# Change of Regular Premium Amount & Lump Sum

更改定期保費金額及一筆過供款



**Policy Number** 

保單號碼

Name of Policy Owner

保單主權人姓名

Please DO NOT use this form for Traditional Policy. 如果您的保單是傳統人壽保單,請不要使用此表格。



您现在可以輕鬆更新您的聯繫方式。只需登錄 My Sun Life HK 並更新您的個人資料。就這麼簡單! My Sun Life HK 流動應用程式

Manage your policy at your fingertips 24/7

保單管理 隨時一觸實現

You can now easily update your contact details. Just log on to My Sun Life HK and update your Profile. It's that simple!

View coverages 查閱保障額

Manage your funds

專業團隊支援

管理基金

Premium due notifications 繳費提示 Update personal details

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Scan this QR code or go to the link below to learn more 掃描此二維碼或 瀏覽以下網址了解更多 sunlife.com.hk/MySunLifeapp

re you can enjoy our high quality of service, we would like to invite you to update your contact details on My Sun Life HK or by completing the below section 為確保您能享受完善的服務體驗,我們誠邀您透過 My Sun Life HK 應用程式或填寫以下部份更新您的聯絡資料

電郵地址

Mobile 手提

# Important Notes 重要事項

Please complete this form by typing or in clear handwriting. Any amendments should be endorsed by the Policy Owner in full signature.

請清楚地填寫此表格。任何資料如有更改,保單主權人必須在更改的位置簽署作實。

- Subject to the provisions stated in the policy, the completed and signed forms must be received by Policy Administration Services of Sun Life Hong Kong Limited ("Sun Life") by 4:00 p.m. on a business day (except Saturdays, Sundays and public holidays) in order for the fund redemption to take place on the following valuation day. 在符合保單合約內之條款的規定下,已填妥及簽署的表格須於每個營業日(星期六、星期日及公眾假期除外)下午四時正前交到香港永明 金融有限公司(「永明」)保單行政服務部,以便於下一個估值日進行有關基金贖回交易。
- Sun Life shall not be liable for any loss or damages, whatsoever or howsoever arising from delay in processing your instruction in any of the circumstances including but not limited to the below:
  - a) Any incomplete or unclear instruction resulting that we cannot process your instruction in full, we will not process any portion of the instruction.
  - b) If more than one instruction is received in respect of the same/ different transactions for the same policy on any single day, Sun Life has the sole discretion to determine the priority in dealing with such instructions or to defer such instructions.
  - c) If any contribution(s) is pending for investment or processing or any transaction for the same policy is in progress at the date of receipt of this form, Sun Life has the sole discretion to determine the priority in dealing with such instructions or to defer such instructions

永明毋須對因延遲處理閣下的指示而招致的任何損失或損項承擔責任,包括但不限於以下情況:

- 甲. 任何不完整或不明確的指示導致不能完整處理閣下的指示, 永明不會處理此表格的任何部份。
- 乙. 永明於任何一日收到閣下就此保單的相同或不同交易發出超過一項指示, 永明可全權酌情決定該等指示的處理先後次序或延遲處理閣 下指示。
- 丙. 永明於收到此表格時就此保單仍有未完成或進行中的供款或任何進行中的交易, 永明可全權酌情決定該等指示的處理先後次序或延遲 處理閣下指示。
- Once the form is submitted to Sun Life, whether through Sun Life's consultant or your broker or otherwise, you cannot withdraw or change any of the instructions provided on the form. Any change of instructions will be treated as a new request, which will be processed after the former request is effected by Sun Life.

此表格一經遞交給永明,不論是經由永明理財顧問、閣下的經紀,或由其他途徑遞交,閣下便不能取消或更改表格上的任何指示。任何更 改,將被視作一項新申請,而該新申請會在永明將閣下先前的申請辦妥後處理。

Sun Life reserves the right to ask for other supporting documents if deemed necessary. 如有需要, 永明保留要求遞交其他証明文件之權利。

#### For lump sum 一筆過供款:

The amount paid in by you will first be used to settle the required levy, and the balance will be applied for investment, unless otherwise specify.

