



## Payment Declaration Form – Bank draft 保費付款聲明書 – 銀行本票

This form is applicable for using bank draft to settle premium amount 此表格適用於以本票繳付：

- 1) above USD30,000 – USD150,000\*\* (applicable for Initial Premium) or 30,000美元以上 – 150,000美元\*\* (適用於首期保費) 或  
2) above USD30,000 – USD300,000\*\* (applicable for Renewal Premium) 30,000美元以上 – 300,000美元\*\* (適用於續期保費)

(A) Policy information 保單資料			
Item 編號	Policy Number 保單號碼	Payment Amount 付款金額	Policy Status# 保單狀態#
1		<input type="checkbox"/> HKD# 港幣# <input type="checkbox"/> US# 美元# <input type="checkbox"/> Other# 其他# _____	<input type="checkbox"/> Initial Premium 首期保費 <input type="checkbox"/> Renewal Premium 續期保費
2		<input type="checkbox"/> HKD# 港幣# <input type="checkbox"/> US# 美元# <input type="checkbox"/> Other# 其他# _____	<input type="checkbox"/> Initial Premium 首期保費 <input type="checkbox"/> Renewal Premium 續期保費
3		<input type="checkbox"/> HKD# 港幣# <input type="checkbox"/> US# 美元# <input type="checkbox"/> Other# 其他# _____	<input type="checkbox"/> Initial Premium 首期保費 <input type="checkbox"/> Renewal Premium 續期保費
4		<input type="checkbox"/> HKD# 港幣# <input type="checkbox"/> US# 美元# <input type="checkbox"/> Other# 其他# _____	<input type="checkbox"/> Initial Premium 首期保費 <input type="checkbox"/> Renewal Premium 續期保費
(B) Payment Information 付款資料			
(1) Bank draft No. 本票號碼：			
(2) Issuing Bank 簽發銀行：			
(3) Bank draft Amount 本票金額：		<input type="checkbox"/> HKD# 港幣# <input type="checkbox"/> US# 美元# <input type="checkbox"/> Other# 其他# _____	
(C) Personal Data Collection and Use 收集個人資料聲明			
<p>I confirm that I have read and understood the Personal Information Collection Statement of the Company (“the Statement”).            I declare and agree that the information and personal data relating to me contained in this payment or collected, obtained, compiled or held by the Company by any means from time to time may be used, maintained, processed, utilized, and stored by the Company for the purposes of (a) identity matching or verifying premium payment, source of funds and references; and / or (b) providing and arranging subsequent payment and other incidental customers' services to me, the AIA Vitality member and/or the policy owner(s); and / or (c) providing to service providers carrying out data matching procedure or any other necessary procedures for the operation of such services; and / or (d) law enforcement, investigations by police or other governmental authorities and to meet requirement imposed by laws and regulations and / or (e) satisfying and complying with any anti-money laundering and counter-terrorist financing requirements imposed by any governmental authority and/or regulator in the world; and / or (f) fulfilling those other additional uses set out in the Statement.            I understand that it is voluntary for me to provide the information in this payment, but if I refuse to do so, the Company may not be able to process the payment, application and/or provide any insurance service to the policyowner / insured.            Information and personal data contained in this payment may be transferred by the Company, insofar as necessary and to the extent permitted by laws, to:            (a) the relevant governmental authorities, regulator(s), court(s), tribunal(s), administrative board(s) and / or law enforcement bodies (both local and overseas) for the said purposes; and / or            (b) such person(s) for such legitimate purposes as contemplated in the Statement, if applicable.            The updated version of the Statement which complies with the relevant rules and regulations is available for download from the website: <a href="https://www.aia.com.hk/en/privacy-statement-main">https://www.aia.com.hk/en/privacy-statement-main</a>, and is made available upon request.            I am advised that I can at any time make a data access or correction request concerning my personal data held by the Company by writing to AIA Customer Service Centre: 12/F, AIA Tower, 183 Electric Road, North Point, Hong Kong.            “The Company” shall refer to AIA International Limited (Incorporated in Bermuda with limited liability), AIA Company Limited (Incorporated in Hong Kong with limited liability) and / or AIA Everest Life 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.            本人確認本人已閱讀及明白貴公司之個人資料收集聲明（「該聲明」）。            本人謹此聲明及同意貴公司使用、保留、處理、運用及儲存此繳費所載或貴公司不時以任何方法收集所得、編製或持有的任何有關本人的個人資料，用作(a)配對或核對有關身份、繳費、資金來源及參考記錄，及/或(b)提供及安排其後繳費服務及其他附帶客戶服務予本人、AIA Vitality健康程式會員及/或保單持有人；及/或(c)提供予服務供應商作出資料核對程序或其他適當的運作程序以實行有關服務；及/或(d)協助執行法例、警方或其他政府機構調查，以及符合法例規定；及/或(e)遵守由任何政府機構及/或世界各地監管機構所發出有關打擊洗黑錢及恐怖分子籌資活動要求；及/或(f)履行於該聲明中所述的其他用途。本人明白及願意提供此繳費上的資料，如本人拒絕提供相關資料，貴公司將可能無法替本人進行有關繳費、申請及/或提供任何保險服務予保單持有人及/或受保人。如有此需要及在法律容許的範圍內，貴公司可提供此繳費所載的資料及有關本人的個人資料予以下人士或機構：(a)為上述目的提供予有關政府或監管機構、法院、裁判處、行政委員會及/或執法機構（包括本港及海外）；及、或(b)符合該聲明用途且合法予以披露的任何人士。該聲明符合相關守則及法例的最新版本可於以下網頁下載 <a href="https://www.aia.com.hk/zh-hk/privacy-statement-main">https://www.aia.com.hk/zh-hk/privacy-statement-main</a> 或按要求索取。本人已知悉可隨時查閱及申請更改儲存於貴公司有關本人的個人資料。有關申請可以書面形式致AIA客戶服務中心（香港北角電氣道183號友邦廣場12樓）辦理。            「貴公司」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）或友邦瑪峰人壽有限公司（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。</p>			

