
7. According to individual circumstances, you may be requested to provide enough and reasonable explanation and an updated Risk Profile Questionnaire to assess and ensure suitability of the investment choices regarding any mismatch of your risk profile, expired or invalid Risk Profile Questionnaire. Otherwise the request will be rejected. 根據個別情況, 你可能會被要求提供足夠和合理的解釋及提交風險狀況問卷, 以因應不符你風險狀況、過期或無效的風險狀況問卷進行評估和確保你的投資選擇的適合性。否則, 該申請將被拒絕。

Derivative Fund 衍生工具基金

8. Please note all investment choices involving derivative fund stated in Part A - item 1, item 2 and item 3 will be rejected if there is any mismatch of latest risk profile, derivative knowledge and/or Risk Profile Questionnaire has expired or invalid. Policy Owner must submit new Risk Profile Questionnaire in order to continue the process only if the updated risk profile and derivative knowledge status match with requirements of the selected investment choices. 請注意如在甲部第一項、第二項及第三項的相關投資選擇中涉及衍生工具基金並與最近風險承擔能力、衍生工具知識有任何不符及/或風險狀況問卷已過期或無效, 相關投資選擇將被拒絕。保單權益人必須提交風險狀況問卷, 並僅在其更新後的風險狀況及衍生工具知識符合相關投資選擇的要求方會繼續執行。

Non-Derivative Fund 非衍生工具基金

9. If all funds in your selected investment choices stated in Part A - item 1, item 2 and item 3 DO NOT involve derivatives but there is mismatch with your latest risk profile or your Risk Profile Questionnaire has expired and you decide to continue your request after you have read the detailed information to understand and evaluate the nature and possible risks associated, you must read and agree with the Disclaimer below each related service item of Part A. Otherwise the request will be rejected. 如果你在甲部第一項、第二項及第三項中所選投資選擇中均不涉及衍生工具基金, 但與你最近的風險狀況不符或你的風險狀況問卷已過期, 而你經過閱讀相關基金的詳細資料以理解和評估相關性質及潛在風險後仍決定繼續申請, 你必須閱讀並同意甲部每個相關服務項目下的聲明。否則, 該申請將被拒絕。



Part A: SERVICE ITEMS 甲部: 服務項目

1. Investment Choice Switching – Existing Holding Investment Choices 投資選擇轉換 – 現行所持有的投資選擇

Minimum 10% for each switching-in Investment Choice & must be multiples of 10%. Minimum switch out amount is currently US\$125. The current Investment Choice allocation will remain unchanged, unless changes are specified in Part (2). You may also perform switching and allocate future premium through FWD Life Customer Online Service. Please visit FWD Company website for further details: <http://www.fwd.com.mo>
 每項所選投資選擇最少須分配10%並須為10%的倍數。現行最低投資選擇轉出金額為125美元。除非於第2項列明更改，否則現有的投資選擇分配將維持不變。你亦可以透過富衛客戶網上服務進行投資選擇轉換及未來供款調配。請瀏覽富衛公司網頁了解詳情。

Switch Out 轉出			Switch In 轉入		
Name of Investment Choice 投資選擇名稱	Investment Choice Code 投資選擇代碼	Switch out (%) 轉出百分比	Name of Investment Choice 投資選擇名稱	Investment Choice Code 投資選擇代碼	Allocation (%) 分配百分比
		%			%
		%			%
		%			%
		%			%
		%			%
		%			%
		%			%
		%			%
		%			%
		%			%
		%			%
		%			%
		%			%
		%			%
		%			%
Total 合共:					100%

Disclaimer 聲明 (For Part A – item 1 involving NO Derivative Fund ONLY 僅適用於當甲部第一項沒有涉及衍生工具基金的情況)
 Unless the following confirmation is specified, any of the selected underlying investment choices stated in above that does NOT involve derivative fund but carries a risk level higher than your latest record of risk profile will be rejected 除非閣下作出以下的確認，否則如任何上述的相關非衍生工具投資選擇的潛在風險高於你最近的風險狀況記錄，該申請將被拒絕。

Despite the fact that the features and/or risk level of my selected underlying investment choices, as stated in above, may not be suitable for me based on my risk profile as indicated in the Risk Profile Questionnaire, I confirm that, after due consideration, it is my independent decision to submit my request(s), without consulting a licensed insurance intermediary, for your processing. 儘管根據本人於「風險狀況問卷」所披露的投資風險概況，本人於上述選擇的相關投資選擇可能並不適合本人，但經過適當考慮後及基於本人的獨立決定，本人確認在不諮詢持牌保險中介人的情況下，提交及執行有關申請。

