# Withdrawal - Traditional Policy

提取保單款項-傳統人壽保單



Policy Number 保單號碼		Name of Policy Owner 保單主權人姓名	
您现在可以輕鬆  My Sun  My Sun  Manage your policy  保單管理 隨時一	更新您的聯繫方式。只需登錄 My Sun Life <b>Life HK</b> Mobile App 流動應用程式 y at your fingertips 24/7 觸實現	View coverages 直閱保障額	stifications  Scan this QR code or go to the link below to learn more 補植此二维碼或
To ensure you can enjoy our high quality of service, we 為確保您能享受完善的服務體驗,我們誠邀您透過 My			
Email 電郵地址		Mobile 手提 ( )	
Important Notes 重要事項			
請清楚地填寫此表格。任何資料如何 2. If you intend to withdraw policy verification insurance intermediary who will a Policy Replacement" ("IFS-PR" application (if any) to us. 如閣下打算在本保單中提取保單價值響和相關風險。在進行保單更改前。 3. Once the form is submitted to Su withdraw or change any of the in after the former request is effect 此表格一經遞交給香港永明金融有限	有更改,保單主權人必須在更改的位置簽 value in this policy in order to use it as assist you to understand the implicatic ). You shall read through the details 直以繳付新保單之保費,請聯絡閣下的持 請閣下閱讀詳細內容,並簽署IFS-PR與 In Life Hong Kong Limited ("Sun Life") structions provided on the form. Any ed by Sun Life.	premium payment of a new insurance on and associated risks involved as explefore making the change and return improved the change and return improved in the change and return improved in the change of instructions will be treated a change of instructions will be treated in the change of	e policy, please approach to your licensed plained in "Important Facts Statement — the signed IFS-PR together with the new 科聲明書一轉保」("IFS-PR")內所述的影 or tor your broker or otherwise, you cannot as a new request, which will be processed 遞交,閣下便不能取消或更改表格上的任何
Withdraw of Policy Valu	。坦取仅留德值		
Type of Policy Value 保單價值類別	Amount (in Policy 金額( 以保單貨)		Please " \ " the appropriate option and provide the necessary details (if applicable) 請「 \ 」適當選項及提供有關資料
			(如適用)
<b>Dividend</b> 紅利	☐ All 全部 Or 或 ☐ Partial Amount 部份金額		
	Or 或		
紅利 Cash Coupons	Or 或 Partial Amount 部份金額 All 全部 Or 或		
紅利  Cash Coupons 現金 / 可支取現金  Cash Value of Paid-up Addition	Or 或 Partial Amount 部份金額  All 全部 Or 或 Partial Amount 部份金額  All 全部 Or 或		