**(D) Declaration & Signature by the Payor 付款人聲明及簽署**

I \_\_\_\_\_ hereby confirm that the above-mentioned bank draft was purchased by debiting funds from my / our account or the account of an entity owned by me / us with the bank mentioned above. All information submitted by me in this declaration form is complete and correct.

本人 \_\_\_\_\_ 謹此確認以上所列之本票乃由以上所填報之本人或由本人擁有實體的銀行賬戶中扣款購買。以下簽署人謹此聲明上述之資料乃屬正確及完整。##

\_\_\_\_\_  
\* Signature of Payor 付款人簽署

\_\_\_\_\_  
Signature date 簽署日期：

**(E) Declaration & Signature by the Sales Intermediary 保險中介人聲明及簽署**

*(If Sales Intermediary is the payor, and also the policyholder/eligible payor of the policy, then this part is not required to be completed nor signed)*  
(如保險中介人為付款人及同時為保單持有人或合資格付款人則不用填寫及簽署此部份)

I \_\_\_\_\_ hereby confirm that the above-mentioned bank draft was not purchased by debiting funds from my bank account .

本人 \_\_\_\_\_ 謹此確認以上所列之本票並非由本人之銀行賬戶扣款付款購買。

\_\_\_\_\_  
Signature 簽署

\_\_\_\_\_  
Name 姓名：

\_\_\_\_\_  
Signature date 簽署日期：

\* Payor refers to purchaser of this bank draft payment, i.e. the person or owner of an entity whose bank account was debited to purchase the bank draft.  
付款人指購買上述所列之銀行本票的人士（即由銀行賬戶中扣款購買上述銀行本票的賬戶持有人或實體之擁有人）。

\*\* Or its equivalent to other currencies. 或相等於其他貨幣的金額

\*\*\* Delete where inapplicable. 請將不適用者刪去

# Please choose where applicable. 請選取適用選項

## Notes: This declaration is based on the latest Anti-Money Laundering policy and will be changed from time to time.  
請注意：此聲明書將會因應防止洗黑錢政策之更改，而作出不定時更新。