Extend Grace Period Claim Form 延繳保費申請書



Name of Consultant 顧問姓名	Consultant Mobile Phone 顧問流動電話號碼	No.				
Agent Code 代理編號	Division Code & Branch C 分區編號及分行地點	Office				
Part I – Claimant's Certificate (to be completed by	Life Assured / Policyowner) 第一部分 — 索償人時	申請書(由受保丿	(/保單持有人填寫)			
Policy Number 保單號碼	Name of Policyowner 保單持有人姓名					
Email Address of Policyowner 保單持有人之電郵地址 *For claim status follow up and communication use 用作跟進理赔進度及聯絡	Name of Life Assured 受保人姓名					
Policyowner Contact Phone No. 保單持有人聯絡電話	ID / Birth Cert. No. of Life 受保人之身份證 / 出生					
Residential Address 居住地址						
Name and Address of Life Assured's Employer 受保人僱主(公司)名稱及地址						
Life Assured's Present Occupation / Job Duty 受保人現職 / 職責			□ New Claim 首次索償 □ Pending Claim 待決賠償			
Benefit(s) to claim 索償類別: Unemployment Benefit 失業保障 Premium Break Cancer Benefit 延繳保費癌症	保障					
For Unemployment Benefit claim, please stat	e· 如索僧失業保障,請詳沭如下:					
	資料 (If more than one occupation, please state a	Ⅱ倘若有其他職訓	業 [,] 請詳細列出)			
1. Position 職位	2. Industry 行業	3. Job Activities	工作範圍			
4. Employer's name, address and telephone number 僱主名稱、地址及電話						
5. Was your employment full time, part-time or self-employed? 您是全職、兼職還是自僱人士? □ Full time 全職 □ Part-time 兼職 □ Self-employed 自僱						
6. Please state if the nature of the contract you were employed under was permanent, fixed term, short term or temporary. Please provide details of the contract (including number of hours employed) or copy of the contract. 請註明您是按長期合約、定期合約、短期合約或臨時合約受僱,及提供有關合約的詳情(包括受僱時數)或合約副本。						
7. How many hours per week did you work? 您每星	期工作多少小時?					
8. Please give the date when you first became aware 請註明您首次知悉即將不獲僱用的日期。	e that unemployment was imminent.	Day日	.// Month月 Year年			
	9. Have you been given any prior written notice of impending termination of employment? 您是否事先獲任何書面通知即將終止受僱? If YES, please give date of notice. 如答「是」,請註明有關通知的日期。					
□ Yes 是/////	No 否 年					
10. Have you been offered payment in lieu of notice: If YES, please state period of notice involved. 如 Yes 是//	答「是」,請註明所涉及的通知期間。	_ □ No 否				
Day日 Month月 Yea	to 至/////					

