UNIT-LINKED POLICIES



APPLICATION FORM - TOP-UP

For the individual investor (Hong Kong only) Managed Capital Account, Managed Pension Account or Managed Savings Account

投資壽險保單

額外投資申請表格

個人投資者專用(僅適用於香港) 理財資產計劃、理財退休金計劃或理財儲蓄計劃

THIS DOCUMENT WAS LAST UPDATED IN MARCH 2022.

Please confirm with your financial adviser that this is the most up-todate document for your product or servicing needs.

本表格於2022年3月作出最新更新

請向理財顧問查詢本表格是最新版本以及切合您的需要。

USING THE EDITABLE FIELDS?

To ensure your information is saved correctly, we recommend you save the form to your desktop before you start completing the required fields.

填寫PDF表格

為確保您的資料能正確儲存,我們建議您先將表格下載儲存到電腦,才開始填寫。

Important note: The product(s) named in this document and to which this document relates is accurate as at December 2021 and is subject to change. To ensure applicability with respect to a product and, if applicable, a related policy, before taking any action, please liaise with your adviser and/or contact us directly. 重要提示: 截至2021年12月止, 本文件所列的產品名稱及相關內容仍是準確, 但有機會改變。為確保本文件對相關產品及保單(如適用)的適用性, 在採取任何行動前, 請與您的理財顧問和/或直接聯絡我們

A WEALTH Of DIFFERENCE

www.utmostinternational.com

Calls may be monitored and recorded for training purposes and to avoid misunderstandings.

Utmost International Hong Kong Office: Unit 2402C, Great Eagle Centre, 23 Harbour Road, Wanchai, Hong Kong.
Tel: +852 3552 5888 Fax: +852 3552 5889. Authorised by the Insurance Authority of Hong Kong to carry on long-term business.

 $Utmost\ International\ Isle\ of\ Man\ Limited\ is\ registered\ in\ the\ Isle\ of\ Man\ under\ number\ 24916C.$

Registered Office: King Edward Bay House, King Edward Road, Onchan, Isle of Man, IM99 1NU, British Isles. Tel: +44 (0)1624 655 555 Fax: +44 (0)1624 611 715. Licensed by the Isle of Man Financial Services Authority.

Utmost Wealth Solutions is registered in the Isle of Man as a business name of Utmost International Isle of Man Limited.

為提供培訓用途及避免誤會,您與我們的對話內容可能會被監察或錄音。

香港辦事處:香港灣仔港灣道23號鷹君中心2402C室

電話:+852 3552 5888 傳真:+852 3552 5889

獲香港保險業監管局授權經營長期業務。

Utmost International Isle of Man Limited於馬恩島註冊, 註冊編號為24916C。

註冊辦事處: King Edward Bay House, King Edward Road, Onchan, Isle of Man, IM99 1NU, British Isles

電話:+44(0)1624 655 555 傳真:+44(0)1624 611 715

獲馬恩島金融服務管理局 (Isle of Man Financial Services Authority) 發出牌照。

奧摩斯財富 (Utmost Wealth Solutions) 為Utmost International Isle of Man Limited在馬恩島註冊的業務名稱。

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FI	NANCIAL ADVISER DE	TAILS 理財顧問資料			
acco	ost International punt number 斯國際編號		Address 地址		
adv Cor	ne of financial iser 理財顧問姓名 npany name 名稱		Telephone number 電話 Fax number 傳真 E-mail address 電郵地址		

奧摩斯國際僅接受與本公司已訂立業務條款的公司所轉介的業務。

We only sell our products through financial advisers as we believe it is important you receive independent financial advice. As it is you who chooses your financial adviser, you need to bear in mind that they are acting on your behalf and not on behalf of Utmost International. You are responsible for their actions or omissions.

All references to Utmost International, we, us and our in this application form mean Utmost International Isle of Man Limited.

Account/Policy means the policy or group of policies the policyholder(s) own in a Managed Capital Account, Managed Pension Account or Managed Savings Account.

本公司僅透過理財顧問銷售產品。本公司相信,獨立財務意見對您十分重要。由於理財顧問是由您自行選擇,您必須緊記,理財顧問是 您的代理,而非奧摩斯國際的代理。您需要為理財顧問的行為及疏忽負責。

本申請表格內所提及的「奧摩斯國際」、「我們」及「本公司」均指「Utmost International Isle of Man Limited」。

「戶口」/「保單」是指保單持有人擁有的理財資產計劃、理財退休金計劃或理財儲蓄計劃內的保單或一組保單。

IMPORTANT INFORMATION FOR YOU - THE POLICYHOLDER 重要資料-保單持有人須知

This application form is for individual policyholders only. If you are a trustee or corporate policyholder, you should use the alternative application form which is available from your financial adviser.

本申請表格僅供個人保單持有人使用。若您是受託人或企業保單持有人,請向理財顧問索取其他適用的申請表格。

COMPLETING THE FORM 填寫表格

To complete this form:

-) use CAPITAL LETTERS only
- y use blue or black ink
- > specify choices as appropriate
- > complete all relevant sections
- odo not use correction fluid; any amendments should be crossed out, dated and initialled by all policyholders.

Please ensure that you complete all relevant sections. We will contact you regarding any missing information which will need to be provided to us in writing, and this may delay your application.

填寫本申請表格時:

- , 僅以英文正楷填寫
- > 使用藍色或黑色原子筆
- 於適當處確定選擇
- > 填寫所有相關部分
- > 不可使用塗改液。如有任何修改,應將原字劃掉,註明日期,並由所有保單持有人簽署。

請注意·本公司必須透過郵遞或專遞接收您的申請表格·恕不接受傳真或電郵。請必須填寫所有相關部分。如有發現任何資料遺漏·本公司會聯絡您並要求以書面提供遺漏資料·過程可能會延誤您的申請。

Reason of investment			
(for example, saving			
for retirement)			
投資原因(如:退休儲蓄)			

A DETAILS OF INDIVIDUAL POLICYHOLDER(S) 個人保單持有人資料

Unless your details have changed, eg address*, you only need to complete the full forename(s) and surname of each policyholder.

除非您的資料有變,例如更改地址*,否則只需要填寫每位保單持有人的姓名全稱。

- * If your details have changed, please provide the documentary evidence in relation to proof of identity and proof of residence.
- * 如有更改, 請提供有關身份證明及居住地址證明所需文件。

	Policyholder 1 (呆單持有人1		Policyholder 2	Policyholder 2 (if any) 保單持有人2(如有)		
Title (✔) 稱銜 (✔)	Mr 先生 Other 「	Mrs 太太	Miss 小姐	Mr 先生 Other 「	Mrs 太太	Miss 小姐	
Full forename(s) 名字	其他			」 其他 □			
Surname 姓氏							
Maiden name, previous name or alias 婚前姓名、前稱或別名							
Sex (✔) 性別 (✔)	Male 男	Female	e女	Male 男	Female	e女	

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Date of birth 出生日期	d d m m y y y y	d d m m y y y y
Nationality 國籍		
Dual nationality (if applicable) 雙重國籍(如適用)		
Hong Kong identity card number/passport number* 香港身份證號碼/護照號碼*		
Residential address (currently residing) 居住地址(現時居所)		
Correspondence address (if left blank we will us the residential address for		
correspondence) 通訊地址(如果未有填寫, 我們將以居住地址作為通訊地址)		
Telephone number including area code (daytime) 電話號碼連地區號碼(日間)		
Telephone number including area code (evening)		
電話號碼連地區號碼(晚間)		
E-mail address 電郵地址		

If there are any further applicants, please photocopy this section, attach the details with this application form and tick here (\checkmark) .

如果有任何其他申請者,請複印本頁,將資料與本申請表格一同呈交,並在此加上剔號(✓)。

- ▶ If additional pages are added, each separate page must be initialled by all applicants.
- ▶ 如有附頁,每一頁均須經所有申請者簽署。
- * For applicant who is Hong Kong permanent resident, please provide the Hong Kong identity card number as a minimum requirement.
- For applicant who is not Hong Kong permanent resident, please provide the Hong Kong identity card/passport number as appropriate.
- *屬香港永久居民的申請者須至少提供香港身份證號碼。不屬香港永久居民的申請者請提供香港身份證/護照號碼。

EMPLOYMENT DETAILS 受僱資料

This section must be completed in all instances except under option 1 of section B.

Please give details of your employer or your own company if self-employed.

If you have retired or are not currently employed, please include details of your previous employer or your own company. If you have never been employed, please state N/A. Please also enter your final year's salary/income and bonus if any.

除非符合B部分第一項,本部分在任何情況下均須全部填寫。

請提供僱主資料。假若屬自僱人士,請提供自營公司資料。

假若為退休人士或現未受僱,請提供前僱主或自營公司的資料。假若從來沒有受僱,請加上「不適用」。並請提供退休前最後一年的薪金/收入及紅利(如適用)。

	Policyholder 1 保單持	有人1	Policyholder 2 (if a	ny) 保單持有人2(如有)
Employment status (✔) 受僱狀況 (✔)	Employed 受僱	Self Employed 自僱人士	Employed 受僱	Self Employed 自僱人士
	Retired 退休	Not Employed 未有受僱	Retired 退休	Not Employed 未有受僱
Occupation (including role, e.g. Director and sector, e.g. Accountancy. If you have retired please include your occupation before retirement. Please check that the occupation is not on our list of prohibited occupations as confirmed on our Source of Funds and Source of Wealth Guidelines) 職業(包括職位如董事,界別如會計。如果您已退休,請包括退休之前的職業。請查閱職業是否在我們的		小月又 偃		八月又唯
資金來源及財富來源指引Source of Funds and Source of Wealth Guidelines中列為禁止職業清單之一)				
Name of employer or your own company 僱主或自營公司名稱				
Length of time being in this occupation 受僱上述職業年期	y y y y year	rs 年 m m mon	nths 月	
Address of employer or your own company 僱主或自營公司地址				
Country 國家				
Website address of employer or your own company (if any) 僱主或自營公司網址(如適用) Last year's gross salary/income (state currency and amount)				
去年總薪金/收入(列明貨幣及金額)				
Currency (✔) 貨幣 (✔)	HK\$ 港元 GBP £ 英鎊 Other (state cur 其他(列明貨幣)	US\$ 美元 Euro € 歐元 'rency)	HK\$ 港元 GBP £ 英鎊 Other (state o 其他 (列明貨幣	
Last year's bonus (if applicable, state currency and amount) 去年紅利 (如適用,列明貨幣及金額)				· · · · · · · · · · · · · · · · · · ·
If you receive income from another source, please provide full details here (e.g. dividend, investment, rental income including their nature and source 假若您從其他渠道賺取收入,請詳細列明(例如股息、投資、租金收入等的性質及來源)				

If there are any further policyholders, please photocopy this section, attach the details with this application form and tick here (</).

