



Product Type 保險類別：

TL 傳統人壽

UL 投資連繫式壽險

# Debit Authorization for Application/Amendment/Cancellation (Specific form) 申請 / 修改 / 取消代付款授權書 (專用表格)

Please complete and return this form to AXA China Region Insurance Company (Hong Kong) Limited  
請依次填寫並將此授權書交給安盛金融保險(香港)有限公司

To: BANK OF CHINA LIMITED MACAU BRANCH/ BANK OF CHINA (MACAU) LIMITED

I/We/Our company hereby authorize Bank of China Limited Macau Branch/Bank of China (Macau) Limited (hereinafter referred to as "the Bank") to act as per instruction(s) (marked with "✓") below:

- A. To effect transfers from my/our/our company account specified below to the account of the institution/company/school (hereinafter referred to as "the Beneficiary"), details of which specified below, such sum or sums as the Beneficiary may from time to time advise the Bank. This authorization shall remain valid until further notice.
- Application for debit authorization       Amendment of debit authorization

I/We/Our company further agree that:

- The Bank may effect transfers from my/our/our company said account such sum or sums as advised by the Beneficiary at any time with immediate effect.
- Under no circumstances shall the Bank be held responsible for any consequence(s) as a result of unsuccessful transfer of fund(s) from my/our/our company's account (including, but not limited to the situation when the balance of my/our/our company's account less than the minimum balance of the Bank so that it can't be made any transfer).
- Any variation or cancellation of this authorization has to be given by notice in writing. This authorization shall remain valid unless such notice is given to and received by the Bank. For 9 consecutive times, transfers are not effected due to no sufficient available fund in my/our/our company said account, the Bank may at its own discretion not to comply with or act further with this authorization without notice to me/us.
- Service charge of the Bank will be debited from my/our/our company said account.
- The Bank may disclose details of my/our/our company said account to any other third party if the Bank finds it necessary and appropriate.
- The Bank shall be entitled to convert the sum or sums to be transferred into the currency accepted by the Beneficiary at a rate determined by the Bank.
- If this "Debit Authorization Form" is not directly sent to your bank, I/we/our company agree to take all the legal or/and economical responsibilities caused by disclosing the details of the said form to any other third party. Under no circumstances your bank shall be responsible.

本人(等)/本公司茲授權中國銀行股份有限公司澳門分行/中國銀行(澳門)股份有限公司(以下簡稱 貴銀行)辦理以下事項(以"✓"選擇所需項目)。

- 甲項：在本人(等)/本公司於 貴銀行開立之賬戶(賬戶號碼附註如下)內支取款項，繳付下述機構/公司/學校的有關費用，直至另行通知為止。
- 申請代付款       修改代付款

本人(等)/本公司知悉及遵守下述條款辦理：

- 貴銀行接到機構/公司/學校的付款通知即可支付，款項按機構/公司/學校所提供之金額扣除。
  - 如該賬款未能自本人(等)/本公司之銀行賬戶內支付(包括但不限於因本人(等)/本公司賬戶結餘少於 貴銀行規定的最低餘額而無法支付賬款)，一切責任及後果，概與 貴銀行無涉。
  - 如有任何令授權書失效之變更，本人(等)/本公司必須書面通知 貴銀行。 貴銀行在收到書面通知前，本授權書繼續有效。但如本人(等)/本公司之銀行賬戶連續九次因賬戶可用餘額不足而未能支付賬款，則 貴銀行可有權不經通知而撤銷此項授權。
  - 貴銀行有權徵收服務費用，並可由本人(等)/本公司之銀行賬戶內支付。
  - 銀行認為必要和適當時，不必通知或取得本人(等)/本公司同意有權將有關的賬戶資料披露給其他機構。
  - 本人(等)/本公司授權 貴銀行可根據自動扣賬當天 貴銀行所指定的匯率將轉賬款項兌換成受益人指定之收款貨幣。
  - 本人(等)/本公司同意如由於本授權書並非直接授予 貴銀行以致本授權書上所載之資料披露予第三者知悉，由此引起之任何法律或其他經濟責任由本人(等)/本公司承擔概與 貴銀行無涉。
- B. Notice is hereby given to the Bank to cancel my/our/our company debit authorization to effect transfers from my/our/our company's account specified below to the account of the institution/company/school, details of which specified below, with immediate effect.