2021.03

Page 1 of 3



/WDT

A) Transfer to Policy 轉		
ty fransier to rottey +0.	至保單	
Notes 備註: If payment is to be transfe 如欲轉移款項至非閣下名下的		not owned by you, please also complete the "Third Party Payment Declaration Form E者付款聲明書」。
Policy No. 保單號碼:		as 作為
Loan repaym	ent 償還貸款	Premium & Levy 保費及保費徵費
Others (pleas	e specify) 其他 (請註明)	
s) FPS or local money to	ransfer 轉數快或本地	轉賬付款
(1) Bank account holder na (2) Please provide account 戶口證明,而該證明須列有銀 (3) If the payout transactio	holder's bank account 行戶口持有人姓名及銀行 n via "FPS" or local mo icy Owner's correspond	Policy Owner's name 銀行賬戶持有人姓名必須與保單主權人姓名相同。 proof which shows account holder name and account number 請提供帳戶持有人的銀序賬號。 proof transfer is unsuccessful, the entire amount will be paid to the Policy Owner by dence address. 如未能成功以「轉數快」形式或本地轉賬付款,整筆金額將以支票支付予保
FPS identifier 轉數快讀		Email 電郵 (by FPS 轉數快):
TI 3 Identifier 中安人人的	ייא טער נייט.	
■ Mobile number 手機號	碼 (by FPS 轉數快):	(Country Code 國家代號) (Telephone No 電話號碼)
Transfer to Policy's as	tivo autonav hank acce	punt 轉賬至保單之現行自動轉賬繳費賬戶
Transfer to Folicy's ac	tive autopay bank acco	Junit 特別主体半たが11日朝特版級貝版厂
		· 賬戶 (Please provide bank account proof 請必須提供銀行帳戶證明):
Bank No 銀行編號	Branch No 分行編號	Bank Account Number 銀行賬戶號碼
Payout currency 收取款項貨幣		HKD 港元
		RMB 人民幣 (Only applicable for policies denominated in RMB 只適用人民幣貨幣的係
	•••••	
) Cheque 支票		
單發出港元支票時,將以永明	出票當日之兌換率計算。	ncy policies, Sun Life's daily exchange rate upon the cheque issuance will apply. 就夕 ued unless otherwise specified. 如無特別指示,美元保單將獲發本地結算之美元支票。
(1) When issuing a HKD ch 單發出港元支票時,將以永明	出票當日之兌換率計算。	
(1) When issuing a HKD ch 單發出港元支票時,將以永明 (2) For USD policy, a local	出票當日之兌換率計算。	ued unless otherwise specified. 如無特別指示,美元保單將獲發本地結算之美元支票。
(1) When issuing a HKD ch 單發出港元支票時,將以永明 (2) For USD policy, a local Cheque Currency 支票貨幣	出票當日之兌換率計算。	HKD 港元 Policy Currency 保單貨幣
(1) When issuing a HKD ch 單發出港元支票時,將以永明 (2) For USD policy, a local Cheque Currency 支票貨幣	出票當日之兌換率計算。	ued unless otherwise specified. 如無特別指示,美元保單將獲發本地結算之美元支票。  HKD 港元 Policy Currency 保單貨幣  Posted to my correspondence address 郵寄至本人通訊地址
(1) When issuing a HKD ch 單發出港元支票時,將以永明 (2) For USD policy, a local Cheque Currency 支票貨幣	出票當日之兌換率計算。	ued unless otherwise specified. 如無特別指示,美元保單將獲發本地結算之美元支票。  HKD 港元 Policy Currency 保單貨幣  Posted to my correspondence address 郵寄至本人通訊地址  Delivered via my consultant 由本人之顧問轉交
(1) When issuing a HKD ch 單發出港元支票時,將以永明 (2) For USD policy, a local Cheque Currency 支票貨幣	出票當日之兌換率計算。	ued unless otherwise specified. 如無特別指示,美元保單將獲發本地結算之美元支票。  HKD 港元 Policy Currency 保單貨幣  Posted to my correspondence address 郵寄至本人通訊地址  Delivered via my consultant 由本人之顧問轉交  Collected at Client Service Centre 親臨客戶服務中心領取  Contact no. 聯絡電話:

#### 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 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 information and policy details to contact me/us with marketing information and the regulator of not 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 providers, reinsurers, accountants, solicitors

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、調查和結清保險寒僧個案、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;(vii)與上述目的直接有關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(其相關於漁巢後、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

水明外中使用本人/音寺的聯絡資料,基本個人資料及保单資料,就水明及第二方的退任金、益體及保險產品的推廣資訊,以已括電話、郵件、電郵、電話想訊或任何電子信息寺方法聯絡本人/音等。除非得到本人/音等之同意包括表示不反對,否則求明不可使用本人/音等之資料為該用途。本人/吾等明白若本人/音等中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,包括索帽調查員、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特有人或客戶的保險經紀;(d)公司的保險代理人及強債金中介人(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(成任何相似的保險公司協會)及其會員;(g)團體產品的保障計算 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秩應商;(d)整合保險業等價和承保資料的組織;(f)防軟許組織;(k)其他保險公司(無論是面接地,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);(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。

记录时起说过去。 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。

I/We understand and agree that should I select payout amount in a different currency other than the Policy Currency, I will bear the necessary exchange difference, such difference being determined by Sun Life on the basis of the internal exchange rates as at the time of the relevant currency conversion.

本人/我們明白並同意,如果我選擇保單貨幣以外的其他貨幣付款金額,我將承擔必要的匯兌差額,該差額由永明根據當時的內部匯率確定相關貨幣換算。

# 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

True copy of HK Permanent Identity Card or Passport where the policyholder does not hold a HK permanent ID Card (if it has expired or not submitted before)

香港永久性居民身份證真確副本 / 如並非持有香港永久性居民身份證則必須提供護照真確副本(若已過有效期或之前未曾提交)

True copy of a passbook or monthly statement that bears the information of account number and name of account holder 載有銀行賬戶號碼及賬戶持有人姓名資料的存摺或月結單真確副本

### << 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)

Signature of Assignee (if any)

受讓人簽名 (如有)

Signature of Irrevocable Beneficiary (if any)

不可撤換受益人簽署(如有)

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