如果有任何其他保單持有人,請複印本欄,將資料與本申請表格一同呈交,並在此加上剔號 (人)。

- ▶ If additional pages are added, each separate page must be initialled by all policyholders.
- ▶ 如有附頁,每一頁均須經所有保單持有人簽署。

POLITICALLY EXPOSED PERSON 政治人物

If the policyholder(s), or any other party connected to this application either now or in the past/future, could be classed as a politically exposed person (PEP), or connected with a PEP, please provide details.

假若保單持有人,或與是項申請有關的任何其他人士,在現在或過去/未來,可能被歸類為政治人物或與政治人物有關,請提供詳情。

A politically exposed person (PEP) is someone holding an important public position, or a person clearly related to them. Examples of these are:

政治人物是指擔任重要公職的人士,或者與其有明確關連的人士。例如:

- > Heads of State or Government 國家元首或政府首長
- › Judicial or military officials 司法或軍方官員
- › Senior politicians 政界高層人士
- > Senior executives of publicly owned corporations 公營機構的高級行政人員
- › Senior Government officials 政府高級官員
- > Important political officials. 重要政治官員

Policyholder 1	
保單持有人1	保單持有人2(如有)

If a client is a PEP, or is linked to a PEP, Source of Funds evidence must be provided with the application and funding must come from the applicant's bank account. Due to the increased risk of accepting business from PEPs and the specific regulatory requirements relating to them, Utmost International will require Source of Wealth information which can be provided using the Source of Wealth Questionnaire, and may also require Source of Wealth evidence.

如果客戶是政治人物或與政治人物有關,提交本申請表格時必須同時提供資金來源證明文件,而資金必須是來自申請人的銀行帳戶。由於接受政治人物業務的風險增加,以及與之相關的特定法規要求,奧摩斯國際將要求提供財富來源資料(可透過「財富來源表格(Source of Wealth Questionnaire)」提供),及財富來源的證明文件。

EXISTING CONTRACT 現有保單

Please provide details of any existing policy you have or are making payments to. (if applicable) 請提供您任何現有或正在繳款的保單詳情。(如適用)

Policyholder 1	Policyholder 2 (if any)
/	/DBB/+
	1年中行有人2(如有)

All policyholders must complete and sign the declaration in section F.

所有保單持有人必須填寫並簽署F部分的聲明。

B SOURCE OF FUNDS - BANK DETAILS OF WHERE FUNDS ARE BEING REMITTED FROM 資金來源 - 資金匯出之銀行資料

Please follow one of the two options below:

請遵照以下兩項的其中一項處理:

1. In the event that the bank details of where funds are being remitted from and activity which generated amount to be invested (Know Your Client information) relating to this additional investment **have not changed** since the last submission of Know Your Client information, please provide the date of this submission*.

假若是次額外投資的資金匯出之銀行資料及引申投資金額的活動(「客戶資料」)與最後一次提交的「客戶資料」維持不變,請提供最後一次提交日期*。

Date of	last submission**
最後一章	欠提交日期**

d	d	m	m	У	У	У	У
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2. In the event that the bank details of where funds are being remitted from and activity which generated amount to be invested relating to this additional investment **have changed** since the last submission of Know Your Client information or the time elapsed since the last submission **exceeds 24 months**, please complete section B in full.

假若是次額外投資的資金匯出之銀行資料及引申投資金額的活動有**別於**最後一次提交的「客戶資料」,或者距離最後一次提交時間已超過**24個月**,請填寫整個B部分。

- * If unchanged, Know Your Client information is valid for a period of 24 months from the point of last submission.
- ** Checks will be carried out against any previously submitted information, including ensuring that the source of funds covers any additional investment. We reserve the right to request more information or related documentary evidence as deemed necessary.
- *如「客戶資料」沒有更改,由最後一次提交時起計的有效期為24個月。
- ** 本公司會查證最後一次提交的任何資料,目的是確保資金來源涵蓋任何額外的投資。本公司保留權利,可以在認為有必要時要求更 多資料或相關證明文件。

BANK DETAILS OF WHERE FUNDS ARE BEING REMITTED FROM 資金匯出之銀行資料

If you are making multiple payments from different sources, please photocopy this section, attach the details with this application form and tick here (\checkmark)

如果供款是以多種繳付方式支付,請複印本頁,將資料與本申請表格一同呈交,並在此加上剔號(✔)。

- ▶ The contribution payment must come from an account held in the name of the policyholder(s).
- ▶ 繳付的供款必須來自保單持有人名下的帳戶。

Payment amount 金額	Payment currency 貨幣
Name of the bank accountholder(s) 銀行帳戶名稱	
Bank account number/IBAN* 銀行帳號號碼/IBAN*	
Sort code** (if applicable) 分類代號**(如適用)	
SWIFT or BIC code** (if applicable) SWIFT或BIC編號**(如適用)	
Bank name 銀行名稱	

- * IBAN stands for international bank account number and is always used in conjunction with a bank identifier code (BIC).
- ** A sort code is used in the UK in conjunction with a bank account number. A SWIFT code is used outside Europe in conjunction with a bank account number. A BIC code is used in Europe in conjunction with an IBAN
- *IBAN指國際銀行帳號,須與銀行識別碼(BIC)一併使用。
- ** 分類代號於英國是與銀行帳號一併使用。SWIFT編號於歐洲境外是與銀行帳號一併使用。BIC編號於歐洲境內是與IBAN一併使用。

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Bank address 銀行地址		
	Postcode (if applicable) 郵區編號(如適用)	Country 國家
How long have you held this account? 您持有此帳戶多長時間?	years 年 months 月	

С

SOURCE OF FUNDS - ACTIVITY WHICH GENERATED AMOUNT TO BE INVESTED 資金來源 - 引申投資金額的活動

Utmost International is required to record details of how the funds being invested have been accumulated. 奧摩斯國際需要紀錄用作投資資金是如何累積的詳細資料。

Where your funds come from more than one source, you should complete all relevant sections to give us the full picture of its origin. 若您的資金來源來自多於一項,您應該填寫所有相關部份,以便我們全面了解其來源。

Documentary evidence requirements: 需要按要求提供證明文件:

If all of the following apply: 如乎合下列全部:

- › you are resident in; and 居住於以下地區;及
- → you are funding from; and 資金來自於以下地區;及
- › your financial adviser is regulated in, 您的理財顧問受於以下地區監管

Isle of Man, Jersey, Guernsey, Hong Kong, United Kingdom, Singapore or Sweden, the threshold for requiring supporting documentary evidence is GBP 2,000,000.00 of total premiums paid to date to Utmost International.

地區包括:馬恩島、澤西島、根西島、香港、英國、新加坡或瑞典,而支付予奧摩斯國際的供款總金額超過2,000,000.00英鎊的水平,將需提供證明文件。

Where the above doesn't apply, your financial adviser will tell you if additional documentary evidence is required by referring to our Source of Funds and Source of Wealth Guidelines (the Utmost International Isle of Man Limited version).

如上述不適用,您的理財顧問將接我們的「資金來源及財富來源指引 (Source of Funds and Source of Wealth Guidelines)」 Utmost International Isle of Man Limited version版本),以告知您是否需要額外呈交證明文件。

a. Accumulated Earned income (including salary, bonus and fees) 累積已賺取收入 (包括薪金、獎金及收費)

Total amount received 收取總金額	Currency 貨幣	Amount 總額
Number of years income	years	HX
accumulated 收入累積年期	年	
Institution holding the funds 存放資金的機構		
Name of account where funds have been held 存放資金的帳戶名稱		
Account number 帳戶號碼		
Length of time funds have been in this account 存放於上述號碼的年期	years 年	months 月
Nature of business 業務性質		
Main occupation during the accumulation period 累積收入期間的主要職業		
(e.g. Director. If you have retired please include your occupation before retirement. Please check that the occupation is not on our list of prohibited documents as confirmed on our Source of Wealth and Source of Funds Guidelines (例如:董事。如果您已經退休,請包括退休之前的職業。請查閱職業是否在我們的資金來源及財富來源指引(Source of Funds and Source of Wealth Guideline)中列為禁止職業清單之一)		
Main employer's name 主要僱主名稱		
Employer's address 僱主地址		
	Postcode 郵區編號	
Average annual salary over the accumulation period 累積收入期間 的平均年度薪金	Currency 貨幣	Amount 總額
Average annual bonus over the accumulation period 累積收入期間	Currency 貨幣	Amount 總額

的平均年度獎金

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following 如按本節首部份所述需提供證明文件,您需提以下資料

Original or suitably certified copy of **one** of the following: 以下其中一項[,]正本或核實副本:

- › Last three month's payslips; **or** 最近三個月的糧單**;或**
- > Three months of account statements showing declared income being credited; **or** 最近三個月的銀行單據,顯示有關薪金的存入;或
- Detter on headed paper from employer confirming last year's annualised earned income; and, where applicable, bonus payment or 僱主以公司信箋發出的函件,確認上一個年度的年度收入及獎金(如適用);或
- Tax statement e.g. P60 for the UK, IRAS for Singapore etc.; **or** 稅務文件,如英國的P60或新加坡的IRAS;或
- > Copy of latest accounts if self-employed 最近的帳戶的副本(如屬自僱人士)

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b. Compensation 賠償

Name of organisation or individual that paid compensation 賠償機構或人士的名稱 Reason for compensation 賠償原因

Country compensation was awarded 獲取賠償的國家 Total amount received 收款總額 Date of received 收款日期

Currency Amount 貨幣 總額
d d m m y y y y

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following 如按本節首部份所述需提供證明文件,您需提以下資料

Original or suitably certified copy of **one** of the following: 以下其中一項^{*}正本或核實副本:

- Detter on company headed paper or court order from compensating body validating the information in the application form; **or**, 賠償一方以公司信箋發出的函件或法庭頒令,確認申請表上所提供的資料;或
- > Signed letter on company headed paper from solicitor/ lawyer handling the compensation validating the information in the application form 中房理時價的律師以公司信箋

由處理賠償的律師以公司信箋發 出的簽署函件,確認申請表上所提 供的資料

c. Competition win 比賽或博彩獎金

Name of competition organiser 比賽主辦機構名稱 Description of competition

比賽詳情	

Country competition was held in 進行比賽的國家 Total amount won 贏取總金額 Date of win 贏取獎金額日期

貨幣

Currency	Amount	

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following 如按本節首部份所述需提供證明文件,您需提以下資料

Original or suitably certified copy of **one** of the following: 以下其中一項[,]正本或副本:

- A signed letter from the organisation providing the proceeds of the win on letter-headed paper confirming name of winner, date of win and value of winnings; **or** 相關機構以其公司信箋發出的簽署函件,確認獲獎人名稱、贏取獎金日期及總金額;或
- › Bank statement showing deposit of winnings in clients name and referencing the organisation providing the proceeds of the win; **or** 顯示以相關機構存入款項予獲獎人的銀行單據;或
- Media coverage of the win showing name of winner, date of win and value of winnings 顯示獲獎人名稱、贏取獎金日期及 總金額的傳媒報道

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d. Gift 饋贈

Full name of person who gave the gift 饋贈人的全名 Date of birth 出生日期 **Nationality** 國籍 **Address** 地址 Relationship to applicant 與申請人的關係 Reason for gift 饋贈原因 Description of gift 饋贈詳情 Total amount received Currency Amount 收款總額 貨幣 總額 Date received 收款日期

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following 如按本節一開始所述需提供證明文件,您需提以下資料

Original or suitably certified copies of **all** of the following: 以下所有的正本或核實副本:

- A valid identification documentation for the donor (even if it is not coming from their account); **and** 饋贈人的身份證明文件(即使饋贈 並非來自其帳戶);及
- Letter from the donor explaining the reason for the gift and source of funds behind the gift; **and** 饋贈人解釋饋贈及其財富來源的 函件;及
- › Documentary evidence as to the donor's source of wealth as set out in the Source of Funds and Source of Wealth Guidelines 有關饋贈人詳列於財富來源和資金來源指引的財富來源證明文件

e. Inheritance 遺產

Deceased's full name 離世者全名

Relationship to applicant 與申請人關係

Date of death 離世日期

Details of the inheritance 有關遺產的詳情 Tell us about the assets forming the inheritance (eg. cash, property, shares etc.) 請列出組成遺產的資產(例如: 現金、物業、股票等)

Amount received 收款總額

Date received 收款日期

Solicitor/lawyer's (who dealt with the estate) name 處理遺產的律師名稱

Solicitor/lawyer's firm name 律師行名稱

Solicitor/lawyer's firm address 律師行地址

d d m m y y y y
Currency Amount 貨幣 總額
d d m m y y y y

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following 如按本節首部份所述需提供證明文件,您需提以下資料

Original or suitably certified copy of **one** of the following: 以下其中一項[,]正本或核實副本:

- Grant of probate (with a copy of the will) which must include the value of the estate; or 遺囑認證書(連同遺囑副本), 必須列明遺產價值;或
- > The will relating to the inheritance; **or** 與遺產相關的遺囑; 或
- › A signed letter from the regulated solicitor dealing with the estate on letter-headed paper confirming the information supplied in this application 由處理遺產的律師以其公司信箋發出的簽署函件,確認申請表上所提供的資料

f. Loan 貸款 Name of loan provider 貸款機構名稱 Address of loan provider 貸款機構地址			If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following 如按本節首部份所述需提供證明文件,您需提以下資料
	Postcode 郵區編號		Original or suitably certified copy of one of the following: 以下其中一項 [*] 正本或核實副本:
Total amount borrowed 貸款總額 Date of loan 貸款日期	貨幣 y	Amount 總額 y y	A signed letter from the lender on letter-headed paper confirming the name of borrower, amount of loan and date of draw-down; or, 貸款機構以其公司信箋發出的簽署函件,確認貸款人名稱、貸款總額及取款日期;或
			A loan statement confirming the details provided in this form 最近的貸款結單,確認申請表上所提供的資料
g. Maturing policy/policy 到期投資/計劃索償/輕		licy	If there are documentary
If the source of funds is the sale please complete h instead. 如果資金來源是來自出售投資而非		than maturity,	evidence requirements, as clarified at the start of this section, you are required to provide the following 如按本節首部份所述需提供證明文件,您需提以下資料
計劃供應商名稱 Address of policy provider 計劃供應商地址			Original or suitably certified copy of one of the following: 以下其中一項 [,] 正本或核實副本:
	Postcode 郵區編號		 Letter on company headed paper from previous product provider regarding notification of proceeds of claim under the
Policyholder's full name 保單持有人全名			policy; or 由前產品提供者以其公司信箋發
Length of time policy held 持有計劃的年期	years 年	months 月	出的保單索償款項通知書;或 Closing statement from previous
If the investment/policy being need to understand the Source of the investment/policy. Plea confirm this. 如所出售的投資/保單持有時間	ce of Funds immediately se complete an addition 少於 5 年 [,] 我們需了解在)	prior to the purchase nal relevant section to	product provider 由前產品提供者發出的終止戶口 結算單
金來源。請填寫額外的相關部分 Reason for policy claim or replacement policy	火ル旺心叶 月 、		
(if applicable) 計劃索償或轉保原因 (如適用)			
Total amount received 收款總額	Currency 貨幣	Amount 總額	
Surrender penalty (if applicable)			

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Date received 收款日期

h. Sale of asset portfolio or investment 出售資產組合或投資

If the source of funds is a maturing investment rather than one that you are choosing to sell, please complete g instead. 如果資金來源是來自投資到期而非您選擇進行出售投資而非,請填寫g項。

Description of asset portfolio or investment (i.e. government bonds, equities etc.) 資產組合或投資詳情 (即政府債券、股權等)	
Name of the company that held it 持有資產組合或投資	
Registered address	
of company 的機構名稱及地址	
	Postcode 郵區編號
Account name 帳戶名稱	
Length of time asset portfolio or investment held 持有資產組合或投資的年期	years 年 months 月
we need to understand the So of the portfolio/investment. Pl confirm this.	ing sold has been owned for less than 5 years, burce of Funds immediately prior to the purchase lease complete an additional relevant section to 与时間少於 5 年,我們需了解在購買該資產組合或投的相關部分以確認詳情。
Date of sale 出售日期	d d m m y y y y
Net amount received 收取淨金額	Currency Amount 编額

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following 如按本節首部份所述需提供證明文件,您需提以下資料

Original or suitably certified copy of one of the following: 以下其中一項[,]正本或核實本:

- › Legal sale document; or 法定銷售文件;或
- Copy of contract note 成交合約副本

i. Sale of interest in company 出售公司股份

律師費用等後

Company name 公司名稱	
Business sector 業務類別	
Address of company 公司地址	Postcode 郵區編號
Your connection with the company For example: owner, partner or shareholder 與公司的連繫 (例如: 擁有人、合伙人、股東等)	
Date of sale 出售日期	d d m m y y y y
Sale amount 出售總額	Currency Amount 貨幣 總額
Net amount received The amount you have received after any deductions such as fees and taxes. 淨收款總額 扣減收費、	Currency Amount 编額

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following 如按本節首部份所述需提供證明文件,您需提以下資料

Original or suitably certified copy of **one** of the following: 以下其中一項[,]正本或核實副本:

- Signed letter on company headed paper from solicitor/ lawyer validating the information confirmed in this section of the application form; **or**, 由律師以其公司信箋發出的簽署函件,證明申請表上所提供的資料;或
- > Signed letter on company headed paper from regulated accountant validating the information in this section of the application form; **or**, 由受規管會計師以其公司信箋發出的簽署函件,證明申請表上所提供的資料;或
- Copy of contract of sale and bank statement in the name of the client showing payment of the proceeds into an account in the name of the applicant; **or**, 售合約副本及以客戶名稱顯示投資款項的銀行單據;或
- of the sale (if applicable) as supporting evidence that the information is in this section of this application form 傳媒報道副本(如適用)作為輔助證明申請表上所提供的資料

APPLICATION FORM - TOP-UP

j. Sale of property 出售物業

Address of property sold

(including postcode if

(如適用包括郵區編號)

Proceeds received from

上述活動/項目產生的金額

the activity

applicable)

售出物業地址

If you are not the beneficial owner of this property, please select a different option for source of funds that is more appropriate 如您不是物業的實益擁有人,請選擇更適合的「資金來源」選項

	Postcode 郵區編號
Length of time property owned 持有物業年期	years 年 months 月
understand the Source of Fu property. Please complete a	as been owned for less than 5 years, we need to inds immediately prior to the purchase of the n additional relevant section to confirm thi 会 5 年,我們需了解在購買該物業之前的資金來源。
Date of sale 出售日期	d d m m y y y y
Total sale amount 出售總額	Currency Amount 貨幣 總額
Net amount applicant received from sale 淨收款總額	Currency Amount 貨幣 總額
k. Other 其他	
Description of the activity that generated the funds 產生財富的活動/項目詳情	
Role in relation to above activities 您於上述活動/項目的角色	
Period over which the activities occurred 上述活動/項目發生的時期 Country in which the activity occurred 上述活動/項目發生的國家	
Date received 收款日期	years 年 months 月

Currency

貨幣

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

如按本節首部份所述需提供證明文件,您需提以下資料

Original or suitably certified copy of **one** of the following: 以下其中一項,正本或核實副本:

- > Signed letter on headed paper from solicitor; or lawyer handling the sale or from regulated accountant; **or** 由負責該出售的律師或受規管會計師以其公司信箋發出的簽署函件;或
- > Signed letter on headed paper from estate agent (if applicable);
 or 由地產代理以其公司信箋發出的 簽署函件(如適用);或
- Copy of contract of sale detailing the details included in the application form 銷售合約副本顯示申請表上的資 料

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following 如按本節首部份所述需提供證明文件,您需提以下資料

Original or suitably certified copy of **one**

of the following: 以下其中一項,正本或核實副本:

- Appropriate, independent supporting documentation which validates the information provided in this section of the application form; **or**, 適當及獨立的輔助文件,以確認申請表上本部份所提供的資料;或
- › Signed letter from a person with personal knowledge of the activities described and in a position subject to anti-money laundering regulation, for example a regulated accountant or lawyer 由知悉所列產生財富的項目的人士及在符合反洗黑錢條例的情况下(如受規管會計師或律師發出的簽署函件)

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Amount

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D ADDITIONAL INVESTMENT DETAILS 額外投資詳情

REGULAR INCREMENT 定期額外供款

Please note the following minimums.