- 乙項：本人(等)/本公司正式通知 貴銀行由即日起取消前辦之代付款授權。

<p>Name of Party to be credited (The Beneficiary) 收款之一方(受益人)  <b>AXA China Region Insurance Company (Hong Kong) Limited</b>          安盛金融保險(香港)有限公司</p>	<p>Account No. to be credited          收款賬戶之號碼  <b>01-112-387203-0 (HKD 港元)</b></p>
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Company Code 公司編號: 000988 Business Type 業務種類: 300 Business No. 業務編號: 001

\*GHK2BOCDDA\*

MLUW060-2511

**Debit Authorization for Application/Amendment/Cancellation (Specific form)**

申請 / 修改 / 取消代付款授權書 (專用表格)

Please complete all the details shown below. 請填寫下列各項

**Personal bank account details 個人銀行帳戶資料**

Name of bank and Branch 銀行及分行之名稱

**Bank of China Limited Macau Branch** 中國銀行股份有限公司澳門分行 /  
**Bank of China (Macau) Limited** 中國銀行 (澳門) 股份有限公司

Name(s) of Bank Account Holder(s)\*

銀行賬戶持有人姓名

Bank Account No  
銀行賬戶號碼

ID No. of Bank Account Holder(s)

銀行賬戶持有人身份證號碼

Bank Account Currency 銀行賬戶貨幣:

 HKD 港元  MOP 澳門元  other 其他

Signature(s) of Bank Account Holder(s)

銀行賬戶持有人簽名 #

Date

日期

**Policy information 保單資料**

Policy Number 保單編號	Policy Insured's Name 保單被保人姓名	Policy Owner's Name 保單持有人姓名	*Relationship 關係

Agent's Name 營業員姓名		Witness 見證人簽署
Agent's Code 營業員編號		
Unit Name 組別名稱		
Unit Code 組別編號		

For Bank Use Only 銀行專用		
主管	覆核	經辦

 上述申請已由系統自動取銷, 取銷日期: \_\_\_\_\_ 上述申請已由客戶要求取銷, 取銷表格附後。取銷日期: \_\_\_\_\_**AXA China Region Insurance Company (Hong Kong) Limited's  
Personal Information Collection Statement  
安盛金融保險 (香港) 有限公司的收集個人資料聲明**

AXA China Region Insurance Company (Hong Kong) Limited (referred to hereinafter as the "Company") recognises its responsibilities in relation to the collection, holding, processing, use and/or transfer of personal data under the Regulations in relation to Personal Data Protection. Personal data will be collected only for lawful and relevant purposes and all practicable steps will be taken to ensure that personal data held by the Company is accurate. The Company will take all practicable steps to ensure security of the personal data and to avoid unauthorised or accidental access, erasure or other use.

Please note that if you do not provide us with your personal data, we may not be able to provide the information, products or services you need or process your request.

**Purpose:** From time to time it is necessary for the Company to collect your personal data which may be used, stored, processed, transferred, disclosed or shared by us for purposes ("Purposes"), including:

1, processing and evaluating any applications or requests made by you for products/services offered by the Company and our affiliates;

**#Note 附註:**

Please ensure that you sign the form in the usual way you would sign your Bank Account. 請確定 貴戶在此授權書內之簽名, 與銀行賬戶所簽者完全相同。

**\*Note 附註:**

Policy Owner and Bank Account Holder must be the same person. 保單持有人與銀行戶口持有人必需為同一人。

**\*Note 附註:**

Relationship between Policy Owner/ Policy Insured and Bank account holder must be direct family member.

保單被保人 / 保單持有人與銀行戶口持有人之關係必需為直系親屬

**Purpose**

- Term Conversion
- Change Currency
- New Business
- Change Pay Mode
- Change Banker/Bank A/C

## Debit Authorization for Application/Amendment/Cancellation (Specific form)

申請 / 修改 / 取消代付款授權書 (專用表格)

2. providing subsequent services to you, including but not limited to administering the policies issued;
3. any purposes in connection with any claims made by or against or otherwise involving you in respect of any products/services provided by the Company and/or our affiliates, including investigation of claims;
4. evaluating your financial needs;
5. designing products/services for customers;
6. conducting market research for statistical or other purposes;
7. matching any data held which relates to you from time to time for any of the purposes listed herein;
8. making disclosure as required by any applicable law, rules, regulations, codes of practice or guidelines or to assist in law enforcement purposes, investigations by police or other government or regulatory authorities in Macau or elsewhere;
9. conducting identity and/or credit checks and/or debt collection;
10. complying with the laws of any applicable jurisdiction;
11. carrying out other services in connection with the operation of the Company's business; and
12. other purposes directly relating to any of the above.

**Transfer of personal data:** Personal data will be kept confidential but, subject to the provisions of any applicable law, may be provided to:

1. any of our affiliates, any person associated with the Company, any reinsurance company, claims investigation company, your broker, industry association or federation, fund management company or financial institution in Macau or elsewhere and in this regard you consent to the transfer of your data outside of Macau;
2. any person (including private investigators) in connection with any claims made by or against or otherwise involving you in respect of any products/services provided by the Company and/or our affiliates;
3. any agent, contractor or third party who provides administrative, technology or other services (including direct marketing services) to the Company and/or our affiliates in Macau or elsewhere and who has a duty of confidentiality to the same;
4. credit reference agencies or, in the event of default, debt collection agencies;
5. any actual or proposed assignee, transferee, participant or sub-participant of our rights or business; and
6. any government department or other appropriate governmental or regulatory authority in Macau or elsewhere.