•		nent (Continued) 第一部分 - 就業資料 (續) on, please state all 倘若有其他職業,請詳細列出	H)						
11.	a) Please give the date viable.	ed professional: 如屬自僱專業工作人士: you first became aware that your business was no long 氐業務不能繼續經營的日期。	ger 						
	b) How long were you co 在失業前,您已持	ontinuously working before becoming unemployed? 寺續工作的時間有多久?							
12.	How long were you empl 您受僱於上述僱主的	oyed by the above employer? 時間有多久?	Years 年 Months 月						
13.	Was your unemploymen								
	a) Voluntary? 出於自原		□ Yes 是 □ No 否 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □						
	b) Caused by redundan		□ Yes 是 □ No 否						
14.	Please state the date em 請註明終止受僱的確	nployment actually ceased. 實日期。	// Day日 Month月 Year年						
15.	Was your employment to 您是否由於行為不當	erminated due to misconduct? '而終止受僱?	□ Yes 是 □ No 否						
16.	Have you been given any 您曾否事先被口頭或	y prior verbal or written warnings? 書面警告?	□ Yes 是 □ No 否						
17.	Are you a relative of you 您與前僱主是否具有 If YES, please state the r	r previous employer? 親屬關係? elationship. 如答 「是」,請註明有關親屬關係	□ Yes 是 □ No 否。						
Pai	rt II - Claim Required Do	ocuments 第二部分 - 理賠申請所需文件							
Che	Checklist for Documents Submission 遞交文件提點 Letter of redundancy of employment and last payroll with breakdown on Severance Payment 解僱信及最後的工資單(列明遣散補償)								
If y	ou are a self-employed pr	ofessional: 如屬自僱專業工作人士:							
	□ Letter from your accountant stating that there are no further funds coming into the business and you could not find enough work to meet all your reasonable business and living expenses 會計師的函件,註明您的業務並無注入新資金,而您的營業額亦不足以應付合理的業務及生活開支								
Ραι	rt III - To be completed	by Previous Employer 第三部分 - 由前僱主填寫		Part III - To be completed by Previous Employer 第三部分 - 由前僱主填寫					
I/w	e, being the previous emp	ployer of	confirm that the information given in Part I is in all respect true						
cor	mplete to the best of my/ou	ır knowledge and belief except	(if applicable).	e and					
本	人 / 吾等為			e and					
ΠÆ		-	確認就本人所深知及確信第一部分所載資料均屬真確無						
唯		的前僱主 [,] (如適用)除外。	確認就本人所深知及確信第一部分所載資料均屬真確無						
Sig		(如適用)除外。	確認就本人所深知及確信第一部分所載資料均屬真確無 Date 日期:						
Sig 簽	 nature and chop: 署及蓋印:	-	Date 日期: ——						
Sig 簽 Na Sé	mature and chop: 署及蓋印: me of signatory 署人姓名:	(如適用)除外。	Date						
Sig 簽 Na 簽 Na	mature and chop: 署及蓋印: me of signatory 署人姓名: me of the company 司名稱:	(如適用)除外。	Date 日期: —— Telephone no						
Sig 簽 Na Sig Na Bus	mature and chop: 署及蓋印: me of signatory 署人姓名: me of the company	(如適用)除外。	Date 日期: —— Telephone no						
Sig簽 Na 簽 Na 公 Bus業	mature and chop: 署及蓋印: me of signatory 署人姓名: me of the company 司名稱: siness address 務地址:	(如適用)除外。 Previous employer 前僱主 cer Benefit claim, please state: 如索償延繳保費級	Date 日期: Telephone no 電話號碼:						
Sig簽 Na 簽 Na 公 Bus業	mature and chop: 署及蓋印: me of signatory 署人姓名: me of the company 司名稱: siness address 務地址:	Previous employer 前僱主 cer Benefit claim, please state: 如索償延繳保費組 rd 危疾理賠記錄	Date 日期: Telephone no 電話號碼:						
Sig簽 Na 簽 Na 公 Bus業	mature and chop: 署及蓋印: me of signatory 署人姓名: me of the company 司名稱: siness address 務地址:	(如適用)除外。 Previous employer 前僱主 cer Benefit claim, please state: 如索償延繳保費級	Date 日期: Telephone no 電話號碼:						
Sig 簽 Na 簽 Na 公 Bu 業	mature and chop: 署及蓋印: me of signatory 署人姓名: me of the company 司名稱: siness address 務地址: For Premium Break Cane ajor Disease Claim Reco	(如適用)除外。 Previous employer 前僱主 cer Benefit claim, please state: 如索償延繳保費組 rd 危疾理賠記錄 o claim 申請索償之危疾名稱 m has been approved by Prudential Hong Kong Limited 保險有限公司索償理賠,請列明理賠號碼及批	Date 日期: Telephone no 電話號碼: 癌症保障,請詳述如下: I, please specify the Claim no. and Date of approval 核日期						
Sig 簽 Na 簽 Na 公 Bus業	mature and chop: 署及蓋印: me of signatory 署人姓名: me of the company 司名稱: siness address 務地址: For Premium Break Cane ajor Disease Claim Reco Name of Major Disease to If this Major Disease clair 如此危疾已透過保誠 Claim no.	(如適用)除外。 Previous employer 前僱主 cer Benefit claim, please state: 如索價延繳保費級 rd 危疾理賠記錄 o claim 申請索償之危疾名稱 m has been approved by Prudential Hong Kong Limited 保險有限公司索償理賠,請列明理賠號碼及批	Date 日期: Telephone no 電話號碼: B症保障,請詳述如下: I, please specify the Claim no. and Date of approval						