請注意,最低金額為:

Managed Capital Account 理財資產計劃

SET UP NEW REGULAR CONTRIBUTION 設立新加定期供款	INCREMENTAL REGULAR - INCREASING THE EXISTING REGULAR CONTRIBUTION 增加定期供款額一 增加現有定期供款
--	--

CURRENCY 貨幣	MONTHLY 每月	QUARTERLY 每季	MONTHLY 每月	QUARTERLY 每季
GBP 英鎊	300	900	100	300
USD 美元	450	1,350	150	450
EUR 歐元	450	1,350	150	450
HKD 港元	3,600	10,800	1,200	3,600

Managed Pension Account/Managed Savings Account 理財退休金計劃/理財儲蓄計劃

CURRENCY 貨幣	MONTHLY 每月	QUARTERLY 每季	HALF-YEARLY 每半年	YEARLY 每年
GBP 英鎊	10	30	60	100
USD 美元	15	45	90	150
EUR 歐元	15	45	90	150
HKD 港元	120	360	720	1,200

Applicable to Man	aged Capital Accour	it				
適用於理財資產計劃	ij					
Your existing police 您已選定的保單貨幣		IK\$ 巷元	US\$ 美元		£ 英鎊	€ 歐元
Please choose one	of the following opti	ons				
請選擇其中一項 (✔))					
Set up new ro 設立新加定期	egular contribution 引供款	Amount 金額	lonthly 每月		Quarterly 每季	
	mplete section E "Rec details, this will delay		tion", to indicate your inves ent.	tment	instruction. If w	ve do not receive
已填妥E部	分的「定期供款」一欄化	F為您的投資指	示。假若我們未有收取足夠資	資料,您	的投資會延誤。	
OR/或						
	regular - increasing t 化一增加現有定期供款					
	Your current amo regular contrib 您現時作出的定期	ution	Requested amount for increment 您希望增加的供款金額	=	after incre	lar contributions ment made 欢後的總供款額
Monthly 每月		+		= [
Quarterly 每季		+		_ = [
would like a new		o apply to futu	after the increase has been are regular premiums, pleas ant instruction.			
您的投資指示將 新的投資指示。	維持不變。如您希望日	後定期供款的拉	设資於不同的投資選擇,請填	妥E部	分的「改變日後的	共款」一欄作為您

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Your existing policy 您已選定的保單貨幣	currency	HK\$ 港元		US\$ 美元		£ 英鎊	€ 歐元
	regular co	nt amount of ontribution 可定期供款金額	+	Requested amount for increment 您希望增加的供款金額	=	after incr	ular contributions ement made 款後的總供款額
Monthly 每月			+ [=		
Quarterly 每季			+ [=		
Half-yearly 每半年 [
Yearly 每年							
	investment ch	oice to apply to	futuı	fter the increase has been re regular premiums, pleas nt instruction.			

LUMP SUM TOP-UP - ONE-OFF LUMP SUM CONTRIBUTION MADE ON TOP OF EXISTING REGULAR CONTRIBUTIONS

新增整付供款一定期供款以外作出單次整付供款

Please note the following minimum lump sum top-up amounts for Managed Capital Account, Managed Pension Account, Managed Savings Account:

請注意,理財資產計劃、理財退休金計劃或理財儲蓄計劃的最低整付額外供款金額為:

港元

CURRENCY 貨幣	AMO 金額	UNT		
GBP 英鎊	1,000			
USD 美元	1,500			
EUR 歐元	1,500			
HKD 港元	12,000			

▶ Please make sure you complete Section E "Lump Sum Contribution" to indicate your investment instruction. If we do not receive sufficient details, this will delay your investment.

英鎊

歐元

供款金額

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美元

▶ 請填妥E部分的「整付供款」一欄作為您的投資指示。假若我們未有收取足夠資料,您的投資會被延誤。

AUTOMATIC CONTRIBUTION INCREASE OPTION (AVAILABLE FOR MANAGED PENSION ACCOUNT/MANAGED SAVING ACCOUNT ON CREDIT CARD PAYMENTS ONLY) (OPTIONAL) 自動增加供款選擇(只適用於理財退休金計劃/理財儲蓄計劃及以信用卡付款)(選擇性)

If you would like your regular contributions to automatically increase on each account anniversary, please tick the appropriate box below: (<

假若您希望在每個保單週年自動增加定期供款,請於以下適當位置加上剔號:(✔)

5% each account year

10% each account year

每週年5%

您已選定的保單貨幣

每週年10%

▶ You should note that failure to maintain any increased regular contributions for the duration of the Account <u>will result in a Contribution Servicing Charge</u>.

▶ 請注意,假若在戶口年期內無法維持已增加的定期供款額,就需要支付供款服務費。

E INVESTMENT CHOICE 投資選擇

Please use this section to list the investment-linked funds which your contribution should be invested in. Your Managed Capital Account, Managed Pension Account or Managed Savings Account and your chosen investment-linked funds must be denominated in the same currency that you pay your contributions in. You can invest a minimum of 1% in any investment-linked funds (whole numbers only) except as set by the respecive fund managers.

請於本部分列出您的投資項目。您的理財資產計劃、理財退休金計劃或理財儲蓄計劃與您所選投資相連基金必須與您繳付供款所用的貨幣相同。除有關投資相連基金公司特別設定,您投資於任何基金的最低額為1%(只限整數)。

Please note if we do not receive sufficient details, this will delay your investment.

請注意,假若本公司未能收取足夠資料,您的投資會因而延誤。

In the absence of complete investment instructions, or if a selected investment-linked fund is not currently available, Utmost International will make efforts to obtain valid investment instructions. Failing which Utmost International will allocate part or all of the premiums to a deposit-based fund.

假若未有完整投資指示,或者所選投資相連基金現時並未能提供,奧摩斯國際會尋求可行的投資指示。假若未能取得指示,奧摩斯國際會將供款的部分或全部分配到存款基金。

- ▶ Please make sure you provide us with all the information we need to invest your contribution without delay.
- ▶ 請確保您向本公司提供所需的一切資料,以免您的投資有所延誤。

REGULAR CONTRIBUTION 定期供款

INVESTMENT- LINKED FUND NUMBER 投資相連基金號碼	INVESTMENT-LINKED FUND NAME - PLEASE ENTER NAMES IN FULL AND PREFIX THE INVESTMENT-LINKED FUND NAME WITH UTM IM. 投資相連基金名稱 - 請填寫全名及於投資相連基金名稱前加上UTM IM字首。	REGULAR CONTRIBUTION (WHOLE % NUMBERS ONLY) 定期供款 (僅限整數%)
	Total: 總計:	100 %

REDIRECTION OF FUTURE PREMIUM 改變日後供款

INVESTMENT- LINKED FUND NUMBER 投資相連基金號碼	INVESTMENT-LINKED FUND NAME - PLEASE ENTER NAMES IN FULL AND PREFIX THE INVESTMENT-LINKED FUND NAME WITH UTM IM. 投資相連基金名稱 - 請填寫全名及於投資相連基金名稱前加上UTM IM字首。	REGULAR CONTRIBUTION (WHOLE % NUMBERS ONLY) 定期供款 (僅限整數%)
	Total: 總計:	100 %

LUMP SUM CONTRIBUTION 整付供款

INVESTMENT- LINKED FUND NUMBER 投資相連基金號碼	INVESTMENT-LINKED FUND NAME - PLEASE ENTER NAMES IN FULL AND PREFIX THE INVESTMENT-LINKED FUND NAME WITH UTM IM. 投資相連基金名稱 - 請填寫全名及於投資相連基金名稱前加上UTM IM字首。	REGULAR CONTRIBUTION (WHOLE % NUMBERS ONLY) 定期供款 (僅限整數%)
	Total: 總計:	100 %

DECLARATION AND APPLICATION 整明及申請

IMPORTANT INFORMATION 重要資料

Please read the following sections carefully.

Any omission or misstatement of a material fact in this application could affect the payment of benefits under the Managed Capital Account, Managed Pension Account or Managed Savings Account. A material fact is one which is likely to influence the assessment and acceptance of the application.

If you are uncertain whether a fact is material, you should give full details so that we can assess its possible significance. If you become aware of such a fact while we are considering your application, you should notify us immediately.

You should satisfy yourself that under any taxation, exchange control or insurance law to which you may be subject that you are able to effect the proposed contract.

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請仔細閱讀以下各部分。

在此申請中遺漏或錯誤陳述任何重要事實,可能會影響理財資產計劃、理財退休金計劃或理財儲蓄計劃的利益支付。重要事實是指可能會對評估及接受此申請造成影響的事實。

假若您不確定一項事實是否重要,便應提供全部詳情,令本公司得以評估可能的重要性。假若您在本公司考慮您的申請時得知該事實,應立即通知本公司。

您應自行確定根據您受管限的任何稅務、外匯管制或保險法律,您能簽訂建議的合約。

PERSONAL DATA STATEMENT - CONSENT BY THE POLICYHOLDER / EACH POLICYHOLDER 個人資料聲明 - 保單持有人/每位保單持有人

I understand that Utmost Services Limited, Utmost International Business Services Limited, Utmost Services Ireland Limited, Utmost Administration Limited, Utmost International Isle of Man Limited, Utmost International Trustee Solutions Limited and / or Utmost PanEurope dac (Utmost International) will process personal information about me and any other party whose personal information I have provided.

The type of personal information processed about me will depend on the purpose for which it has been collected and will include:

- > my contact details
- > information to verify my identity
- information about my family, lifestyle, health and finances
- > my payment details.

