



REQUEST FORM FOR DIVIDEND, FPDA, CASH ENDOWMENT 紅利/現金儲備金戶口/可支取現金申請表

Policy Number 保單號碼	Name of Insured 受保人姓名	Name of Owner 持有人姓名
Agent /Broker Name 營業員/經紀姓名	Agent/Broker Code 營業員號碼/經紀號碼 Area/Agency/Broker Code 區域/營業員/經紀組別編號	Agent's /Broker Tel. No 營業員/經紀聯絡電話



Please tick the appropriate box 請在適當的空格內劃上"X" 號 1. Withdraw 提取 _____ ☐ Future Premium Deposit Account 現金儲備金戶口 \$ ____ ■ Dividend 紅利 \$ ____ ■ Deposit for Policy Change 保單更改存款 \$___ For e-Bankin customers, the payment will be transferred to the designated bank account. 已登記使用"電子入賬服務"之答户, 本公司會將款項轉入至指定之銀行户口。 If e-BankIn has not been registered, we will pay the cheque in: 如未有登記使用"電子入賬服務", 本公司會以支票支付, 貨幣選擇為: # Send cheque to: # 請將支票: My correspondence address registered with the company 寄往本人於公司登記的通訊地址 ○ Hong Kong Dollar 港元 O Policy Currency 保單貨幣 ○ The above-named agent / broker 遞送給以上營業員/經紀 # If not indicated above, the cheque will be sent to the Owner's correspondence address # 如沒有註明指示,支票會寄往保單持有人的通訊地址 1. I understand that any benefits payable under the Policy will be paid in the latest policy currency as shown on the Policy Information Page of the Policy or, if applicable, the appropriate subsequent endorsement. Accordingly, the provision of the option to receive any such benefits in a currency other than the latest policy currency (the "Opted Currency") is solely a service offered by the Company at its discretion.

一、本人明白所有保單利益之款項將根據保單資料頁或隨後所發出之批註(如適用)所載之最近期保單貨幣為準。因此,提供選擇以最近期的保單貨幣以外的貨幣("選擇貨幣")作為 收取任何此等利益的貨幣只屬貴公司酌情所提供之服務。 2. I understand and agree that should I opt for payment of any benefits payable under the Policy in the Opted Currency, I will bear the necessary exchange difference, such difference being determined by the Company on the basis of the Company's internal exchange rates as at the time of the relevant currency conversion. 二、本人明白及同意如本人選擇任何保單下所作出的利益款項以"選擇貨幣"支付,本人同意承擔所需的兌換差額,而該差額是有關貨幣兌換時依據貴公司內部貨幣兌換率而釐定。 (MM月/DD日/YYYY年) ■ Pay the premium of the above policy due on 繳付上述保單之保費,到期日為:______ US\$/HK\$ ___ Repay the loan on policy no. 繳付保單貸款,保單號碼: ___ Pay the initial deposit for New Application 繳付新保單作首期之按金 Application No Applicant's Name Relationship with owner Currency / Amount 新保單申請號碼 申請人姓名 與保單持有人之關係 Pay the premium of other policies due on 繳付以下保單號碼到期之保費 Currency / Amount Premium due date Relationship with owner 貨幣/金額 保費到期日 與保單持有人之關係

2. Change the dividend option, with effect from next anniversary, to 更改紅利給付辦法,由下期週年日生效:				
□ Cash Payment 支取現金 □ Premium Deduction 扣除保費 □ Divident	dend Accumulations 積存生息	☐ Paid Up Additions 加購付清保險		
□ Loan Reduction, and the balance, if any, to 減去借款,若有餘額則:	Cash Payment 支取現金	○ Dividend Accumulations 積存生息		
Note: If the dividend option is no longer Dividend Accumulations, all accumulated dividend, if any, will be returned to the Owner. 註:紅利給付辦法一旦不再是積存生息,任何在公司積存生息之紅利將會退回給保單持有人。				
3. □ Other instructions 其他指示				
PERSONAL DATA COLLECTION AND USE				
I / We confirm that I / we have read and understood the AIA Person I / We declare and agree that any personal data and other informatic contained in this application or collected, obtained, compiled or held collected and utilized in accordance with the AIA PIC. I / We acknown outside of Hong Kong (for policies issued in Hong Kong) or Macau opurposes and to the types of transferee as set out in the AIA PIC. The updated version of AIA PIC is available for download from its weather than the AIA PIC is available for download from the AIA PIC is available for download from the AIA PIC is available for do	on relating to me / us or my I by the Company by any me vledge and consent to the tr for policies issued in Macau	/ our policy(ies) or investments eans from time to time may be ransfer of my / our personal data u), as the case may be, for the		
個人資料收集及使用 本人/我們確認本人/我們已閱讀及明白AIA個人資料收集聲明(「AIA個人資料收集聲明」)。本人/我們聲明及同意在本申請所載或貴公司不時以任何方法收集所得、編製或持有的任何個人資料及關於本人/我們或本人/我們的保單或投資的其他資料,可根據AIA個人資料收集聲明收集及使用。本人/我們知悉及同意就AIA個人資料收集聲明所述目的視乎情况轉讓本人/我們的個人資料至香港(如保單在香港繕發)或澳門(如保單在澳門繕發)境外予AIA個人資料收集聲明所載的資料承讓人。 AIA個人資料收集聲明的最新版本可於以下網址下載:www.aia.com.hk,及可向貴公司索取。				
on		on —		
th. t. t	gnature of Assignee 讓人簽名 (if applicable 如滴	於 MM月/DD日/YYYY年		

Policy Number 保單號碼

PLEASE SIGN & RETURN IMMEDIATELY BUT NO LATER THAN 14 DAYS 請簽署後即時但不遲於14天內遞交 PLEASE DO NOT SIGN ON BLANK FORM 請勿在空白表格上簽署

受讓人簽名 (if applicable 如適用)