除非另有說前,閣下所繳付之金額將先行用作繳付保費徵費,餘額將用作投資。

#### For investment-linked insurance 對於投資相連壽險:

Investment involves risk. If at any point of time you are in doubt whether your investment options is/are suitable for you, you should seek independent advice.

投資涉及風險。在選擇基金作為投資時,若於任何時刻閣下對於閣下的投資選擇是否適合閣下有任何疑問,閣下應徵詢獨立意見。

Please refer to Sun Life website www.sunlife.com.hk for more details on your investment options.

有關投資選擇的詳情, 請瀏覽永明網頁 www.sunlife.com.hk。

2021.03

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For increase of regular contribution or lump sum investment, please submit the following document with this request to comply with the requirements set out by the Insurance Authority under the "Initiative on Financial Needs Analysis": 如欲增加定期供款金額或作一筆過供款,請同時遞交以下文件以符合保險業監管局於《財務需要分析》中訂明要求: The instruction will only be processed after ALL required document(s) and payment are received. 閣下之指示將於所有有關文件及款項收妥後始進行。 Documents Financial Needs Analysis (FNA) Risk Profile Questionnaire (RPQ) Important Fact Statement (IFS) 風險承擔問卷 文件 財務需要分析 and Applicant's Declarations Product Type 重要資料聲明書及申請人聲明書 產品類別 Investment-linked insurance 投資相連壽險 Universal life insurance N/A N/A 萬用壽險 不適用 不適用 In addition to the above documents, clients being holder of Resident Identity Card / Passport of People's Republic of China must submit the following documents: 除上列文件外,持有中華人民共和國居民身份證/護照的內地人士須同時遞交: Important Facts Statement for Mainland Policyholder ("IFS-MP") 重要資料聲明書 --內地人士在港投購壽險保單 ("IFS-MP") PRC Resident Declaration 中華人民共和國居民聲明書 Change of Regular Premium Amount 更改定期保費金額 If you intend to reduce premium payable by policy changes in this policy in order to use it as premium payment of a new insurance policy, please approach to your licensed insurance intermediary who will assist you to understand the implications and associated risks involved as explained in "Important Facts Statement - Policy Replacement" ("IFS-PR"). You shall read through the details before making the change and return the signed IFS-PR together with the new application (if any) to us. 如閣下打算在本保單中減少應付保費以繳付新保單之保費,請聯絡閣下的持牌保險中介人,以助閣下了解「重要資料聲明書—轉保」("IFS-PR")內所 述的影響和相關風險。在進行保單更改前,請閣下閱讀詳細內容,並簽署IFS-PR與新申請表(如有)一併遞交。 Please " < " the appropriate option New Regular Premium Amount 請「✓」適當選項 \$ (in Policy Currency) The amount must meet the minimum requirement specified by the Company 最低金額須符合公司之要求 新定期保費金額(保單貨幣) \*For change of Payment Mode, please complete the "Request ─ 每年 Annually \* 毎月 Monthly \* of Policy Change" form 如需更改付款形式,請填寫「保單更改申請」表格 Lump Sum Payment 一筆過供款 Lump sum amount The amount must meet the minimum requirement \$ specified by Sun Life 最低金額須符合永明之要求 (in policy currency) -筆過供款金額(保單貨幣) For investment-linked insurance, please confirm the fund allocation 對於投資相連壽險,請確認供款分配 Please "  $\checkmark$  " the appropriate option and provide the Follow existing Contribution Allocation Scheme / Investment Mandate necessary details (if applicable) 按照現時供款分配指示/投資委託書 請「✓」適當選項及提供有關資料(如適用) According to the allocation stated below 按照下列分配指示 (It only applies to this application and will NOT affect existing Investment Mandate 只適用於是次申請,並不影響現時供款分配指示) Fund Allocation 基金分配 Percentage (%) (Minimum 最少 5%) Fund Name / Code in Full 基金全名/編號 百分率(%) Please state the percentage(s) in whole number and the total must equal 100% 基金百分率必須為整數並合共為 Total 合共 100%

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

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. 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.