The processing of my personal information may take place in a number of jurisdictions and may be shared with other parties within or outside the Utmost group of companies for the general purpose of establishing, maintaining and servicing an insurance policy. The sharing of my personal data may be used for any or all of the following purposes, to:

- > check against credit reference or other databases to verify information provided for regulatory due diligence purposes and to prevent or detect financial crime including money laundering, terrorist financing, bribery and corruption, sanctions listing or fraud;
- allow for the provision of services relating to enhanced due diligence, underwriting, reinsurance, data hosting, online services, payment or reporting of any tax or levy, or any other services provided from time to time;
- > enable an appointed financial adviser or fund adviser to assist in the provision of services to the policyholder;
- > compile statistical analysis or market research, where information is not specific to the individual;
- > comply with any legal obligation which includes the releasing of personal information to regulators, law enforcement authorities or other bodies where there is a legal requirement to do so, including the sharing of information under regulations relating to the U.S Foreign Account Tax Compliance Act and The Organisation for Economic Co-operation and Development Common Reporting Standards;
- > enable an appointed discretionary asset manager or custodian to meet their legal or regulatory requirements, where that discretionary asset manager or custodian providing services in relation to a policy requests the personal data of an individual linked to an application, and where we are satisfied that such a discretionary asset manager or custodian has a legal or regulatory requirement to make such a request.

Where my personal information is shared with a third party for the provision of services relating to my policy, my personal information will only be used for the purposes for which it was collected. In some circumstances this may involve a transfer of my personal information to a third party outside the European Economic Area (EEA). Whenever my personal information is shared it will be subject to the same levels of security and protection that Utmost International would apply.

I may ask Utmost International to:

- > provide a copy of personal information held about me and an explanation of how this data is processed;
- y update or correct my personal information;
- > delete information about me (where it is no longer necessary in relation to the purpose for which it was originally collected);
- restrict processing of my personal information where appropriate. I may also object to Utmost International processing my data but understand that this may have consequences in Utmost International being able to continue servicing my policy.

I have been made aware that a full explanation of how Utmost International collects, uses and shares my personal information can be found at www.utmostinternational.com/privacy-statements/

If I have any questions about data privacy I can address these to:

For Utmost PanEurope dac: The Data Protection Officer, Utmost PanEurope dac, Navan Business Park, Athlumney, Co Meath, C15 CCW8, Ireland.

Or email: dataprotection@utmost.ie

For Utmost International Isle of Man Limited or Utmost International Trustee Solutions Limited: The Data Protection Officer, Utmost International Isle of Man Limited, King Edward Bay House, King Edward Road, Onchan, Isle of Man, British Isles, IM99 1NU.

Or email: IOM.DPO@Utmostinternational.com

If I have a complaint about the processing of my personal information and Utmost International is unable to provide a satisfactory response I may contact the appropriate regulator:

For Utmost PanEurope dac: The Ireland Data Protection Commissioner, Canal House, Station Road, Portarlington, R32 AP23 Co. Laois, Ireland.

For Utmost International Isle of Man Limited or Utmost International Trustee Solutions Limited: The Isle of Man Information Commissioner, First Floor, Prospect Hill, Douglas, Isle of Man, British Isles, IM1 1ET.

As the Isle of Man is not part of the United Kingdom, our Appointed Representative in the United Kingdom is an establishment of Utmost Services Limited based at Saddlers House, 5th Floor, 44 Gutter Lane, London, EC2V 6BR.

I have read and understood the Data Privacy Statement set out above and will make it available to other individuals whose personal information has been provided by me to Utmost International either in this application or within accompanying documentation.

第1層

資料私隱聲明

本人了解Utmost Services Limited、Utmost International Business Services Limited、Utmost Services Ireland Limited、Utmost Administration Limited、Utmost International Isle of Man Limited、Utmost International Trustee Solutions Limited及/或Utmost PanEurope dac(Utmost International與摩斯國際)將處理有關本人及本人所提供的其他人士的個人資料。

獲處理與本人相關的個人資料類型將視乎其收集目的而定,並將包括:

- ,本人的聯絡資訊
- ,用於認證本人身份的資料
- 本人家庭、生活方式、健康與財政狀況的資料
- > 本人的付款資料。

本人的個人資料處理可能於若干司法權區進行,亦可能與Utmost奧摩斯集團公司內外的其他人士共用,以作保單建立、維持及服務的一般用途。本人的個人資料分享可能用於任何或所有以下用途,以:

- › 查證信貸資料或其他資料庫以認證所提供的資料,以作盡職審查用途,並防止或偵測金融罪案,包括洗黑錢、資助恐怖分子、貪污行 賄、制裁名單或詐騙;
- > 容許提供與加強盡職審查、核保、再保、數據託管、網上服務、支付或匯報任何稅項或徵費相關的服務,以及不時提供的任何其他服務;
- > 允許獲委任的理財顧問或基金顧問協助向保單持有人提供服務;
- >編製統計分析或市場調查,而該等資料並非特指某個別人士;
- › 遵循所有法律責任,包括向監管機構、執法機構或法例規定的其他機構提供個人資料,包括根據與美國的《海外賬戶稅收合規法案(FATCA)》及經濟合作與發展組織(OECD)與共同匯報標準(CRS)相關的法規分享資料;
- › 讓獲委任的全權委託資產管理人或託管人能遵守法律或監管規例的規定,前提為提供與保單相關服務的全權委託資產管理人或託管 人要求個別人士就一項申請提供個人資料,且吾等信納該酌情資產管理人或託管人乃遵從法律或規例規定作出有關要求。

當本人的個人資料就提供本人保單相關服務而與第三方共用時,本人的個人資料將只用於其收集用途。某些情況下,這可能涉及將本人的個人資料轉移至位於歐洲經濟區(EEA)以外的第三方。不論何時共用本人的個人資料時,奧摩斯國際(Utmost International)將應用同等的保安及保護處理。

本人可要求奧摩斯國際(Utmost International):

- > 提供所持有關於本人的個人資料副本,並說明這些資料如何處理;
-) 更新或修正本人的個人資料;
- > 刪除與本人相關的資料(對於原本收集用途而言不再屬必需資料);
- › 在適當情況下限制處理本人的個人資料。本人亦可反對奧摩斯國際(Utmost International)處理本人的資料,惟明白此舉可能對奧 摩斯國際(Utmost International)能否繼續為本人提供保單服務有所影響。

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本人已知悉奧摩斯國際(Utmost International)如何收集、使用及分享本人的個人資料的完整說明載於www.utmostinternational.com/privacy-statements/。

如有任何關於資料私隱的問題,本人可以聯絡:

Utmost PanEurope dac: The Data Protection Officer, Utmost PanEurope dac, Navan Business Park, Athlumney, Co Meath, C15 CCW8, Ireland°

或發電郵至:dataprotection@utmost.ie

Utmost International Isle of Man Limited 或 Utmost International Trustee Solutions Limited: The Data Protection Officer, Utmost International Isle of Man Limited, King Edward Bay House, King Edward Road, Onchan, Isle of Man, British Isles, IM99 1NU。

或發電郵至: IOM.DPO@Utmostinternational.com

如本人欲投訴有關處理本人個人資料之事而奧摩斯國際(Utmost International)未能提供令本人滿意的回覆,本人可聯絡以下適合的監管機構:

Utmost PanEurope dac: The Ireland Data Protection Commissioner, Canal House, Station Road, Portarlington, R32 AP23 Co. Laois, Ireland°

Utmost International Isle of Man Limited 或 Utmost International Trustee Solutions Limited: The Isle of Man Information Commissioner, First Floor, Prospect Hill, Douglas, Isle of Man, British Isles, IM1 1ET。

由於馬恩島不屬於英國,我們在英國的委任代表是 Utmost Services Limited,地址為 Saddlers House, 5th Floor, 44 Gutter Lane, London, EC2V 6BR。

本人已閱畢並了解上文所載資料私隱聲明,並會將資料私隱聲明分享予其他由本人於本項申請或隨附文件中向奧摩斯國際(Utmost International)提供其個人資料的人士。

DECLARATION - BY THE POLICYHOLDER/EACH POLICYHOLDER 聲明 — 由保單持有人/每位保單持有人作出

- 1. I request that the amount shown in Section D be invested as additional contributions for the Managed Capital Account, Managed Pension Account or Managed Savings Account currently in force bearing account number consisting of the Managed Capital Account, Managed Pension Account or Managed Savings Account number, as shown on the page 2 of the form, followed by two or more digits.
- 2. I declare to the best of my knowledge and belief, the statements made in this application, and any related documents, are true and complete and that I have not concealed any material fact. I agree to provide Utmost International with any further information in respect of the Application on request.
- 3. I confirm that Utmost International has not provided any investment advice and I am responsible for the selection of investment-linked funds (available on the Utmost International Hong Kong website www.utmostinternational.com) to be linked to the value of my Policy arising from the investment. Utmost International does not have any responsibility for the management of the underlying assets and does not recommend any investment-linked fund as a suitable investment.
- 4. I confirm that I am not a resident of the United States of America or any of its territories. If I become resident in the United States of America or any of its territories, I understand that Utmost International will not accept any further contributions until after I cease to be resident in the United States of America or any of its territories.
- 5. I confirm that in cases where the investment-linked fund(s) I have selected is not redeemable for a certain period of time, Utmost International may not be able to return that part of my payment until the end of that period. The description of the investment-linked fund(s) I have chosen will give details if this applies. I may invest immediately into non-daily dealing investment-linked funds with the understanding that in the event of cancellation or requiring early access that I:
 - a. may not get my money back immediately and payment may be delayed for some time;
 - b. the institution may impose penalties and therefore I may get back less than I invested, and/or
- 6. I appoint the financial adviser specified on page 2 of my application form to act on my behalf in accordance with the Policy Terms and Conditions. I have completed the **Financial Needs Analysis, Risk Profile Questionnaire,** and **Important Facts Statement and Applicant's Declarations.** The documents have been supplied to my financial adviser.
- 1. 本人要求顯示於D部分的金額,作為對現有的理財資產計劃、理財退休金計劃或理財儲蓄計劃的額外投資。該保單編號與在本表格第二頁顯示的號碼相同,最少為兩位或更多數字。
- 2. 本人聲明,就本人所盡知及所盡信,在這申請所作陳述以及任何相關文件均為真確完整,而本人並未隱瞞任何重要事實。因應奧摩斯國際要求,本人同意就本申請提供更多資料。
- 3. 本人確認奧摩斯國際並無提供任何投資建議,本人對,本人對與戶口價值相連的投資相連基金(於奧摩斯國際香港網站 www.utmostinternational.com 提供)的選擇負責。奧摩斯國際對於相關資產的管理並無任何責任,也沒有提議任何投資相連基金作為合適投資。

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- 4. 本人確認本人並非美國或其屬土居民。假若本人成為美國或其屬土居民,奧摩斯國際不能夠繼續接受任何供款,直至本人不再是 美國或其屬土居民為止。
- 5. 本人確認,假若本人所選擇的投資相連基金不能在一定時間內可贖回,奧摩斯國際在該段時間內或會未能套回該部分款項。假若 該情況適用,本人所選擇的投資相連基金資料會提供詳情。本人或會投資於非每日交易的投資相連基金,並明白當要求撤回投資 或提早贖回時,本人:
 - a. 或會未能立即取回款項並會受延遲;
 - b. 投資機構或會徵收罰款,本人或會取回少於投資款項的金額,及/或;
- 6. 本人現委任申請表格第二頁所列的理財顧問,代表本人根據保單條款及條件行事。本人已完成財務需要分析、風險承擔能力問 卷、及重要資料聲明書及申請人聲明書。該等文件已提供予本人的理財顧問。

Cooling-off right 冷靜期

I understand that under Isle of Man requirements, I have the right to cancel my additional investment and obtain a refund of the relevant additional premium(s) paid, less any market value adjustment. I have 30 days from the date that I receive the confirmation letter accepting the additional investment to let Utmost International know I want to cancel.