2. Investment Choice Allocation for Future Premium 未來供款調配

Minimum 10% for each Investment Choice & must be multiples of 10%. You may also perform switching and allocate future premium through FWD Life Customer Online Service. Please visit FWD Company website for further details: <http://www.fwd.com.mo>
 每項所選投資選擇最少須分配10%並須為10%的倍數。你亦可以透過富衛客戶網上服務進行投資選擇轉換及未來供款調配。請瀏覽富衛公司網頁了解詳情。

Investment Choice Allocation 投資選擇分配

Name of Investment Choice 投資選擇名稱	Investment Choice Code 投資選擇代碼	Allocation (%) of Future Premium 未來供款調配百分比
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
Total 合共:		100%

Disclaimer 聲明 (For Part A – item 2 involving NO Derivative Fund ONLY 僅適用於當甲部第二項沒有涉及衍生工具基金的情況)
 Unless the following confirmation is specified, any of the selected underlying investment choices stated in above that does NOT involve derivative fund but carries a risk level higher than your latest record of risk profile will be rejected 除非閣下作出以下的確認，否則如任何上述的相關非衍生工具投資選擇的潛在風險高於你最近的風險狀況記錄，該申請將被拒絕。

Despite the fact that the features and/or risk level of my selected underlying investment choices, as stated in above, may not be suitable for me based on my risk profile as indicated in the Risk Profile Questionnaire, I confirm that, after due consideration, it is my independent decision to submit my request(s), without consulting a licensed insurance intermediary, for your processing. 儘管根據本人於「風險狀況問卷」所披露的投資風險概況，本人於上述選擇的相關投資選擇可能並不適合本人，但經過適當考慮後及基於本人的獨立決定，本人確認在不諮詢持牌保險中介人的情況下，提交及執行有關申請。

3. Add Booster Investment Premium 新增額外投資保費

1. Please submit Financial Needs and Investor Profile Analysis Form, Risk Profile Questionnaire, Important Facts Statement and Applicant's Declaration. Acceptance of this application is subject to satisfactory completion of the submitted documents. 請遞交財務需要及投資取向分析表格、風險狀況問卷、重要資料聲明書及投保人聲明書。申請之批核將視乎所有遞交文件之完整性。
2. Minimum 10% for each Investment Choice & must be multiples of 10%. 每項所選投資選擇最少須分配 10% 並須為 10% 的倍數。
3. Please note the minimum and maximum Booster Investment Premium requirement for each product. Please refer to the relevant product brochure for details. 請注意各項產品之最低及最高額外投資保費要求。詳情請參閱相關的產品介紹。

Booster Investment Premium
額外投資保費

HK\$/US\$
港元 / 美元 _____

Investment Choice Allocation 投資選擇分配

Name of Investment Choice 投資選擇名稱	Investment Choice Code 投資選擇代碼	Allocation (%) of Booster Investment Premium 額外投資保費分配百分比
		%
		%
		%
		%
		%
		%
		%
		%
		%
Total 合共 :		100%

Disclaimer 聲明 (For Part A – item 3 involving NO Derivative Fund ONLY 僅適用於當甲部第三項沒有涉及衍生工具基金的情況)

Unless the following confirmation is specified, any of the selected underlying investment choices stated in above that does NOT involve derivative fund but carries a risk level higher than your latest record of risk profile will be rejected 除非閣下作出以下的確認，否則如何上述的相關非衍生工具投資選擇的潛在風險高於你最近的風險狀況記錄，該申請將被拒絕。

- Despite the fact that the features and/or risk level of my selected underlying investment choices, as stated in above, may not be suitable for me based on my risk profile as indicated in the Risk Profile Questionnaire, I confirm that, after due consideration, it is my independent decision to submit my request(s), without consulting a licensed insurance intermediary, for your processing. 儘管根據本人於「風險狀況問卷」所披露的投資風險概況，本人於上述選擇的相關投資選擇可能並不適合本人，但經過適當考慮後及基於本人的獨立決定，本人確認在不諮詢持牌保險中介人的情況下，提交及執行有關申請。

