APPLICATION FOR PAYOUT DISTRIBUTION INVESTMENT CHOICE Manulife 宏利 (FOR DESIGNATED INVESTMENT-LINKED

ASSURANCE SCHEME ONLY)

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士人派必机多架话	ф	<u>-</u> ±=±
支付派發投資選項	甲	萌衣
(只適用於指定投資相連	壽	險計劃)

Policy Number 保單號碼	
Branch code 分行編號	Location 地點 <u>MACAO</u>
Advisor code 保險顧問編號	
Advisor's name	
保險顧問姓名	
Contact no. 聯絡電話	

Full Name of Policyowner(s): 保單持有人姓名

Important Notes 重要事項:

To comply with the industry guidelines, please attach copy of policyowner's valid ID card/Passport. For business entity, please also attach copies of Business Registration Certificate and other relevant identification documents. Please state the policy number(s) on the attached copies.

為遵守保險業務守則,請附上保單持有人之有效的身份證 / 護照副本;商業實體則另須附上商業登記證及其他有關身份證明文件副本。請於該副本上註 明保單編號。

- In this Form, "Manulife" or "the Company" shall mean Manulife (International) Limited (incorporated in Bermuda with limited liability). 於此表格內,「宏利」或「本公司」是指宏利人壽保險(國際)有限公司(於百慕達註冊成立之有限責任公司)。
- Please complete this form in English BLOCK letters legibly with policyowner's signature that corresponds with the company record. Any amendments should be clearly indicated and countersigned by the policyowner.
 - 請用英文正楷清楚地填寫此表格,並由保單持有人簽署,而簽名必須與本公司檔案相符。任何資料如有更改,保單持有人必須清楚註明並在更改的 位置簽署作實。
- All dollar amounts are stated in the policy currency unless otherwise stated.

除特別指明外,所有金額之幣值皆為保單幣值。

- If payouts to the account are made in HKD/MOP, the prevailing currency exchange rate is determined by the Company which may change from time to time.
 - 若支付到帳戶的金額以港元或澳門元支付,則屆時之貨幣匯率將由本公司釐定並可不時作出修訂。
- All bank charges and cost of currency conversion into HKD/MOP may be deducted from the dividend to be received by the policyowner and the resulting net HKD/MOP amount will be paid as the payout amount to the policyowner concerned.
- 由兌換港元或澳門元引起之一切銀行費用及兌換成本可從保單持有人將收取的股息中扣除,而有關之港元或澳門元淨餘額則會支付予保單持有人。
- For the use of USD or HKD account as the receiving account, please note that the receiving banks may impose additional charges and/or fees, and such charges and/or fees may be deducted from the payout amount to be paid to the policyowner.
 - 對於使用美元或港元戶口收取任何支付金額,收款銀行可能會在支付保單持有人的支付金額款項中扣除相關服務收費及 / 或費用。
- Manulife shall have the right to update this form from time to time and to accept or reject the form submitted by you if you fail to fulfill the company's requirements.
 - 宏利有權隨時更新表格內容,如閣下未能符合本公司的有關規定,宏利將保留接受或拒絕閣下遞交之申請表格的權利。
- Please read the Manulife Personal Information Collection Statement ("Statement") before you complete this company's form. The Statement is available on Manulife's website (www.manulife.com.hk) or upon request from your Manulife Advisor. By completing and returning to Manulife the form, you are agreeing to the Statement.

-営閣下填寫此表格前,請閱畢 <宏利個人資料收集聲明>(「該聲明」)。該聲明可於宏利網址(www.manulife.com.hk)或向閣下的宏利顧問索取。透過填 努及な回此表格,即表示閣下同章該聲明之內容。

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ſ	Section A: Payout Instruction 第一項:支付金額派發指示								
Ī	This application form is applicable for the Payout Distribution Investment Choice(s) only. Please put a "✓" in the appropriate box. 此申請表只適用於支付派發投資選項。請於適當方格內填上「✓」號。								
l	Bank Account Information 銀行帳戶資料								
l	Please provide account information proof* 請提供帳戶資料證明*								
l	,,,,,,,								
l	1. Name of Ac	count Holder 帳戶持有人姓名	含:						
İ	2.Bank Name	銀行名稱							
	□901 Bai	nk of China (Macau) Limited 國銀行 (澳門)	1 902	Tai Fung Bank Limited 大豐銀行	□903	OCBC Bank (Macau) Limited 華僑銀行(澳門)			
	□ 904 Lin	so International Banking nited 門國際銀行	□905	Banco Nacional Ultramarino, S.A. 大西洋銀行	□906	Industrial and Commercial Bank of China (Macau) Limited 中國工商銀行 (澳門)			
		nco Comercial de Macau, S.A. 門商業銀行	□916	The Macau Chinese Bank Ltd. 澳門華人銀行	9 17	China Guangfa Bank Co., Ltd. Macau Branch 廣發銀行(澳門分行)			
ſ	3.My/Our Account Currency and Number 本人 / 吾等之帳戶幣值和號碼								
	My/Our Account Currency and Number to receive payout amount 本人 / 吾等用作收取支付金額之帳戶幣值和號碼								
l	HKD 港	表元 MOP 澳門元 U	JSD美元	5					
	and will be pas	ssed to the designated bank for the 包括列有帳戶持有人之姓名及帳戶	purpose	of depositing the money withdrawn from t	the policy	unt number. Account information is collected to the Policyowner's account. 8交予委任銀行作為收取由保單持有人保單			