I am deemed to receive the confirmation letter accepting the additional investment within standard postal delivery timescales, which are generally expected to be seven calendar days after Utmost International has dispatched that letter.

本人明白,按馬恩島規定,本人有權取消額外投資,並取回扣除市值調整後有關的已繳額外供款。本人須於收妥接納額外投資確認文 件後30天內,通知奧摩斯國際取消該額外供款。

本人會在一般郵遞時標內被視為已收妥接納額外投資確認文件,即奧摩斯國際寄出該信函7個日歷天後。

Insurance broker commission 保險經紀佣金

I understand, acknowledge and agree that, as a result of my additional investment application, Utmost International will pay the authorised insurance broker commission during the continuance of the policy including renewals, for arranging the said policy. Where I am a body corporate, the authorised person who signs on behalf of me further confirms to Utmost International that he or she is authorised to do so.

I further understand that the above agreement is necessary for Utmost International to proceed with the application.

本人明白、確知及同意,奧摩斯國際會就本人的額外投資申請,於保單有效期內(包括續保期),向負責安排有關保單的獲授權保險經 紀支付佣金。假如本人為法人團體,代表本人簽署的獲授權人員須向奧摩斯國際確認他/她已獲法人團體授權簽署。

本人亦明白奧摩斯國際必須取得本人以上的同意,才可以處理有關申請。

This application must be completed by the policyholder(s) unless you have asked your financial adviser to complete it. 本申請必須由保單持有人填寫,除非您要求由理財顧問填寫。

Did you complete this application form yourself? (✔) 您是否親自填寫本申請表格? (✔)		Yes 是	No 否
If No, did a third party, such as your financial adviser, complete 假若為否 [,] 是否由第三方如您的理財顧問代為填寫? (✔)	it on your behalf? (🗸)	Yes 是	No 否
Please enter the country in which this application was signed. 請指明簽署本申請表時所身處的國家。			
By signing this declaration you confirm that you have read thro	ugh the above declaration in sec	rtion E 'Declaration a	ınd

g this declaration you confirm that you have read through the above declaration in section F 'Declaration and Application' and, if a third party has completed the application form on your behalf, that all the information provided in

簽署本聲明後,您即確認已細閱以上列載於F部分的「聲明及申請」中的聲明,而假若申請表格是由第三方代為填寫,提供的所有資料 均正確無誤。

	Policyholder 1 保單持有人1	Policyholder 2 (if applicable) 保單持有人1(如適用)
SIGNATURE 簽署		
Date 日期	d d m m y y y y	d d m m y y y y

Copies of the Policy Terms and Conditions and/or this completed application form are available from Utmost International on request.

「保單條款及條件」及/或經填妥的申請表格副本均可因應要求奧摩斯國際提供。

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VERIFICATION OF CUSTOMER IDENTITY - FINANCIAL ADVISER/SUITABLE CERTIFIER TO COMPLETE 客戶身份核證 — 由理財顧問/合適核證人填寫

NOTE

When certifying copies of original document, the suitable certifier must provide the following:

- a statement to the effect that "I hereby confirm that this document is a true copy of the original which I have sighted and the photograph represents a good likeness of the client"
- > his/her full name, company name and position
- > signature and the date of certification

請注意

合適核證人核證文件為正本的真實副本時,文件上需有以下資料:

- › 加上"I hereby confirm that this document is a true copy of the original which I have sighted and the photograph represents a good likeness of the client"字句。中文翻譯為「本人謹此確認此文件已核證為正本的真實副本,而該照片與客戶的真實肖像相似。」請注意,由於申請表格會交由位於馬恩島的總公司處理,因此核證字句必須以英文填寫。不便之處,敬請見諒。
- , 合適核證人全名、公司名稱及職位
- > 簽署及核證日期

PART A - FINANCIAL CRIME - RISK RATING A部分 - 金融罪案 - 風險評級

As part of the global effort to prevent financial crime, Isle of Man authorised life companies adopt a 'risk-based approach' when obtaining evidence of the source of a client's wealth. This does not question the quality of the investment. It is a safeguard that will benefit the industry as a whole and ultimately protect the client as an investor.

為防止全球金融罪案活動,馬恩島的壽險公司在收取客戶資金來源時採取「風險為本政策」。此舉不應被視為對投資的性質有所懷疑,此屬保障措施,有利於整個行業,及最終保障投資者。

In order to decide what risk rating applies to your client's investment you need to take into account the following factors:

為決定貴客戶的投資所屬的風險評級,您須考慮以下因素:

a. your client's country of residence

a. 客戶居住國家

b. which country the premium is paid from

b. 供款來源國家

(a) + (b) = total risk rating

(a) + (b) = 總風險評級

Please refer to the 'Source of funds and source of wealth guidelines' for information on how to complete the table below.

請參閱「資金來源及財富來源指引(Source of Funds and Source of Wealth quidelines)」以填寫下列資料。

POLICYHOLDER 保單持有人	CLIENT COUNTRY OF RESIDENCE (A) 客戶居住國家 (A)	COUNTRY OF PREMIUM FUNDING (B) 供款來源國家(B)	TOTAL RISK RATING 總風險評級	UTMOST INTERNATIONAL TO COMPLETE 由奧摩斯國際填寫
Example 例子	HK (1) 香港 (1)	HK (1) 香港 (1)	2	

Each application for an additional investment, will be reviewed individually.

此程序僅供指引之用。每個額外投資申請會被個別審核。

Utmost International reserves the right to request further documentation if it is felt appropriate.

奧摩斯國際保留權利,可以在認為適當的時候要求額外文件證明。

If you are unsure about a particular application, please contact our regional office.

假若您對個別申請有疑問,請與奧摩斯國際辦事處聯絡。

Parts B and C must be completed whenever new documentary evidence is submitted.

凡有新證明文件提交時均須填寫B及C部分。

Outlined on the next page are the standard minimum requirements. In some circumstances we may need additional information.

下一頁概述各項最低標準要求。在某些情況下,本公司可能需要額外資料。

We require one document from part B and one from part C. If neither document in part B is available, please provide the reason why and provide two formal documents showing appropriate personal details and verifiable reference numbers from part C.

本公司需要B部分及C部分的文件各一份。假若未能提供B部分文件,請列明理由,並從C部分提供兩份顯示適當個人資料及可核證參考編號的正式文件。

Identification documentation should be current and valid. Evidence of address should be the latest available, but no more than six months old.

身份證明文件應為現時持有並有效。地址證明應為最近期及須於最近六個月內發出。

- ▶ Please indicate the identification you have supplied for each individual party to the Managed Capital Account, Managed Pension Account or Managed Savings Account.
- ▶ 請指明各個別人士為申請理財資產計劃、理財退休金計劃或理財儲蓄計劃所提供的身份證明。

PART B - INDIVIDUAL W	HOSE IDENTITY IS	BEING VERIFIED B部分一被核實身份的個別人士
1. Name 姓名		
Capacity 身份/職位		
Type of document 文件類別	Passport 護照	National identity card* 身份證*
Document reference 文件參考編號		
2. Name 姓名		
Capacity 身份/職位		
Type of document 文件類別	Passport 護照	National identity card* 身份證*
Document reference 文件參考編號		
Reason why documents are not	provided (if applicable) 未	能提供文件的理由(如適用)

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^{*} For applicant who is Hong Kong **permanent** resident, the individual has to provide us with the Hong Kong identity card number as a minimum requirement. For applicant who is not Hong Kong permanent resident, please provide the Hong Kong identity card/passport/national identity card number as appropriate. The financial adviser/suitable certifier has to verify the relevant document accordingly.

^{*}屬香港**永久**居民的申請者須至少提供香港身份證號碼。不屬香港永久居民的申請者請提供香港身份證/護照號碼/身份證號碼。 理財顧問/合適核證人必須相應地驗證相關文件。

PART C - INDIVIDUAL WHOSE IDENTITY IS BEING VERIFIED POLICYHOLDER(S) C部分一被核實身份的個別人士 保單持有人

These must be less than six months old 此等文件須於最近六個月內發出

1 2

- 1. A recent utility, rates or council tax bill (mobile/cell phone bills not acceptable) 最近的水費單、電費單、煤氣費單或其他公用資源收費單、差餉繳費單或稅單(不接受流動電話費單)
- 2. A recent mortgage statement, giving the residential address 最近的按揭貸款單據³並註明居住地址
- 3. An extract from the official register of electors 選民登記冊摘錄
- 4. A state pension, benefit or other government produced document showing benefit entitlement 政府退休金、福利金或其他由政府發出可顯示合法利益享有權的文件
- 5. A recent tax assessment document 最近的課稅文件
- 6. A recent account statement from bank or credit card (store cards not acceptable) 最近的銀行或信用卡結算單(不接受商店購物卡)
- 7. Proof of ownership or rental of the residential address 居住地址業權或租賃證明
- 8. A landline entry in a local telephone directory 本地電話目錄載入的固網電話號碼

If there are any further policyholders, please photocopy this section, attach the details with this application form and tick here (\checkmark) .