Transfer of your personal data will only be made for one or more of the Purposes specified above.

**Access and correction of personal data:** Under the Regulations in relation to Personal Data Protection, you have the right to ascertain whether the Company holds your personal data, to obtain a copy of the data, and to correct any data that is inaccurate. You may also request the Company to inform you of the type of personal data held by it.

Requests for access and correction or for information regarding policies and practices and kinds of data held by the Company should be addressed in writing to:

Data Privacy Officer  
AXA China Region Insurance Company (Hong Kong) Limited  
Avenida do Infante D, Henrique,  
No.43-53A, 20 Andar, The Macau Square, Macau

A reasonable fee may be charged to offset the Company's administrative and actual costs incurred in complying with your data access requests.

安盛金融保險(香港)有限公司(下稱“**本公司**”)明白其就個人資料保護相關法例收集、持有、處理、使用和/或轉移個人資料所負有的責任。本公司僅將為合法和相關的目的收集個人資料,並將採取一切切實可行的步驟,確保本公司所持個人資料的準確性。本公司將採取一切切實可行的步驟,確保個人資料的安全性,及避免發生未經授權或者因意外而擅自取得、刪除或另行使用個人資料的情況。

敬請注意,如果閣下不向本公司提供閣下的個人資料,我們可能無法提供閣下所需的資料、產品或服務,或無法處理閣下的要求。

**目的:**本公司不時有必要收集閣下的個人資料,並可能因下列各項目的(“**有關目的**”)而供本公司使用、存儲、處理、轉移、披露或共享該等個人資料:

1. 處理和評估閣下就本公司及安盛關聯方所提供之產品/服務提出的任何申請或要求;
2. 向閣下提供後續服務,包括但不限於執行/管理已發出的保單;
3. 與就本公司和/或安盛關聯方提供的任何產品/服務而由閣下或針對閣下提出的或者其他涉及閣下的任何索賠相關的任何目的,包括索賠調查;
4. 評估閣下的財務需求;
5. 為客戶設計產品/服務;
6. 為統計或其他目的進行市場研究;
7. 不時就本條款所列的任何目的核對所持有的與閣下有關的任何資料;
8. 作出任何適用法律、規則、規例、實務守則或指引所要求的披露或協助在澳門或澳門以外其他地方的警方或其他政府或監管機構執法及進行調查;
9. 進行身份和/或信用核查和/或債務追收;
10. 遵守任何適用的司法管轄區的法律;
11. 開展與本公司業務經營有關的其他服務;及
12. 與上述任何目的直接有關的其他目的。

**個人資料的轉移:**個人資料將予以保密,但在遵守任何適用法律條文的前提下,可提供給:

1. 位於澳門或澳門以外其他地方的任何安盛關聯方、本公司的任何相關聯人士、任何再保險公司、索賠調查公司、閣下之保險經紀、行業協會或聯會、基金管理公司或金融機構,以及就此方面而言,閣下同意將閣下的資料轉移至澳門境外;
2. 與就本公司和/或安盛關聯方提供的任何產品/服務而由閣下或針對閣下提出的或者其他涉及閣下的任何索賠相關的任何人士(包括私家偵探);
3. 在澳門或澳門以外其他地方向本公司和/或安盛關聯方提供行政、技術或其他服務(包括直接促銷服務)並對個人資料負有保密義務的任何代理、承包商或第三方;
4. 信貸資料機構或(在出現拖欠還款的情況下)追討欠款公司;
5. 本公司權利或業務的任何實際或建議的承讓入、受讓方、參與者或次參與者;及
6. 在澳門或澳門以外其他地方的任何政府部門或其他適當的政府或監管機關。

閣下的個人資料將僅為上文中規定的一個或多個有關目的而被轉移。

**個人資料的查閱和更正:**根據個人資料保護相關法例,閣下有權查明本公司是否持有閣下的個人資料,獲取該資料的副本,以及更正任何不準確的資料。閣下還可以要求本公司告知閣下本公司所持個人資料的種類。

查閱和更正的要求,或有關獲取政策、常規及本公司所持的資料種類的資料,均應以書面形式發送至:

澳門殷皇子大馬路43-53A號澳門廣場20字樓  
安盛金融保險(香港)有限公司  
個人資料保護主任

本公司可能會向閣下收取合理的費用,以抵銷本公司為執行閣下的資料查閱要求而引致的行政和實際費用