🖂 Please return the completed form with the required documents to Macao Administration Office, Avenida De Almeida Ribeiro No.61, Circle Square, 14 ander a, Macao. 請將填妥的表格及所需文件寄回澳門分行行政部,澳門新馬路61號永光廣場十四樓A。



Remarks 註釋

- Payout Distribution Investment Choice is only applicable to Manulife Investment Solutions, Manulife Investment Plus. 支付派發投資選項只適用於宏利智富錦囊、宏利投資計劃。
- Payout amount will be paid to the policyowner as default. If the policyowner transfers the ownership of the policy to a new policyowner, the payout amount will be paid to the new policyowner.
- 保單持有人為指定收取支付金額者。倘若保單持有人將其保單之擁有權轉移至新的保單持有人,所派發之支付金額將派發予新的保單持有人。
- If the payout amount fails to be deposited into the designated bank account, the payout instruction will be cancelled and that payout amount will be paid in HKD cheque which will be delivered to you by your insurance advisor.
 - 如支付金額未能成功存入您指定的帳內,該支付金額派發指示將會被取消,及是次之支付金額亦會以港元支票派發,並透過您的保險顧問遞送予您。
- The designated bank account must be held by the policyowner.
- 指定之銀行帳戶持有人必須為保單持有人。
- The above Payout Instruction is only applicable to policyowner's personal bank account, except joint account. If the policy is jointly owned by more than one policyowners, the payout amount will be paid in HKD cheque which will be delivered to you by your insurance advisor. 以上支付金額派發指示只適用於保單持有人之個人銀行帳戶,不包括聯名戶口。如保單由多於一名保單持有人聯名持有,是次之支付金額會以港元支票派發,並透過您的保險顧問遞送予您。
- The above instruction will **replace any existing bank account record/setup for receiving payment** including regular withdrawals, payment refund and payout distribution investment choice(s) (if any).

 Please download the our e-Statement/e-No 	Notice for Distribution of "F tice Service and direct cred	Payout Distribution Investit service for policy payn	(的帳戶,返款及文竹派發投負選場 stment Choice" through our websit nent. 宏利網站www.manulife.com.hk 下i	e www.manulife.com.hk if you have opted for
	rs (please specify de			
	(produce opening an			
Section C: Decla	aration and Authori	zation 第三項:聲	明及授權	
immediately in writin mentioned in this forr the person(s) who has petition made against (乙) 本表格所提及任 益權益的人士有所更i	g of any change in (a) my m; and (c) the other informa s/have any legal or benefici me/us. 本人/吾等謹此聲明 何人士的個人資料及(丙) 改),如有任何變動本人/	y/our personal informat ation provided by me/us ial interest in the policy 月以上資料均為確實無訛 本人 / 吾等於本表格或 吾等將即時以書面通知短	ion provided on this form; (b) the in this form or any other documed directly or indirectly and (2) I/we (立	l agree that (1) I/we agree to inform Manulife personal particulars of any of the persons nt, including but not limited to any change of declare that I/we do not have any bankruptcy 【同意(甲)本人/吾等於本表格的個人資料、不限於直接或間接於保單擁有任何法定或實等現時並沒有破產。
Signed on this	Day 日	day of	Month 月	- 1
│ 競者日期 · │ │	Day 🖯		Montn 月	Year 年
X Signature(s) of irrevoc	cable beneficiary(ies)(if appl	licable)	X Signature of collateral assi	gnee (if applicable)
不可更改之受益人簽	署(如適用)	,	附屬抵押轉讓受讓人簽署	(如適用)
X			X	
X Signature of witness §			X Signature of policyowner 伢	R單持有人簽署
(Name 姓名:)		

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