如果有任何其他保單持有人,請複印本欄,將資料與本申請表格一同呈交,並在此加上剔號 (人)。

- ▶ If additional pages are added, each separate page must be initialled by all policyholders.
- ▶ 如有附頁,每一頁均須經所有保單持有人簽署。

Please contact us if you are unable to supply any of the above-mentioned documents.

假若您未能提供上述任何文件, 請與本公司聯絡。

H FINANCIAL ADVISER/SUITABLE CERTIFIER DECLARATION 理財顧問/合適核證人聲明

- ▶ This method of certification is required for Isle of Man regulatory purposes.
- ▶ 此核證方法為馬恩島監管當局規定。

DECLARATION BY THE FINANCIAL ADVISER/SUITABLE CERTIFIER 理財顧問/合適核證人聲明

PART 1 - WHO HAS MET THE CLIENT 第1部分 - 與客戶會面

Please complete one of the following: 請揀選以下其中一項:

I have met my client(s) in person 我已親身與我的客戶會面

I have met my client(s) face-to-face via secure live video stream 我已通過實時視頻串流與我的客戶會面

I have not met my client(s) face-to-face 我未有與客戶親身會面

PART 2 - HOW HAS THE CUSTOMER DUE DILIGENCE (CDD) BEEN OBTAINED 第2部分 - 如何進行客戶盡職調查

Please confirm which items of CDD have been provided and how they were obtained by ticking the relevant boxes: 請剔選相關項目,確認所提供的客戶盡職調查項目及如何獲取該項目:

Please note 'Obtained via a third party who has met the client face to face' also includes via live video stream. 請注意: 選項「從第三方獲得,而該第三方已親身與客戶會面」亦包括透過實時視頻串流與客戶會面

	OBTAINED BY THE ADVISER DIRECTLY FROM THE CLIENT 理財顧問 直接從客戶獲取	OBTAINED VIA A THIRD PARTY WHO HAS MET THE CLIENT FACE TO FACE 從第三方獲得,而該第三方 已親身與客戶會面	PROVIDED DIRECT TO UTMOST INT. BY THE CLIENT 由客戶直接 向奧摩斯國際提供
Valid identity document(s) 有效身份證明文件			
Valid proof of residential address 有效居住地址證明			
Source of funds 資金來源			
Source of wealth documents/information 財富來源的文件/資訊			

Where certification is required, please ensure the following is carried out on each copy document:

如上述文件需要作出核證,請確保每份文件副本上以英文提供以下核證:

I certify this document as a copy of the document that I have seen through <insert method of communication used> held on <x date> between me and the applicant /policyholder. The document has not been tampered with and I have received the same confirmation from the applicant /policyholder

中文翻譯參考:「本人謹此核證,此文件為本人與申請人/保單持有人於 <日期>以 <通訊方式> 所見的文件副本。該文件沒有被篡改,而我已經收到來自申請人/保單持有人的相同確認。」

PART 3 - THIRD PARTY DETAILS 第3部分 - 第三方詳細資料

If you have confirmed in either Part 1 that you have not met your client face to face or in Part 2 that CDD has been obtained via a third party who has met the client face to face, please provide the following details: 如果您在第1部分中確認未有與客戶會面,或在第2部分中確認客戶盡職調查是透過與客戶會面的第三方獲得,請提供以下詳細資訊:

	THIRD PARTY DETAILS 1 第三方的資料1	THIRD PARTY DETAILS 2 第三方的資料2
Name of individual(s) that obtained the CDD or met the client face to face 獲取客戶盡職調查或與客戶會面 人仕的名稱		
Date of Birth 出生日期		
Residential Address 居住地址		
Registered Company Name 註冊公司名稱		
Registered Company Address 註冊公司地址		

Where there is more than two third parties involved in obtaining CDD, please contact your Utmost International Sales Consultant for further guidance.

若涉及多於兩個第三方參與進行獲得客戶盡職調查,請聯繫奧摩斯國際的銷售顧問以獲取進一步指引。

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PART 4 - FINANCIAL ADVISER DECLARATION 第4部分 - 理財顧問聲明

I declare that: 本人聲明:

- › I have taken reasonable steps to ensure that the funding is legitimate and in line with the client's circumstances. 本人已採取合理步驟確認該筆資金合法,並與保單持有人的情況相符。
- > To the best of my knowledge, all the information provided with this form and application is true and complete and that I will provide further information if required.

就本人所盡知及所盡信,本表格及由請所有資料均為真實及完整。本人亦確認會應要求進一步提供資料。

- > I have not made any changes to the application form after the client has signed it 本人並未對保單持有人簽署後的申請表格作任何修改。
- > I have verified the contents of the original documents where copies have been enclosed and that they are true copies of the original.

本人已核證所呈交文件副本的正本內容,並確認其為正本的真實副本。

> I have conducted the **Financial Needs Analysis** and **Risk Profile Questionnaire** with the client. The relevant documents together with the **Important Facts Statement and Applicant's Declarations** are enclosed.

本人已跟保單持有人完成財務需要分析及風險承擔能力問卷,並隨附相關文件及重要資料聲明書及申請人聲明書。

By providing certification for Customer Due Diligence documents where these have been viewed and verified via secure live video stream, you confirm: 透過安全實時視頻串流,客戶盡職調查文件的證明已獲查閱及驗證,您確認:

- 1. That the client held their ID beside their face to confirm the document as a true likeness. 客戶將身份證明文件放在他們的臉旁,以確認該文件與客戶的真實肖像相似。
- 2. The other elements of the Customer Due Diligence (CDD) were held up by the clients so I could verify they were a true likeness to those in my possession. 客戶亦出示了其他客戶盡職調查(CDD)的文件,因此我可以驗證該文件與我所持有的為真實相似。
- 3. That I obtained evidence by retaining a recording of the video meeting or by taking a picture of my client with their CDD for record keeping purposes and to validate my certification. I will provide this to Utmost International upon request. 本人保留視頻會議的錄影或拍攝客戶盡職調查的照片以獲取證明文件,用作記錄保存和核實我的認證,我將按要求提供予奧摩斯國際。

I confirm that I gave advice	
concerning this investment to the applicant(s) in (name of	
country)	
本人確認曾就此投資向申請者提供	
建議,地點為(國家名稱)	
on 日期	d d m m a a a a
Regulatory body authorisation	
number (if applicable) 監管機構登記號碼 (如適用)	
Regulator name 監管機構名稱	
Utmost International financial	
adviser account number	
奧摩斯國際理財顧問編號	
	Financial adviser 理財顧問
SIGNATURE	
SIGNATURE 簽署	
簽署	
簽署 Full name of financial adviser	
簽署 Full name of financial adviser 理財顧問全名 Date	理財顧問
簽署 Full name of financial adviser 理財顧問全名 Date 日期	
簽署 Full name of financial adviser 理財顧問全名 Date 日期 Introducer firm stamp	理財顧問
簽署 Full name of financial adviser 理財顧問全名 Date 日期	理財顧問

METHODS OF PAYMENT 付款方式

- ▶ The contribution payment must come from an account held in the name of the policyholder(s).
- ▶ 繳付供款必須來自保單持有人名下的一個帳戶。

PAYMENT INSTRUCTIONS 付款指示

You may use any one of the following methods to pay contributions. Please tick the appropriate option(s) which you have chosen. (✓)

您可以透過以下方法支付供款。請於適當選項填上剔號。(1)

Regular Increment

定期供款

- ▶ Please remember to enclose with this application either a copy of receipt of your electronic bank transfer/standing order payment or credit card payment authority.
- ▶ 請切記將電匯/常行指令副本,或信用卡付款授權書與本申請表格一同呈交。

Lump sum top-up 新增整付供款

- ▶ Cheque/telegraphic transfer is accepted for lump sum contribution.
- ▶ 新增整付供款接受支票/電滙。

	MONTHLY CONTRIBUTIONS 每月供款	QUARTERLY CONTRIBUTIONS 每季供款	HALF-YEARLY CONTRIBUTIONS 每半年供款	YEARLY CONTRIBUTIONS 每年供款	LUMP SUM CONTRIBUTIONS 整付供款
Cheque 支票	N/A不適用	N/A不適用	N/A不適用	N/A不適用	
Credit Card 信用卡					N/A不適用
Standing order 常行指示					N/A不適用
Telegraphic transfer 電匯					

CHEQUE 支票

▶ Cheque is for lump sum contribution only.

▶ 支票僅適用於整付供款。

I/We, attach a cheque made payable to "Utmost International Isle of Man Limited" for the sum of	
本人/人等現附上支票·抬頭為「Útmost International Isle of Man Limited」,總額為:	
本人,人子死的上文宗,可以为 Othlost International Isle of Main Elimited, Motion,	

Please send cheque attached to this application directly to Utmost International Isle of Man Limited, Unit 2402C, Great Eagle Centre, 23 Harbour Road, Wanchai, Hong Kong.

請將支票與本申請表格一同直接呈交,寄往奧摩斯國際,地址為香港灣仔港灣道23號鷹君中心2402C室。

CREDIT	CARD	PAYMENT AUTHORITY	信用卡付款授權書

Please read the following carefully especially the important notes below and complete all sections.