Personal Information Collection Statement 收集個人資料聲明

Prudential Hong Kong Limited (Macau Branch) (referred to as "Company", "our", "we", or "us") takes the privacy and protection of your personal information seriously. We collect personal information from you that is necessary or helpful for us to either provide you with the product or service you have requested or to comply with statutory or contractual requirements (including the purposes mentioned below), or even for security purpose. We may collect personal information including, but not limited to, full name, address, contact details, contact details history, date of birth, gender, nationality, family members, beneficiaries, identity card copy and details, travel document information, health/medical records, credit information, product history, claims history, biometric data including but not limited to your voice pattern, fingerprint and facial images, your location information based on your device, financial and medical information ("Personal Information") to provide you with the insurance or financial products or services. "Personal information" shall also include, but not be limited to, the personal information relating to your beneficiaries (or any other person designated or entitled to receive any benefits under an insurance policy), dependents, authorised representatives, company staff, and other individuals in relation to which you have provided personal information. If you provide personal information about another person to us, you confirm that you are either their parent or guardian or you have obtained that person's consent to provide such personal information for use and transfer by the Company for the purposes set out in this PICS. We may also collect Personal Information about you from third parties such as other insurance companies, agents, credit reference/reporting agencies, vendors, financial institutions, fraud prevention agencies, government agencies, medical personnel, courts or public record.

China Personal Information Protection Law (PIPL)

The PIPL Addendum supplements the Personal Information Collection Statement and applies to you if you are located in Mainland China. The PIPL Addendum is available on our website at https://www.prudential.com.hk/en/china-personal-information-protection-law

1. Purpose of Collection

We may use your Personal Information for the following purposes: (a) the administration of our products and services, including to provide any relevant services as discussed with you prior to any purchase of a product or service; (b) to process your application; (c) to administer and process insurance policies, insurance claims, medical, security and underwriting checks; (d) to process payment instructions; (e) to verify your eligibility for insurance, financial or wealth management products and services; (f) to design and provide you with insurance, financial and related products and services; (g) to communicate with you; (h) to comply with any regulatory or other legal requirements or other internal business requirements (whether imposed on us or any third parties in Section 2 below), including but not limited to anti-money laundering and Know-Your-Client obligations; (i) to investigate and settle claims and detect and prevent fraud (whether or not relating to the policy issued in respect of this application) and/or other illegal activity, or security or technical issues; (j) to carry out checks using agencies including credit reference agencies, tracing companies or publicly available information; (k) to provide customer services; (l) to perform automated decision-making or profiling; (m) to perform a policy review or needs analysis; (n) to conduct research and statistical analysis (including use of new technologies); (o) to administer lucky draws and other contests; (p) to enable us to perform our obligations to you; (q) to keep your information on record and carry out other internal business administration; (r) with your specific consent where required for direct marketing as explained in Section 3 below, personalise and tailor, customised promotions, messages and suggestions to you; and (s) any other purpose directly relating to any of the above purposes. With your consent, we may also use your personal data to send you marketing communications, as described in Section 3 below.

Some of the purposes above are necessary to allow us to perform our contractual obligations to you and to enable us to comply with applicable laws and regulation. We may also use and share your Personal Information for the purposes described above to improve our products and services. Your Personal Information will be stored either for as long as you (or your joint policyholder) are our customer, or longer if required by law or as is otherwise necessary.

