

CHANGE OF POLICYOWNER PERSONAL DETAILS 更改保單持有人之個人資料

Policy no. 保單編號 :							
Pol	icyowner 保單持有人:						
reg cha info	ulations, our company is r nged any of your personal rmation you previously pro 符合防止洗黑錢及恐怖分子記	required to ensur particulars showr vided to Manulife 籌資之法律/監管	e our customer records a n below. If there is any cha please also provide us wit 要求及稅務法律及規例,本	ire up-to-date and inge in circumstand in a suitably update 公司必須確保現有	ndering and terrorist financing in relevant. We appreciate you pro ces which affects your tax resider ed self-certification form. 客戶的紀錄載有最新及相關之資料 公宏利的資料有所改變,懇請閣下提	mptly notifying us if you have not status or any change in the 中国中国中国中国中国中国中国中国中国中国中国中国中国中国中国中国中国中国中国	
(1) Occupation/ Business Nature 職業/業務性質							
	Occupation 職業:			Business Nat	ure 業務性質:		
	< Individual > Are you the owner or senior management of your employed company? < 個人客戶 > 閣下是否受僱公司的擁有人或高級管理層?						
	☐ Yes, please specify your position. 是,請註明閣下的職位:						
	□ No 否 Corporate> Any change on the company/ business registration/ incorporation? <商業客戶> 貴公司有否任何商業註冊/成立之資料更改?						
	〈商業客戶〉 賣公司有合任何商業註冊/成立之資料更次! ☐ Yes, please contact your Manulife Advisor to provide details by completing the Business Insurance Questionnaire 有 i 請聯絡宏利顧問 · 填妥商業保險問卷以提供許						
□ No 否						可'块女问来际然问它外促试叶用	
(2)	(2) Nationality/ Address 國籍/地址						
	アンドル New Nationality 新國籍 (Please submit Nationality Proof 請提供國籍証明):						
	New Correspondence Address 新通訊地址*^ (If different from mailing address of this statement 如與此信函地址不同):						
New Residential Address 新住宅地址: Same as Correspondence Address 與通訊地址相同 Others 其他:							
	* The address information applies to all of your existing products/services in Hong Kong and Macau provided by all companies within the Manulif companies and also companies which provide trustee/custodian services. If you are a member of any provident fund scheme(s) administered by Mainformation provided here will (unless otherwise stated below) be treated as an instruction to register the selected address as the registered address under the scheme(s). Any residential address(es) previously registered under the schemes(s) will be superseded accordingly. 閣下所提供的地址資料,適用於閣下現時持有並由宏利集團旗下公司,以及為本公司提供信託/託管服務的公司於香港及澳門所提供的產品/服務上宏利管理的公積金計劃成員,於此部份填寫的資料(除以下作出其他指示外)將視為給予本公司的指示,要求把所選擇的地址作為閣下於宏利公積金計記住宅地址,並取代以往於計劃內的所有登記住宅地址。						
^ □ To apply the selected correspondence address to this policy only, please tick this box. 如所選擇的通訊地址只適用於此保單,請在方格內填上						,請在方格內填上剔號。	
(3) Source(s) of Fund for upcoming/future renewal premium/fund subscription 將來的續保保費/認購基金的資金來源							
	□ Savings 儲蓄	T. 11 . 5	□ Wages Income 受僱收力		□ Self-employment Income 自僱业	入	
	☐ Investment Income 投資 ☐ Settlement of Insurance	C 1747 C	□ Sale of an asset 出售資		☑ Gift or inheritance 饋贈或遺產		
	_		Others (Please specify)	· · · —			
Please complete this form and return it to us by fax on 2807 3362 or by mail to GPO Box 201, Hong Kong. 請填妥此表格並傳真至 2807 3362 或郵寄至香港中央郵政信箱 201 號本公司收。 For change in other personal particulars, contact information or tax residency status, please visit www.manulife.com.hk and download the Change of Personal							
Par Ma	ticulars Form, Change of Co nulife Advisor for assistance	ontact Details For e.	m or the applicable Tax Re	esidency Self-Certif	ication Form for completion and r	eturn. Or you may contact your	
	需更改其他個人資料/聯絡資 月表格,填妥後交回本公司,真			Com.hk 卜載「史改	個人資料表格」/「更改聯絡資料表	格」或適用的稅務居民身份目我	
Please read the Notice to Customers relating to the Personal Data (Privacy) Ordinance (version 20130401-01) ("Notice") before you complete this form. The Notice 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 Notice.							
當閣下填寫此表格前,請閱畢《有關〈個人資料(私隱)條例〉的客戶通知(20130401-01版本)》(「通知」)。該通知可於宏利網址(www.manulife.com.hk)或向閣下的宏利顧問索取。透過填妥及交回此表格,即表示閣下同意該通知之內容。							

保單持有人簽署(須與本公司之紀錄相符)

Policyowner's Signature (please use signature filed with us)