



NOTICE OF RELEASE OF ASSIGNMENT 解除轉讓權益通知

Policy Number 保單號碼	Name of Insured 受保人姓名	Name of Owner 持有人姓名
Agent / Broker's Name 營業員 / 經紀姓名	Agent / Broker Code 營業員 / 經紀號碼 Area / Agency / Broker Code 區域 / 營業員 / 經紀組別編號	Agent / Broker's Tel. No 營業員 / 經紀聯絡電話
TR Membership Number 業務代表會員號碼 (For Brokers only 僅供經紀使用) <input type="checkbox"/> IA <input type="checkbox"/> ANG <i>TIPS: Check the checkbox (IA for HK; ANG for Macau) and input the reg. no. using standard format [for HK, it is 2 letters + 4 digits; for Macau, it is 3 letters + 4 digits]</i> <i>提示：選取方格 (IA-香港；ANG-澳門) 並填入特定的登記號碼 [香港號碼由2個英文字母 + 4位數字組成；澳門號碼由3個英文字母 + 4位數字組成]</i> <i>Remark: If the stated AIA financial planner / broker / IFA on this form is not my current servicing AIA financial planner / broker / IFA, I give consent to him/her to handle and follow up my request.</i> <i>備註：倘若在上述表格上填寫的財務策劃顧問 / 經紀 / 獨立理財顧問並不是本人目前的財務策劃顧問 / 經紀 / 獨立理財顧問，本人同意他/她處理並跟進我的要求。</i>		



04862039

Name of Assignee :

受讓人姓名：_____

Name of Assignor :

轉讓人姓名：_____

TAKE NOTICE that for full value received of all principal, interest and other moneys secured under a deed of collateral assignment / collateral assignment agreement* dated _____ between the Assignor and the Assignee (the "Assignment"), the Assignee has released all of the Assignor's obligations and liabilities under the Assignment and has re-assigned unto the Assignor all rights, title, interests, benefits, claims, demands and proceeds under the Assignment and to hold the same unto the Assignor absolutely. Certified copy(ies) of the deed of re-assignment [and revocation of power of attorney]* is / are* attached hereto for your record retention.

茲通知，對於所有本金，利息及抵押轉讓契據下所擔保的其他款項收到的全部價值，根據於_____由轉讓人與受讓人所訂立之抵押轉讓契據/抵押轉讓協議（「轉讓」），受讓人已取消轉讓人在轉讓下的所有義務及責任並重新將轉讓協議內的一切權利、所有權、權益、利益、申索、要求及收益再轉讓予轉讓人並可享有絕對權。隨附上重新轉讓契約[及撤回授權書]之核證文本予您作紀錄保存。

TAKE FURTHER NOTICE that the notice of assignment dated _____ is discharged and has no further force and effect.

茲通知於_____訂立之轉讓權益通知書已解除並再沒有任何約束及效力。

PERSONAL DATA COLLECTION AND USE

I / We confirm that I / we have read, understood and agreed to the Personal Information Collection Statement(s) of my / our policy issuer(s) and/or pension scheme provider(s), i.e. AIA International Limited (Hong Kong Branch), AIA International Limited (Macau Branch) and / or AIA Company Limited where applicable, (the "PICS") which is available for download:
<https://www.aia.com.hk/en/privacy-statement-main>.

I / We declare and agree that any personal data and other information relating to me / us or my / our policy(ies), account(s) or investments contained in this application or collected, obtained, compiled or held by my / our policy issuer(s) and / or pension scheme provider(s) by any means from time to time may be collected and utilized in accordance with the PICS.

I / We acknowledge and consent to the transfer of my / our personal data to parties within or outside Hong Kong (for policy(ies) / pension scheme(s) issued in Hong Kong) or Macau (for policy(ies) / pension scheme(s) issued in Macau), as the case may be, for the purposes as set out in the PICS.

The latest version of the PICS which complies with the relevant rules and regulations is / are available for download from the above website and upon request.

個人資料收集及使用

我 / 我們確認我 / 我們已閱讀、明白及同意我 / 我們的保單繕發人及 / 或退休金計劃服務提供者（即友邦（國際）有限公司（香港分行）、友邦（國際）有限公司（澳門分行）及/或友邦保險有限公司（如適用））的個人資料收集聲明（「該聲明」），該聲明可在以下網址下載<https://www.aia.com.hk/zh-hk/privacy-statement-main>。

我 / 我們聲明及同意在本申請所載或我 / 我們的保單繕發人及 / 或退休金計劃服務提供者不時以任何方法收集、獲得、編製或持有的任何個人資料及關於我 / 我們的保單、帳戶或投資的其他資料，可根據該聲明收集及使用。

我／我們知悉及同意就該聲明所述目的轉移我／我們的個人資料至香港境外／境內（如保單／退休金計劃在香港續發）或澳門境外／境內（如保單／退休金計劃在澳門續發）（視乎情況而定）予該聲明所載的資料承讓人。

該聲明的符合相關守則及法規之最新版本可於以上網址下載及可供索取。

Signature of Insured (if different from the Owner) 於 MM月/DD日/YYYY年
 受保人簽署 (倘非保單持有人)

Signature of Witness 於 MM月/DD日/YYYY年
見證人簽名

Signature of Owner 持有人簽名 on 於 MM月/DD日/YYYY年

Name of Witness (English / Chinese name in Full)

見證人名姓名：(英文 / 中文全名)

First 4 characters of HK / Macau ID Card Number of Witness

見證人之首四個位香港 / 澳門身份證號碼：XXXX

OR First 5 characters of Passport No.

或護照首五個位之號碼：

Signature of Assignee 受讓人簽署 on 於 MM月/DD日/YYYY年

Contact Phone No. of Witness

見證人之聯絡電話號碼：

"AIA" shall refer to AIA International Limited (Incorporated in Bermuda with limited liability), AIA Company Limited (Incorporated in Hong Kong with limited liability), as the case may be, depending on the issuing company of the relevant insurance policies this form / request / correspondence is subject to.

“AIA”指友邦保險(國際)有限公司(於百慕達註冊成立之有限公司)，友邦保險有限公司(於香港註冊成立之有限公司)(視情況而定)，具體取決於本表格/要求相關保單的簽發公司。