2. Classes of Transferees

We may disclose your Personal Information to the group of companies including the Company and those of other entities whose ultimate parent company is Prudential plc ("companies within the Prudential Group") and their respective insurance agents, and to our financial/medical/wellness/health business partners. We may also disclose your Personal Information to the following third parties (within or outside Macau) for the purposes outlined at Section 1 above: (a) insurance agents; (b) insurance brokers; (c) re-insurance companies; (d) claims investigation companies; (e) organisations that consolidate claims and underwriting information for the insurance industry, fraud prevention organisations, other insurance companies (whether directly or through fraud prevention organisations or other persons named in this paragraph) and databases or registers (and their operators) used by the insurance industry to analyse and check information provided against existing information; (f) third party service providers who provide administrative, telecommunications, computer, information technology, data processing and storage, customer satisfaction analysis, payment, printing, redemption or other services to us to enable us to operate our business (including without limitation other insurers, lawyers, bankers, accountants, professional advisors, financial institutions and trustees, auditors, IT service and platform providers, insurance intermediaries, investment managers, agents, pension trustees (and other stakeholders), scheme advisors, introducers, and selected third party financial and insurance product providers); (g) industry associations and federations; (h) medical bill review companies; (i) your joint policy or investment holder; (j) researchers; (k) credit reference agencies; (l) debt collection agencies; (m) partnering financial institutions and partnerships; and (n) financial crime prevention agencies, any legal, regulatory, law enforcement or government bodies and the courts. We may also disclose your Personal Information to an actual or proposed assignee or participant in connection with a transaction with another company which affects the control, governance, structure and/or management of all or a substantial part of our business, or if required to satisfy applicable legal or regulatory requirements. With your consent, we may also disclose your personal data to third parties to allow them to send you marketing communications, as described below.

3. Use and Transfer of Personal Data for Direct Marketing Purposes

With your consent, we intend to use your name and contact details for promotional and marketing purpose including sending marketing communications and conducting direct marketing to you by electronic and non-electronic means including by post, in relation to the following products, services and subjects, and we require your consent in order to do so: insurance; annuities; retirement schemes; pensions; wealth and financial management; estate management; investment; financial; medical/wellness/health related products, reward/loyalty programme services and subjects ("Classes of Marketing Subjects").

We also intend to transfer your name and contact details to our insurance agents, other companies within the Prudential Group and their respective insurance agents, our Business Partners, and our Marketing Partners, to enable them to market any of the Classes of Marketing Subjects to you, and your written consent is required in order for us to do so. We may provide your personal data to such transferees for gain.

If you change your mind, and / or you would like to opt-out of receiving direct marketing, you can advise our Data Protection Officer at service-mac@prudential.com.hk or visit: 12 Andar A, FIT Center of Macau, Avenida Doutor Mario Soares, Macau

4. Consequence of failing to provide Personal Information

Unless otherwise specified by us, it is mandatory for you to provide the Personal Information requested by us. If you do not provide such Personal Information, we may not be able to provide you the product or service that you've requested.

5. Access and Correction Rights

Under the Personal Data Protection Act (the "**Ordinance**"), you have the right to request access to and correction of any Personal Information that you provide to us. If want to exercise your rights, or if you require any other information, you can advise our Data Protection Officer at service_mac@prudential.com.hk or visit: 12 Andar A, FIT Center of Macau, Avenida Doutor Mario Soares, Macau

If you move/moved to a European Union ("EU") jurisdiction, we may be required to provide you with further information, and you may have additional rights, under the EU General Data Protection Regulation. This information and these rights are set out in the Privacy Notice on our Company website.