4. Change of Payment Mode 更改付款方式

- Yearly by Cash / Autopay* 每年現金 / 自動轉賬 * 支付
 Half-yearly by Cash / Autopay* 半年現金 / 自動轉賬 * 支付
 Monthly Autopay* (on 25th of each month) 每月 25 號自動轉賬 *

(*Please submit the Direct Debit Authorization Form at the same time. 請連同「直接付款授權書」一起呈交)

5. Regular Investment Premium 定期投資保費

1. To add or increase regular investment premium, please submit Financial Needs and Investor Profile Analysis Form, Risk Profile Questionnaire, Important Facts Statement and Applicant's Declaration. Acceptance of this application is subject to satisfactory completion of the submitted documents. 新增或增加定期投資保費，請遞交財務需要及投資取向分析表格、風險狀況問卷、重要資料聲明書及投保人聲明書。申請之批核將視乎所有遞交文件之完整性。
2. The option to add or increase Regular Investment Premium is only applicable to specific products. 新增或增加每期定期投資保費只適用於個別產品。
3. Please note the minimum and maximum Regular Investment Premium requirement of each product. Please refer to the relevant product brochure for details. 請注意各項產品之最低及最高定期投資保費要求。詳情請參閱相關的產品介紹。

Add Regular Investment Premium
新增定期投資保費

HK\$/US\$
港元 / 美元 _____

Change of Amount
更改金額

Original Regular Investment Premium
原有每期投資保費

HK\$/US\$
港元 / 美元 _____

New Regular Investment Premium
新每期投資保費

HK\$/US\$
港元 / 美元 _____

Suspend of Regular Investment Premium
暫停定期投資保費

6. Investment Choice Withdrawal 投資選擇提取

Please submit a copy of the identification document of the Policy Owner together with this form. Please note the Investment Choice withdrawal requirement of each product. Please refer to relevant product brochure for details. 請隨此申請書一併遞交保單權益人之身份證明文件副本。請注意各項產品之投資選擇提取要求。詳情請參閱相關的產品介紹。

Investment Choice Partial Withdrawal 投資選擇部份提取

Name of Investment Choice 投資選擇名稱	Investment Choice Code 投資選擇代碼	Percentage of Investment Choice Withdrawal 提取投資選擇百分比	
		Initial Contribution Account 最初供款戶口	Accumulation Contribution Account 累積供款戶口
		%	%
		%	%
		%	%
		%	%
		%	%
		%	%
		%	%
		%	%
		%	%
		%	%
		%	%
		%	%
		%	%
		%	%
		%	%

Payment instruction 付款指示

- Issue HK\$ Cheque 發出港元支票 Issue MOP\$ Cheque 發出澳門元支票 Deliver through adviser 由理財顧問交予本人 Post to correspondence address 寄往本人之通訊地址 (Not applicable for cash cheque 不適用於現金支票)

Other instructions 其他指示 (Please specify in details 請詳細說明)

7. Temporary Suspension of Premium / Premium Holiday 暫停保費 / 保費假期

Please note the Temporary Suspension of Premium / Premium Holiday requirement of each product 請注意各項產品之暫停保費 / 保費假期要求。

- Apply 申請 Release 取消 The change will be effective on Next Premium Due Date 有關更改將於下個保費到期日生效

Notes 備註:

- During Premium Holiday or Premium Suspension, the Company will redeem Units to pay all relevant charges, any Basic Premium and the premiums of any riders attached hereto. Please refer to Policy Provisions for details. 當行使保費假期或暫停保費，公司會從保單戶口內贖回單位以扣除保單的所有相關費用、基本計劃保費及附約保費（如適用）。詳情請參閱保單條款。
- When the account value is insufficient to cover the deduction of relevant charges and premium, or below the minimum Account Value requirement, this Policy will be terminated. 當戶口價值不足以繳付所有有關費用及保費，或低於最低戶口結餘要求時（如適用），此保單將自動失效。
- Investment-Linked policy is intended to be a long-term investment, any premium holiday taken may result in significant losses to the account of the Policy and the contribution bonuses awarded. Please refer to Product Brochure for details. 投資相連計劃是以長線投資為目標，保單戶口價值及供款獎賞可能因行使保費假期而蒙受重大損失。詳情請參閱產品介紹。
- When the policy is exercising premium holiday, the levy for any rider attached to the policy will be deducted from the value of Policy Account. 如保單行使保費假期，本公司會於保單價值內扣除任何保單附約的徵費。

