



**American International Assurance
Company (Bermuda) Limited**
(Incorporated in Bermuda
with limited liability)

Request Form for Change of Address / Telephone Numbers / Fax / Email Address
更改通訊地址/聯絡電話/傳真/電郵地址申請表格

Policy Number 保單號碼	Name of Insured 受保人姓名	Name of Owner 持有人姓名
Agent's Name 營業員姓名	Agent Code 營業員號碼 / Area Code 區域編號	Agent's Tel. No 營業員聯絡電話

PART A 甲部 Correspondence Address Telephone Numbers / Fax / Email Address 通訊地址/電話號碼 /傳真/ 電郵地址

You may visit our Company website www.aia.com.hk to change your address, telephone number, fax number and email address in the AIA Customer Corner.
閣下可登入本公司網www.aia.com.hk內的友邦客戶專頁更改地址、電話號碼、傳真及電郵地址。

Other Policies 其它保單號碼 The following policies must belong to the same owner 下列之保單須屬於同一保單持有人

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Please complete in English block letters. Post Office Box is not accepted as correspondence address. 請以英文正楷填寫。恕不接受郵政信箱作為通訊地址。

Flat/Room : _____ Floor : _____ Block : _____
室 樓數 座數
Building/Estate Name : _____
大廈/屋邨名稱
No. & Name of Street/Lot No. : _____
街道名稱及號數/地段號數
District _____ / H.K.香港/ KLN九龍/ N.T.新界 Country : _____
地區 國家

Office Tel 公司電話 _____ Home Tel 住宅電話 _____ Mobile 手電電話 _____
Fax 傳真號碼 _____ Email Address 電郵地址 _____

PART B 乙部 Apply "AIA e-Advice" 申請「友邦電子通知書」 Please mark a tick in the box to apply for this service.
閣下如欲申請此服務請於空格內劃上 號。

Apply for Internet Service "AIA e-Advice" to suppress physical copies of the selected correspondences and view / download the softcopies via AIA Customer Corner for the above policy and any other policy numbers if specified above in Part A, subject to the #Terms and Conditions of "AIA e-Advice". Please provide your email address in Part A.
申請「友邦電子通知書」網上服務，提交以上保單及其他保單（如有）列出於甲部號碼之停止收取個別通知書並透過友邦客戶專頁閱覽或下載個別通知書，並根據「友邦電子通知書」的#條款及條件使用；請於甲部提供閣下的電郵地址。

I/We DECLARE and AGREE that any personal data and other information relating to me/us or my/our policy(ies) or investments contained in this application or collected, obtained, compiled or held by the Company by any means from time to time may be used, maintained, processed, stored, transferred, disclosed and/or shared by the Company for the purposes of processing, administering, implementing and effecting the requests or transactions contemplated in this application or any other applications made by me/us from time to time, promoting or providing subsequent or other services or products to me/us, direct marketing, data matching and/or communicating with me/us. I/We further DECLARE and AGREE that the Company may transfer, disclose, grant access of or share such personal data and other information to or with individuals, entities and/or organizations associated with the Company and/or to or with third parties (including, without limitation, reinsurers, claims investigation companies, industry associations or federations, fund management companies, financial institutions, or service providers) selected by the Company, in each case whether within or outside of Hong Kong (applicable to policies issued in Hong Kong) / Macau (applicable to policies issued in Macau), for any of the aforesaid purposes and/or for the purposes of providing administrative, data processing, data maintenance or storage, telecommunications, computer, payment or other services to the Company in connection with the operation of its business. I/We understand that I/we have the right to obtain access to and to request correction of my/our personal data held or controlled by the Company. Such request can be made to any of the Company's Customer Service Centres. If I/we do not wish to receive marketing information or materials, I/we will send an opt-out notice to the Company, in which case my/our personal data and other information would be included in a centralized customer opt-out list that may be shared amongst the Company's associated partners for reference.

本人/我們現聲明並同意貴公司可使用、保留、處理、儲存、轉交、透露及/或共用貴公司所收集、索取、整理或保留在此申請表所載或從其他途徑取得之任何有關本人/我們的個人資料或其他有關本人/我們的保單或投資資料，用作處理、管理、落實及實行在此申請表所載或本人/我們從任何其他申請表所提出之要求，及介紹或提供其稍後或其他的服務或產品予本人/我們，直接促銷、資料核對及/或聯絡本人/我們之用。本人/我們再聲明並同意貴公司可向與貴公司有關的香港（適用於香港簽發之保單）/澳門（適用於澳門簽發之保單）或海外的人士、團體及/或機構及/或任何被選的第二機構（包括但不限於再保險及賠償調查公司，及有關的行業協會/聯會、基金管理公司、金融機構或提供有關服務之公司）轉交、透露、授權取得或共用本人/我們之個人或其他資料，用作以上列明之用途及/或貴公司業務運作之用，包括行政、資料處理、資料保存或儲存、通訊、電腦、付款或其他服務。本人/我們明白到本人/我們有權向貴公司查閱及申請更改貴公司儲存或管理與本人/我們有關的個人資料。有關的申請可於貴公司任何一間客戶服務中心辦理。若本人/我們不想收到貴公司的銷售資料或刊物，本人/我們會發出信函通知貴公司，而本人/我們的個人或其他資料會存於貴公司之中央資料庫內的非聯絡客戶名單，並會供貴公司及有關人士/機構作參考。

Signature of Owner/Trustee _____ on _____
持有人/信託人簽名 (if other than insured 倘非受保人) 於 MM月/DD日/YYYY年

Signature of Assignee _____ on _____
受讓人簽名 (if applicable 如適用) 於 MM月/DD日/YYYY年

PLEASE RETURN WITHIN 14 DAYS 請簽署後14天內遞交
PLEASE DO NOT SIGN ON BLANK FORM 請勿在空白表格上簽署

OPPOSF30.0810