We update our Privacy Notice from time to time. We encourage you to familiarise yourself with the Privacy Notice on our Company website. The Privacy Notice is available on our Company website at (https://www.prudential.com.hk/scws/pages/en/privacy-policy/index.html) By completing and progressing with this form, you confirm that you have read and understood this PICS.

Business Partners means our service providers who provide administrative, telecommunications, computer, information technology, data processing and storage, customer satisfaction analysis, payment, printing, redemption or other services to us to enable us to operate our business, accountants, auditors, IT service and platform providers, insurance intermediaries, reinsurers, investment managers, agents, pension trustees (and other stakeholders), scheme advisors, introducers, selected third party financial and insurance product providers, and our legal advisers.

Marketing Partners means our service providers who provide administrative, telecommunications, computer, payment, printing, third-party rewards/ loyalty/privileges programs, medical/health/wellness related products, redemption or other services to us to enable us to operate our business, insurance intermediaries, pension trustees (and other stakeholders), scheme advisors, introducers and selected third party financial and insurance product providers.



Personal Information Collection Statement (Con't) 收集個人資料聲明(續)

保誠保險有限公司(澳門分行)(簡稱「本公司」或「我們」)認真對待閣下個人資料的私隱及保護。為使我們可以向閣下提供閣下要求的產品或服務,或為遵守法定及合約要求,我們會向閣下收集必要或有幫助的個人資料,包括但不限於全名、無產品或服務,遵守法定或合同要求(以下概述的其他目的),及保安目的,我們可能會向閣下收集。為向閣下提供保險或金融產品或服務,遵行法職為資料、出生日期、性別、國籍、家庭成員、受益人、身分證副本及資料、旅遊證件資料、健康/醫療紀錄、信貸資料、過往產品紀錄、過往索價紀錄、生物辨識資料,包括但不限於閣下的聲音模式、指紋及面部圖像、基於閣下的流動或其他電子裝置收集閣下的位置資料、財務及醫療資料(「個人資料」)。「個人資料」將包括但不限於與有關以下人士的個人資料:閣下的受益人(或任何其他根據保單被指定或有權獲得任何利益的人)、收養人、授權代表、公司職員和閣下曾提供其個人資料的其他人士。如閣下向我們提供其他人士的個人資料,即表示閣下確認閣下是該人的父母或監護人或閣下已取得該人士的同意以提供個人資料供本公司按此收集個人資料轉和自的資料,即表示閣下確認閣下是該人的父母或監護人或閣下已取得該人士的同意以提供個人資料供本公司按此收集個人資料轉入資料。

《中華人民共和國個人信息保護法》 中國內地補充內容是對本個人信息收集聲明的補充,如果您在中國內地則適用此補充內容。您可在本網站 https://www.prudential.com.hk/tc/china-personal-information-protection-law/查閱中國內地補充內容。

1. 收集資料之目的 我們可能會使用閣下的個人資料作下列目的:(a) 管理我們的產品和服務,包括在購買產品或服務之前提供已與閣下討論的任何相關 我們可能會使用閣下的個人資料作下列目的:(a) 管理我們的產品和服務,包括在購買產品或服務之前提供已與閣下討論的任何相關服務;(b) 處理閣下的申請;(c) 管理和處理保單、保險索償、醫療、抵押和承保檢查;(d) 處理付款指示;(e) 核實閣下申請保險、金融或財富管理產品及服務的資格;(f) 設計及為閣下提供保險、金融及相關的產品和服務;(g) 與閣下進行通訊;(h) 遵守任何監管或其他法律規定或其他內部業務規定(不論是向我們或下述第 2 部分所列的任何第三方實施),包括但不限於打擊洗錢和認識你的客戶(KYC)義務;(i) 就索償進行調查及和解,以及偵查及防止欺詐(不論是否有關就本申請簽發的保單)及/或其他非法行為或安全/技術問題;(j) 使用代理機構(包括信貸資料服務機構)、追蹤公司或公開可得資料以執行核查;(k) 提供客戶服務;(l) 執行自動決策或資料剖析;(m) 進行保單審查或需求分析;(n) 進行研究和統計分析(包括使用新科技);(o) 進行管理幸運抽獎和其他比賽;(p) 使我們能夠履行對閣下的義務;(q) 保持閣下的資料記錄並執行其他內部業務管理;(r) 為直接市場推廣需要並在有需要時經閣下的特定同意下,如以下第 3 部分所述,為閣下量身訂製個性化的促銷、消息和建議;及 (s) 與上述任何目的直接相關的任何其他目的。經閣下同意,我們亦可能會按照以下述第 3 部分所列使用閣下的個人資料以向閣下發出知過過元。