Part B: Reinstatement and Health Questions 乙部: 保單復保及健康問卷

○ Reinstatement 保單復保

Please answer the below health questions for reinstatement.
請填妥以下健康問卷作保單復保申請。

Personal Health Statement 健康狀況聲明

1 Have you ever had, or been told you had or have been treated for HIV infection, Acquired Immunodeficiency Syndrome (AIDS), AIDS-related disease, cardiovascular disease, digestive disease, kidney disease, liver disease, respiratory disease, muscular-skeletal disorder, mental disorder, nervous system disorder, Cancer and Tumor in past 2 years? 在過去兩年，閣下是否曾患有或獲悉患有 HIV 感染，後天免疫能力缺乏症 (愛滋病)，愛滋病併發症，心血管疾病，消化系統疾病，腎臟疾病，肝臟疾病，呼吸系統疾病，肌肉骨骼疾病，精神病，神經系統疾病，癌症，腫瘤或曾因上述疾病接受治療？

2 In the past 2 years, have you ever had any other disease not mentioned above which require examination, treatment or hospitalization for more than seven days? 在過去兩年，閣下曾否因上述以外之其他疾病，而需要接受檢查、治療或住院七日或以上？

3 Are you currently receiving medical treatment or under medical care of any kind or have been advised / scheduled to have operation, diagnostic test or treatment by a physician in near future? 閣下是否正接受任何藥物治療、醫療護理或於不久將來，由醫生建議或正在安排外科手術、診斷檢查或治療？

Life Insured 被保人

Yes 是 No 否

Yes 是 No 否

Yes 是 No 否

Policy Owner 保單權益人

Yes 是 No 否

Yes 是 No 否

Yes 是 No 否

For any “Yes” answer above, please circle the items concerned, state dates, diagnosis, duration, results, stage of recovery, name and address of all attending physicians.
若上述任何題目之答案為「是」者，請圈出有關項目。並註明日期、診斷、患病時間、測試結果或是否已痊癒，與及所有醫生的姓名和地址。

Disclaimer 免責聲明**Investment Choice Switching - Existing Holding Investment Choice**

The instruction will change the investment portfolio in your Policy Account. Notional units of the Investment Choice allocated to your Policy Account will be switched out in accordance with your instruction in order to switch to the designated Investment Choice. Investment Choice allocation of future regular premiums will remain unchanged. Subject to the Company's approval process, we will execute your Investment Choice switching instructions as soon as practicable.

投資選擇轉換 - 現行所持有的投資選擇

此項指示將更改現有保單戶口內的投資組合。您保單戶口內的投資選擇名義單位將會依照您的指示相應地出轉出，然後再轉入至指定的投資選擇。未來供款之投資選擇分配將維持不變。在符合本公司的批核程序下，我們會在切實可行的範圍內盡快執行閣下轉換投資選擇的指示。

Investment Choice Allocation for Future Premium

This instruction will change the premium allocation instruction of your future regular premiums. The existing Investment Choice balances of your Policy Account will remain unchanged. Subject to the Company's approval process, we will execute your Investment Choice allocation for Future Premium instructions as soon as practicable.

未來供款調配

此項指示將更改日後新繳交定期保費的投資選擇之投資分配。現有保單戶口內的投資選擇名義單位結餘則維持不變。在符合本公司的批核程序下，我們會在切實可行的範圍內盡快執行閣下調配未來供款之投資分配的指示。

By providing this service, we are not inviting or recommending any person or entity to invest. The information should not be construed as a prospectus for the purchase or sale of such investment.

本公司提供以上服務並不是邀請或建議任何人或任何機構進行投資。有關資訊不應被視作為購買或銷售有關投資的說明書。

Investment involves risk, past performance figures are not indicative of future performance. As a consequence of the general nature of varied investments and possible exchange or interest rate fluctuations, the value of investments and their yield may go down as well as up.

投資涉及風險，過往投資選擇表現不可作為未來表現的指標。投資選擇屬多元化投資，加上匯價及利率的波動，故投資價值及收益可跌亦可升。

The Company is entitled to reject any Investment-Linked Policy Services Request which is not completed in full and delivered together with payment and the requested documents.

本公司有權拒絕受理任何並未完全填妥及未附上應付款項及所要求文件之投資相連計劃服務申請。

FWD reserves the right to request additional personal information or supporting document to complete this policy change request.