請細閱以下內容及重要事項,並填寫所有部分。

Policy number 保單編號

A 1% credit card charge may apply. Please check with your credit card provider. 以信用卡付款或需支付1%服務費。請與您的信用卡發卡商查詢。

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^{*}from a US dollar account drawn from a Hong Kong bank *從一家香港銀行的美元帳戶提取

UNIT-LINKED POLICIES APPLICATION FORM - TOP-UP

I hereby authorise Utmost International (✔) 本人特此授權奧摩斯國際收取本人		•	HKS 港ź		JS\$* 美元*	£ 英鎊	€ 歐元
Contribution amount 供款金額							
Frequency of regular contribution 定期供款次數	n	Monthly 每月	Quarterly 每季	Half-y 每半 ^纪	early* F*	Yearly* 每年*	
Please collect the contribution fro 請從本人的下列帳戶收取供款 (🗸)	om my account s	tated below (✔)					
	Access	Delta	Euroca	rd	MasterCard		Visa
Regular collection date 定期收款日期	1st 第1日	7th 第7日	15th 第15日	Ī	25th 第25日		
Where the date is left blank, colle假若日期留空,收款日將於計劃成立			t subsequent	date after co	mmencemer	nt.	
Name of Policyholder 1 保單持有人1名稱			Name of Polic 保單持有人2名		any)		
Name of card holder 信用卡持有人名稱							
Address of card holder 信用卡持有人地址	must be provide 假若信用卡持有。 If the address or correspondence	er name is differer ed. 人名稱有別於計劃 n this authority for e address please p 地址有別於保單持	持有人,必須提 rm differs to th provide an exp	供第三方證F ne policyholo planation he	用文件。 der's current r	residentia	al or
Card number 信用卡編號							
Country of issue 發行國家				Expiry date 有效日期	d d m	m y	у у у
Card issuer (For example bank name) 信用卡發行機構 (例如銀行名稱)							
	Card holder 信用卡持有人				er(s) (if differ (如非信用卡		rd holder)
SIGNATURE 簽署	ния 134 <i>Л</i> /Х			NU-14 13 /2/	ДНИГИЛИ I	10/1/8/	
Date 日期	d d m m	у у у у		d d m	m y y	у у	

^{*} Only applicable to Managed Pension Account / Managed Savings Account 只適用於理財退休金計劃/理財儲蓄計劃

IMPORTANT NOTES

- 1. Please check with your credit card issuer that your credit card is authorised for international transactions.
- 2. Utmost International reserves the right to vary the service charge at any time. Should the service charge be increased, Utmost International will notify the card holder in advance.
- 3. Payment by credit card is not permitted where the credit card is American Express, jcb or Diner's Club.
- 4. This form authorises Utmost International to collect to a maximum of three months' outstanding contributions from the above credit card on the Policyholder(s) chosen collection date.
- 5. Each maximum amount to be collected by credit card is HK\$40,000, US\$5,000, £3,500 or €5,000 per contribution transaction.
- 6. If Utmost International is unable to collect contributions via the credit card, you must forward the overdue amount to Utmost International's Premium Collection Department, King Edward Bay House, King Edward Road, Onchan, Isle of Man, IM99 1NU, British Isles.
- 7. The renewal collection date will be on the date specified above, or if it is not a working day, a default date will automatically be chosen by Utmost International if no date is specified.
- 8. On your credit card statement the narrative will read UIIOM for your contribution payment.
- 9. If you are, or you become, a resident of the United States of America, then Utmost International may refuse to accept payment or continue to collect payment.

重要事項

- 1. 請向您的信用卡發行機構查詢您的信用卡是否可用作進行國際交易。
- 2. 奧摩斯國際保留隨時調整服務費的權利。假若提高服務費,奧摩斯國際會事先通知信用卡持有人。
- 3. 恕不接受美國運通卡、JCB卡或大來信用證,作付款用途。
- 4. 本申請表格授權奧摩斯國際於計劃持有人所選擇的收款日,從上述信用卡收取最多三個月的未清繳供款。
- 5. 每次從信用卡收取供款的金額上限為港元40,000、美元5,000、英鎊3,500或歐元5,000。
- 6. 假若奧摩斯國際不能通過信用卡收取供款,您必須將逾期款項送交奧摩斯國際的供款收款部 (Utmost International Premium Collection Department), King Edward Bay House, King Edward Road, Onchan, Isle of Man, IM99 1NU, British Isles。
- 7. 更新收款日將為以上指定日期,而假若該日期並非工作天而沒有指定日期,奧摩斯國際會自行選取收款日期。
- 8. 在您的信用卡單據上,您的供款項會顯示為UIIOM。
- 9. 假若您現為或者將會成為美國居民,奧摩斯國際可能會拒絕接受付款或繼續收取付款。

STANDING ORDER/ELECTRONIC BANK TRANSFER FROM HONG KONG BANK ACCOUNTS 從香港銀行帳戶發出的常行指示/電匯

- ▶ This is only for policyholder who have hong kong bank accounts with hsbc in hong kong.
- > Please note that when sending payments electronically spaces should be excluded from the account numbers.
- > Please quote policy number for all payments.
- > Please ask your bank to make necessary arrangements if there is any change to future contribution amount. Please speak to your bank in the first instance whenever in doubt.
- ▶ 僅適用於在滙豐設有銀行帳戶的保單持有人。
- › 請注意,以電子方式付款時,帳號不應留有空格。
- > 請在所有付款文件註明保單編號。
- > 如對日後供款額有任何變動,請要求銀行作出必要的安排。如有疑問,請先聯絡您的銀行。

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To: The Manager 致:經理								
Name of your bank 您的銀行名稱								
Address of your bank 您的銀行地址								
Please transfer to 請轉帳至	Queen's Road C	& Shanghai Bankin entral, Hong Kong 亍有限公司—香港總			, Hong Kon	g Main Office, 1		
for the credit of (\checkmark)		onal Isle of Man Lin		a) (/CE 1 4///E				
存入(✔)	HK dollar account number: 567-745005-003 for HK dollar payments into a HK dollar plan 港元帳號:567-745005-003 [,] 適用於以港元付款的港元計劃							
	dollar plar	account number: 60 500-505648-201,適				nents into a US		
		count number: 600 600-505648-202,適				nts into a Sterling pla	n	
		unt number: 600-50 600-505648-220,適				a Euro plan		
in currency of (✔) 貨幣為 (✔)	HK\$ 港元	US\$ 美元	£ 英鎊	€ 歐元	i			
in the sum of 金額為					ial regular d	p sum contribution contribution 胡供款金額		
on the 日期為	d d m m	у у у у		Please allow 請預留至少1		l days to set up		
followed by subsequent regular 其後定期付款額(如適用)	amount of, if app	licable						
on the same day (✔) 日期為期內同日 (✔)	Monthly 每月	Quarterly 每季	Half-y 每半年	丰	Yearly 每年			
	contribution free	the chosen payme Juency 付款次數必須與您的	·		he same as	your regular		
quoting the below policy numbe 每次註明以下保單編號,直至此指表	er until this order i	s cancelled in writii		火教 (1016)				
			Man Lim	ited		ernational Isle of		
The amount(s) of the payment(s)	togothor with any	, bank and agant b				an Limited填寫 the following accour	٠.	
付款金額連同任何銀行及代理銀行			ilik s cliaig	es will be de	sbited ITOIII	the following accoun	ıı.	
Full name(s) 全名								
Name of bank account to be debited 支付帳項銀行的帳戶名稱								
Bank account number/IBAN 銀行帳號/IBAN								
For HSBC multiple currency acco 如閣下所持的為滙豐銀行外幣戶口			e debited					
Sort code (if applicable) 分類代號(如適用)]-						
Personal address of bank								
account owners 銀行帳戶持有人個人地址							_	

	Bank account ow 銀行帳戶持有人	vner(s)				
SIGNATURE 簽署						
Date 日期	d d m m	у у у у				
STANDING ORDER/ELECOR EURO FROM ALL OT 從其他銀行帳戶發出的港元、	HER BANK AC	CCOUNTS		K DOLLAR, US DOLLAR, STERLING		
► This is for policyholders who r	make their contrik	outions via non-Ho	ng Kong l	oank accounts.		
> Please note that when sending	payments electro	nically spaces shou	ıld be excl	uded from the account numbers.		
 Please ensure that policy numb details are forwarded to Utmos 		ame and reference	s are quot	red in SWIFT field 70 to ensure that correct		
> Please quote policy number for	all payments.					
 Please ask your bank to make no your bank in the first instance w 		nent if there is any o	change to	future contribution amount. Please speak to		
▶ 適用於並非以香港銀行帳戶繳交	を供款的保單持有人	Co				
請注意,以電匯方式付款時,帳號	不應留有空格。					
,請必須在SWIFT field 70上註明例	杲單編號、保單持有	人姓名及參考編號,	以確保正確	在資料傳送至奧摩斯國際。		
› 請在所有付款文件註明保單編號·)					
> 如對日後供款額有任何變動,請要	求銀行作出必要的]安排。如有疑問,請	先聯絡您的	引銀行。		
To: The Manager 致:經理						
Name of your bank 您的銀行名稱						
Address of your bank						
您的銀行地址						
Please transfer to:	National Westminster Bank, London					
請轉帳全:	Utmost Internation	onal Isle of Man Lir	nited			
	SWIFT Code/SW	WIFT編號:NWBKG	B2LXXX			
for the credit of (✔) 存入(✔)	HK dollar a	account number/	港元帳號:	338-01-57066590		
	US dollar a	account number	美元帳號:	140-00-67505139		
	Euro accou	unt number/歐元的	帳號:550-0	01-57005028		
		ts /英鎊付款:Isle onal Isle of Man Li		ank, East Region, Douglas, Isle of Man,		
	SWIFT Code/SW	WIFT編號:RBOSIM	D2XXX			
	Sterling ac	count number/英	鎊帳號:10	0934022		
in currency of (✔) 貨幣為 (✔)	HK\$ 港元	US\$ 美元	£ 英鎊	€ 歐元		
in the sum of 金額為				Amount of one-off lump sum contribution and any initial regular contribution		
on the 日期為	d d m m	у у у у		整付供款及任何首次定期供款金額 Please allow at least 14 days to set up 請預留至少14天作安排		

UNIT-LINKED POLICIES APPLICATION FORM - TOP-UP

followed by subsequent regular 其後定期付款額(如適用)	amount of, if applicat	ole						
on the same day (✔) 日期為期內同日 (✔)	Monthly 每月	Quarterly 每季	Half-y 每半	yearly 年	Yearly 每年			
	Please note that the contribution frequer 請注意,已選擇的付款	ncy 大次數必須與您的	定期供款		e the same a	s your re	gular	
quoting the below policy number 每次註明以下保單編號,直至此指								
			Man Lin	nited	oy Utmost Info			
The amount(s) of the payment(s) 付款金額連同任何銀行及代理銀行			nk's charg	ges will be	debited fron	ո the foll	owing a	ccount.
Full name(s) 全名								
Name of bank account to be debited 支付帳項銀行的帳戶名稱								
Bank account number/IBAN 銀行帳號/IBAN								
Sort code (if applicable) 分類代號(如適用)								
Personal address of bank account owners								
銀行帳戶持有人個人地址								
	Bank account owne 銀行帳戶持有人	r(s)						
SIGNATURE 簽署								
Date 日期	d d m m y	у у у						