為履行對閣下的合約責任及至使我們能夠遵守適用法律及法規,上述部分目的屬必要的。我們亦可能會為上述所列的目的使用及分享閣下的個人資料以改善我們的產品及服務。只要閣下(或閣下的聯名保單持有人)仍為我們的客戶,我們將一直保存閣下的個人資料,或如法律有所規定或因其他原因而為必要,我們則將其保存更長時間。 2. 被資料轉交者的類別 我們可能會向於原因,包括本公司以及其他母公司為英國保誠集團的實體(「保誠集團內的公司」)及他們各自的保險代理,我我們的全國人際每人保健人健康對政策的

如閣下改變主意,及/或閣下想選擇不接受直接市場推廣,可以與我們的資料保護主任聯絡(service_mac@prudential.com.hk)或者前往:澳門蘇亞利斯博士大馬路澳門財富中心 12 樓 A 座 4. 未能提供個人資料的影響 除非我們另有規定,否則閣下必須提供我們要求的個人資料。若閣下未提供有關個人資料,我們可能無法為閣下提供所要求的產品或服務。

5. 查閱和更正的權利

根據《個人資料保護法》(「**條例**」),閣下有權要求查閱及更正任何閣下提供給我們的個人資料。閣下如欲行使閣下的權利,或如閣下需要任何其他資料,請聯絡我們,閣下可以發送電郵至 service_mac@prudential.com.hk 或者前往:澳門蘇亞利斯博士大馬路澳門財富 中心 12 樓 A 座

如閣下搬遷 / 已搬遷至歐洲聯盟(「**歐盟**」)司法管轄區,我們可能需要向閣下提供進一步資料,且閣下可能在歐盟《通用數據保障 條例》下享有額外權利。此類資料及此等權利均載於本公司網站上的私隱聲明中。 如閣下搬遷/已搬遷至歐洲聯盟(「歐盟」)

我們會不時更新我們的私隱聲明,並建議閣下瀏覽本公司網站以了解該私隱聲明。該私隱聲明可在本公司網站 (https://www.prudential.com.hk/scws/pages/tc/privacy-policy/index.html)上查閱。閣下填妥並繼續提交本表格,即表示閣下確認已閱讀並理解 本收集個人資料聲明。

業務合作夥伴指我們的服務供應商、提供行政、電信、電腦、信息技術、數據處理及儲存、客戶滿意度分析、支付、印刷、贖回或其 他服務予我們,以使我們能夠經營我們業務,會計師、審計師、IT服務和平台供應商、保險中介機構、再保險承保人、投資經理、代理、 退休金受託人(和其他持分者)、計劃顧問、介紹人、核准的第三方金融和保險產品供應商以及我們的法律顧問。

營銷合作夥伴指我們的服務供應商提供行政、電信、電腦、支付、印刷、第三方獎賞 / 會員 / 優惠計劃、醫療 / 健康 / 保健相關產品、贖回或其他服務,以使我們能夠經營我們業務、保險中介、退休金受託人(和其他持分者)、計劃顧問、介紹人和核准的第三方金融和保險產品供應商。