富衛保留索取額外個人資料及證明文件用作保單更改的權利。

Declaration 聲明

I confirm and understand that the said policy is an Investment-Linked Insurance Plan or attached with Investment-Linked Rider(s), the Investment Choice Withdrawal Benefit will be the number of Units in the Policy Account multiplied by the Unit Price of the respective Investment Choices with all outstanding unpaid charges and Early Redemption Charge deducted (if any). I am personally responsible for the investment loss related to the transaction.

本人確認及理解上述保單是投資相連計劃或帶有投資相連附約，投資選擇提取權益將為保單戶口內投資選擇單位數量乘以有關投資選擇單位價格，並須扣除所有待繳費用及提早贖回費。本人會承受所有相關的投資損失。

I confirm and understand that except for those specified in a Policy Service Request Form or notified to FWD in previous written requests, there are no changes to my personal particulars including but not limited to occupation, nationality and personal address since the application for this insurance policy.

本人確認及理解除非已列明於並附上更改保單合約內容申請書或已書面上知會富衛，本人的個人資料（包括但不限於職業，國籍及個人地址）與申請此保險計劃時相同。

I have read and understood the principal brochure of the Investment Linked Plan/Rider before signing this Investment-Linked Policy Services Request form.

本人在簽署此服務申請書前已詳閱及完全明白投資相連計劃 / 附約的有關主要推銷刊物。

I CONFIRM this Investment-Linked Policy Services Request Form is signed in Macau.

本人確認此投資相連服務申請書在澳門簽署。

I/we have read, understood and accepted the Personal Information Collection Statement ("PICS") attached to this form.

The Company intends to send you marketing communications or materials and use your Personal Data in accordance with paragraphs 8 & 9 of the PICS. If you do not agree to receive such marketing communications or the Company's intended use of your Personal Data, please tick below to exercise your right to opt-out.

本人 / 我們已閱讀、明白及接受此表格附載的收集個人資料聲明。

公司有意向閣下送交推廣訊息或資料及根據收集個人資料聲明第 8 及第 9 段使用閣下的個人資料。如閣下不同意接收有關的推廣訊息或公司擬對閣下的個人資料的使用，請在以下有關方格內加上剔 (✓) 號。

Opt-out marketing communications or materials and the Company's intended use of my personal data.

拒絕接收推廣訊息或資料及公司擬對本人的個人資料的使用。

Date 簽署日期

Signature of Life Insured
被保人簽署Signature of Policy Owner
保單權益人簽署Signature of Witness
見証人簽署

Day 日 Month 月 Year 年

S. V.

S. V.

For Assignee Use Only (if applicable) 受讓人專用 (如適用)

I / We, the assignee of the policy, hereby consent and agree the Policy Owner for applying the above policy change request(s).

本人，保單受讓人，特此確認得悉及同意保單持有人提交以上保單更改申請。

Payment Instruction (Applicable for investment choice withdrawal request only):

付款指示 (只適用於投資選擇提取申請) :

Signature of Assignee
受讓人簽署Signature Date
簽署日期

Day 日 Month 月 Year 年

PLEASE DO NOT SIGN ON BLANK FORM 請勿在空白表格上簽署

Fax no. for submitting Investment-Linked Policy Services Request Form : (853)8988-6100

遞交投資相連計劃服務申請書傳真號碼 : (853)8988-6100

For Office Use Only**本公司專用**

Adviser Name 理財顧問姓名	Adviser Location 地區	Adviser Code 理財顧問號碼	% Share 百分比之分配	Adviser's Signature 理財顧問簽署
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	

Personal Information Collection Statement (“PICS”)