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 insurance 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; (i) to fraud prevention organisations; (i) to other insurance industry to 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; (i) to any person to whom 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 subjec

Company.

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, Tower B, Cheung Kei Center, 18 Hung Luen Road, Hunghom, 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.

Please tick here to reject receiving marketing information from Sun Life.

本人 / 吾等明白及同意香港永明金融有限公司 (於百嘉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、調查和結清保險索價個案、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、恐怖分子資金壽集、选稅或其他)。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,就永明及至三方的退休金。金融及保險產品的推廣資訊,以包括電話、郵件、電動、電話短到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/吾等的個人資料子;(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記;(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)及其會負;(g) 團體產品的保持。以表述是與一个人,(e) 公司的開連公司(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)及其會負;(g) 團體產品的保健持有人的第三方服務供應商;(i) 整合保險業率價和承保資料的組織;(j) 防欺於組織;(k) 其他保險公司(無論是直接地,或是通過防欺詐組藏或本段中指名的其他人士)。警察和保險業和成立有限所對成者資料市對所提供的資料作出分析和檢查的數據庫或登記冊(及其運營有);(i) 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造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由其作出故應的任何人士;及(m) 按法例要求或准許的其他人士。

即於時代機構發出之指引或其就法例、法規或造死時代成本的充分是不可認到的是以1950年的人主,及(m)技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.

70.5417年27812 73.2。 本人/吾等的目本人/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鶯道18號祥祺中心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)。

□ 若不同意收取由永明發出的推廣資訊,請於方格內填上剔號。

# Declaration & Authorization 聲明及授權

I/We confirm that, by signing below, I /We have read, fully understood and agreed to the notes throughout the form.

本人/我們已細閱,完全明白及同意本表格的注意事項並簽署作實。

I/We understand that this policy service instruction is bound by the policy provisions of the above policy.

本人/我們明白上列的保單服務指示須受上述保單的條款約束。

## For investment-linked insurance 投資壽險保單:

I/We confirm that I/We have evaluated the level of risk of the underlying fund/investment myself/ourselves and have selected the investment options for the purposes of the policy based on my/our own judgement and personal needs

本人/我們已評估各基金/投資之風險水平。本人/我們依據本人/我們的判斷和個人需要作出此保單之投資選擇。

I/We understand that investment involves risk and the value of investment may go down as well as up. Past performance is not necessarily a guide to future performance.

。 本人/我們明白投資附帶風險及投資價格可升可跌。過往業績不能作日後表現的指引。

## Required Item and Signature 所需項目及簽署

The below items are required to complete your request 保單主權人需要提供以下項目以完成閣下之申請

Financial Needs Analysis

財務需要分析

Risk Profile Questionnaire - Applicable to Investment Linked Insurance Policy only

風險承擔問卷 – 只適用於投資相連壽險保單

Important Fact Statement (IFS) and Applicant's Declarations - Applicable to Investment Linked Insurance Policy only

重要資料聲明書及申請人聲明書 - 只適用於投資相連壽險保單

Important Facts Statement for Mainland Policyholder ("IFS-MP") – Applicable to holder of PRC ID / Passport 重要資料聲明書 – 內地人士在港投購壽險保單("重要資料聲明書") - 只適用於持有中華人民共和國居民身份證/護照的內地人士

PRC Resident Declaration - Applicable to holder of PRC ID/Passport

中華人民共和國居民聲明書 - 只適用於持有中華人民共和國居民身份證/護照的內地人士

Direct Debit Authorization – Applicable to Change of Regular Premium Amount Or Premium (Lump Sum or Regular Premium) 直接付款授權書 – 只適用於更改定期供款金額 或 保費(一筆過供款/定期保費)

<<PLEASE DO NOT SIGN A BLANK FORM 請勿在空白表格上簽署>>

Signature of Policy Owner

保單主權人簽署

Date (DD/MM/YYYY)

日期(日/月/年)

Please return a full set of this form within 30 days of signing 請於簽署後30天內提交完整的表格