Are you currently a customer in mainland China? 您現在是否是個中國內地客戶?						
	Yes 是					
	(If "Yes", please tick below box to agree the following statement. If you disagree with this statement, we may not be able to process your request / application. 如「是」,請勾選以下選項以同意下列聲明。如您不同意以下聲明,我們可能無法處理您的指示/申請。) □ By ticking this box, you agree that as an international group company, in order to provide insurance-related products or services, we may need to store and process your personal information outside of mainland China. Please refer to our Privacy Notice (https://www.prudential.com.hk/en/china-personal-information-protection-law/) for more information. □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □					
	No 否					



Personal Information Collection Statement (Con't)收集個人資料聲明(續)	
	erials 接受市場推廣通訊及資料 I data by the Company for direct marketing purposes in acc 三部分,使用及轉移我的個人資料作直接促銷用途	
If you do not check the opt-out box and sign purposes in accordance with Section 3 of the P 如果你不同意接收本公司的市場推廣通記	nunications and materials from the Company, please check below, you agree to the provision and use of your person ICS.	al data by the Company for direct marketing
Declaration & Authorization 聲明及授權		
I / We, the Life Assured / Policyowner / Claimant, decla	are that the above information is true and complete to the B	oest of my / our knowledge and belief.
I / We, the Life Assured / Policyowner / Claimant, he Statement.	reby confirm my / our understanding of and agreement to	the above Personal Information Collection
hospitals, clinics, insurance companies, employers, or including but not limited to sensitive data of me / us may disclose such information to Prudential Hong K proposal for assurance and claims and providing successors, assignees, executors and administrators mental incapacity). A photocopy of this consent short laboratories may perform the necessary medical clife Assured in relation to the proposal for assurance	nsent on behalf of myself / ourselves and the minor Life Asganizations and persons that have any medical history or / the minor Life Assured, whom I / we / the minor Life Assong Limited (Macau Branch) ("the Company") for the purp subsequent services. To avoid any uncertainty, this constands shall remain valid notwithstanding my / our death of the deemed to be valid as the original; (2) the Company assessment and tests to underwrite and evaluate the head and any claims arising therefrom. 青此聲明就本人 / 吾等所知所信,以上資料均為正確	records or other related information ured have attended or may hereafter attend oose of assessing and processing the nsent shall binding on my / our or incapacity (including but not limited to or any of its appointed medical examiners lith status of myself / ourselves / the minor
本人 / 吾等,受保人 / 保單持有人 / 索償人,	在此確認本人 / 吾等明白並同意上述之收集個人資	料聲明。
保險公司、僱主、機構或人士,將已經或其後 但不限於敏感資料)披露予保誠保險有限公司 之用。為免任何疑問,本授權書對本人 / 吾 無行為能力(包括但不限於精神上無行為能力	,代表本人 / 吾等及尚未成年之受保人(如有) 存錄的有關本人 / 吾等 / 尚未成年之受保人之](澳門分行)("貴公司"),作為評估及 等之繼承人、受讓人、遺囑執行人及遺產管理人均),本授權書仍具約束力。本授權書之副本將被視 ,可就此投保申請或任何有關索償申請替本人 /	醫療病歷、紀錄或其他 有關 資料(包括 處理此投保申請及索償及提供其後服務 具有約束力。即使本人 / 吾等死亡或 !為與正本具同樣效力; (2)貴公司或
his/how hobelf If Life Assured and Deliguous are no	should be signed by him/her. If Life Assured is below the out able to sign on the form, the Claimant should sign on the 人未滿 18 歲,則由保單持有人簽署。如受保人及保	-iu h - h - lf
Signature of Policyowner / Claimant 保單持有人 / 索償人簽名	Name & I.D. No. of Policyowner / Claimanet保單持有人 / 索償人姓名及身份證號碼	Date (DD / MM / YYYY) 日期 (日 / 月 / 年)
 Signature of Life Assured 吗仅人签之	Name & I.D. No. of Life Assured	