1. From time to time, it is necessary for you to supply **FWD Life Insurance Company (Macau) Limited** (the “Company”) or agents and representatives acting on its behalf with personal information and particulars in connection with our services and products. Failure to provide the necessary information and particulars may result in the Company being unable to provide or continue to provide these services and products to you.
 2. The Company may also generate and compile additional personal data using the information and particulars provided by you. All personal data collected, generated and compiled by the Company about you from time to time is collectively referred to in this PICS as “Your Personal Data”.
 3. “Your Personal Data” will also include personal data relating to your dependents, beneficiaries, authorised representatives and other individuals in relation to which you have provided information. If you provide personal data on behalf of any person you confirm that you are either their parent or guardian or you have obtained that person’s consent to provide that personal data for use by the Company for the purposes set out in this PICS.
 4. As detailed in this PICS, Your Personal Data may also be processed by the Company’s subsidiaries, holding companies, associated or affiliated companies and companies controlled by or under common control with the Company (collectively, “the Group”).
 5. The purposes for which Your Personal Data may be used are as follows:
 - (i) providing our services and products to you, including administering, maintaining, managing and operating such services and products;
 - (ii) processing, assessing and determining any applications or requests made by you in connection with our services or products and maintaining your account with the Company;
 - (iii) developing insurance and other financial services and products;
 - (iv) developing and maintaining credit and risk related models;
 - (v) processing payment instructions;
 - (vi) determining any indebtedness owing to or from you, and collecting and recovering any amount owing from you, or any person who has provided any security or other undertakings for your liabilities;
 - (vii) exercising any rights that the Company may have in connection with our services and/or products;
 - (viii) carrying out and/or verifying any eligibility, credit, physical, medical, security, underwriting and/or identity checks in connection with our services and products;
 - (ix) any purposes in connection with any claims made by or against or otherwise involving you in respect of any of our services or products, including, making, defending, analysing, investigating, processing, assessing, determining, responding to, resolving or settling such claims, detecting and preventing fraud (whether or not relating to the policy issued in respect of this application);
 - (x) performing policy reviews and needs analysis (whether or not on a regular basis);
 - (xi) meeting disclosure obligations and other requirements imposed by or for the purposes of any laws, rules, regulations, codes of practice or guidelines (whether applicable in or outside Macau) binding on the Company or any other member of the Group, including making disclosure to any legal, regulatory, governmental, tax, law enforcement or other authorities (including for compliance with sanctions laws, the prevention or detection of money laundering, terrorist financing or other unlawful activities) or to any self-regulatory or industry bodies such as federations or associations of insurers;
 - (xii) for statistical or actuarial research undertaken by the Company or any member of the Group; and
 - (xiii) fulfilling any other purposes directly related to (i) to (xii) above.
 6. Your Personal Data will be kept confidential, but to facilitate the purposes set out in paragraph 5 above, the Company may transfer, disclose, grant access to or share Your Personal Data with the following:
 - (i) other members of the Group;
 - (ii) any person or company carrying on insurance-related and/or reinsurance-related business which is engaged by the Company in connection with the Company’s business;
 - (iii) any physicians, hospitals, clinics, medical practitioners, laboratories, technicians, loss adjusters, risk intelligence providers, claims investigators, organizations that consolidate claims and underwriting information for the insurance industry, fraud prevention organizations, other insurance companies (whether directly or through fraud prevention organizations or other persons named in this paragraphs), the police and databases or registers (and their operators) used by the insurance industry to analyze and check information provided against existing information, legal advisors and/or other professional advisors engaged in connection with the Company’s business;
 - (iv) any agent, contractor or service provider providing administrative, distribution, credit reference, debt collection, telecommunications, computer, call centre, data processing, payment processing, printing, redemption or other services in connection with the Company’s business; and/or
 - (v) any official, regulator, ministry, law enforcement agent or other person (whether within or outside Macau) to whom the Company or another member of the Group is under an obligation or otherwise required or expected to make disclosures under the requirements of any law, rules, regulations, codes of practice or guidelines (whether applicable in or outside Macau).
 7. Your Personal Data may be transferred or disclosed to any assignee, transferee, participant or sub-participant of all or any substantial part of the Company’s business.
 8. The Company is only allowed to (i) use Your Personal Data in direct marketing; or (ii) provide Your Personal Data to another person or company for its use in direct marketing, if you provide your consent or do not object in writing.
 9. In connection with direct marketing, the Company intends:
 - (i) to use your name, contact details (such as phone number, email address, and mailing address), gender, services and products portfolio information, financial background and demographic data held by the Company from time to time in direct marketing to market the following classes of services and products offered by the Company, other members of the Group and/or Our Business Partners (being providers of the services and products described below) from time to time:
 - a. insurance services and products;
 - b. wealth management services and products;
 - c. pensions, investments, brokering, financial advisory, credit and other financial services and products;
 - d. health-check and wellness services and products;
 - e. media, entertainment and telecommunications services;
 - f. reward, loyalty or privileges programmes and related services and products; and
 - g. donations and contributions for charitable and/or non-profit making purposes; and
 - (ii) to provide your name and contact details (such as phone number, email address and mailing address), gender, services and products portfolio information, financial background and demographic data to any members of the Group and/or Our Business Partners for their use in direct marketing for the classes of services and products described in paragraph 9(i) above (including, in the case of Our Business Partners, for money or other commercial benefit).
- The Company intends to send you marketing communications or materials and use Your Personal Data in accordance with paragraphs 8 & 9 above. If you do NOT agree to receive such marketing communications or the Company’s intended use of Your Personal Data, you may write to the Corporate Data Protection Officer of the Company at the address below to opt out from direct marketing at any time:**
- Corporate Data Protection Officer
FWD Life Insurance Company (Macau) Limited
12/F, Fortuna Business Centre,
No. 301-355, Avenida Comercial De Macau
Macau
10. To facilitate the purposes set out in paragraphs 5 and 9 above, the Company may transfer, disclose, grant access to or share Your Personal Data with the parties set out in paragraphs 6 and 9(ii) and you acknowledge that those parties may be based outside Macau and that Your Personal Data may be transferred to places where there may not be in place data protection laws which are substantially similar to, or serve the same purposes as, the Personal Data Protection Act.
 11. Under the Personal Data Protection Act you have the right to request access to Your Personal Data held by the Company and request correction of any of Your Personal Data which is incorrect and the Company has the right to charge you a reasonable fee for processing and complying with your data access request.
 12. Requests for access to or correction of Your Personal Data should be made in writing to the Corporate Data Protection Officer of the Company at the address above. Should you have any queries, please do not hesitate to call our Customer Service Hotline on 8988 6060.
 13. In case of discrepancies between the English and Chinese versions of this PICS, the Chinese version shall apply and prevail.
 14. The Company reserves the right, at any time effective upon notice to you, to add to, change, update or modify this PICS.

AUG 2021

收集個人資料聲明

- 閣下需要不時向富衛人壽保險（澳門）股份有限公司（「本公司」）或本公司的代理及代表就本公司的服務及產品提供個人資料及詳情。如未能提供所需資料及詳情，可能會導致本公司無法向閣下提供或繼續提供有關服務及產品。
- 本公司亦可以利用閣下提供的資料及詳情製作及匯編額外的個人資料。本公司不時收集、製作及匯編的所有個人資料，以下統稱為「閣下的個人資料」。
- 「閣下的個人資料」亦包括由閣下提供有關閣下的受養人、受益人、獲授權代表及其他人士的資料。如閣下代表他人提供個人資料，閣下確認閣下乃是他們的父母或監護人或閣下已取得有關人士之同意提供有關人士之個人資料予本公司作本聲明之用途。
- 如本聲明所述，閣下的個人資料亦可能被本公司的附屬公司、控股公司、聯營或聯屬公司或本公司控制的公司或與本公司受共同控制的公司（統稱「本集團」）處理。
- 閣下的個人資料可能用於以下用途：
 - 向閣下提供本公司的服務及產品包括管理、維持、處理及運作有關服務及產品；
 - 處理、評估及決定閣下就本公司的服務或產品而提出的任何申請或要求，以及維持閣下在本公司的賬戶；
 - 發展保險及其他金融服務及產品；
 - 發展及維持本公司信貸及風險之相關模型；
 - 處理付款指示；
 - 釐訂任何欠付閣下或閣下所欠的負債，及向閣下或任何為閣下的債務提供擔保或其他承諾的人士收取及追討欠款；
 - 行使與本公司的服務及 / 產品有關的任何權利；
 - 就本公司之服務及產品作出資格、信貸、身體、醫療、擔保、承保及 / 或身份核証；
 - 用於任何因本公司的產品或服務而由閣下提出或本公司對閣下提出的申索，包括作出、抗辯、分析、調查、處理、評核、決定、回應、解決或和解除有關申索以及偵測和防止欺詐行為（無論是否與就此申請而發出的保單有關）所需的目的；
 - 進行保單審閱及需求分析（不論是否定期進行）；
 - 本公司或本集團的其他成員根據任何法律、規則、規例、實務守則或指引（不論在澳門境內或境外適用）要求而須作出披露，包括向任何法定機構、監管機構、政府機構、稅務機構、執法機構或其他機構（包括為遵守制裁法、避免或偵查洗錢、恐怖分子資金籌集或其他不法活動）或向任何獨立監管或行業團體（如保險業聯會或協會等）作出披露；
 - 作本公司或本集團的任何成員的統計或精算研究；及
 - 履行與上文第 (i) 至 (xii) 段直接有關的其他用途。
- 閣下的個人資料將被保密但為達成上文第5段列出的用途，本公司可能將閣下的個人資料轉移、披露、讓其查閱或與以下各方共同使用：
 - 本集團的其他成員；
 - 任何因本公司業務而聘用之經營保險相關及 / 或再保險相關業務之人士或公司；
 - 任何因本公司業務而聘用的治療師、醫院、診所、醫生、化驗所、技師、損失理算人、風險情報供應商、索賠調查人、整合保險業申索和承保資料的組織、防欺詐組織、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名的其他人士）、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）、法律顧問及 / 或其他專業顧問；
 - 任何向本公司之業務提供行政、分銷、信貸資料庫、債務追討、電訊、電腦、熱線中心、資料處理、付款處理、印刷、贖回或其他服務的代理人、承包商或服務供應商；及 / 或
 - 任何本公司或本集團的其他成員負有責任或需要或預期要根據任何法律、規則、規例、實務守則或指引（不論在澳門境內或境外適用）作出披露的官員、規管者、部門、執法代理或其他人士（不論在澳門境內或境外）。
- 閣下的個人資料可能被轉移或披露予任何承讓者、受讓者、本公司業務的任何實質部分的參與人或次參與人。
- 本公司只可在閣下作出書面同意或不反對的情況下 (i) 使用閣下的個人資料作直接促銷用途，或 (ii) 將閣下的個人資料提供予其他人士或公司作其直接促銷用途。

- 就直接促銷而言，本公司擬：
 - 使用本公司持有閣下的資料作不定期直接促銷用途，資料包括閣下的姓名、聯絡資料（例如：電話號碼、電郵地址、郵寄地址）、性別、於本公司的服務及產品組合、及財務背景，以及人口統計資料。此等直接促銷涵蓋本公司、本集團其他成員及 / 或本公司之業務夥伴（即以下服務及產品的供應商）提供的下列服務及產品：
 - 保險服務及產品；
 - 財富管理服務及產品；
 - 退休金、投資、經紀、財務諮詢、信貸及其他金融服務及產品；
 - 健康檢查及健康服務及產品；
 - 媒體、娛樂及電信服務；
 - 獎賞、客戶忠誠或優惠計劃及相關服務及產品；及
 - 為慈善及 / 或非牟利用途的捐款及捐贈。
 - 將閣下的姓名及聯絡資料（例如：電話號碼、電郵地址、郵寄地址）、性別、服務及產品組合資料，及財務背景，以及人口統計資料提供予本集團任何成員及 / 或本公司之業務夥伴，讓其用於直接促銷上文第9(i)段所載的服務及產品（如為業務夥伴，則包括作金錢或其他商業利益）。

本公司有意向閣下送交推廣訊息或資料及根據上述第8及第9段使用閣下的個人資料。如閣下不同意接收有關的推廣訊息或本公司擬對閣下的個人資料的使用，閣下可於任何時間致函本公司的資料保護主任並將函件郵寄至以下地址，藉以行使閣下不同意此項安排的權利：

資料保護主任
富衛人壽保險（澳門）股份有限公司
澳門商業大馬路301-355號財神商業中心12樓

- 為達成上文第5及第9段所列出的目的，本公司可能將閣下的個人資料轉移、披露、讓其查閱或與上文第6及第9(ii)段所列的各方共同使用及閣下知悉有關一方可能設在澳門以外的地方及閣下的個人資料可能被轉往的地方未必設有與《個人資料保護法》大致相同或用作同一用途的資料保護法。
- 根據《個人資料保護法》，閣下有權要求查閱本公司所持有閣下的個人資料，並要求改正閣下的不正確個人資料及本公司有權就處理及遵行閣下的查閱資料要求而收取合理費用。
- 查閱或改正閣下的個人資料要求，應以書面形式向本公司的資料保護主任提出並將函件郵寄至上述地址。如閣下有任何疑問，敬請致電本公司之客戶服務熱線8988 6060。
- 中英文本如有歧異，概以中文本為準。
- 本公司保留隨時增補、更改、更新及修訂本聲明之權利，並任何更改將於發出通知時起生效。

2021年8月