



財務需要分析表 - (適用於公司/組織為(準)保單持有人)  
Financial Needs Analysis Form - (Applicable To Company/Entity As (Proposed) Policyholder)

(準)保單持有人名稱 Name of (Proposed) Policyholder	(準)受保人姓名 Name of (Proposed) Insured	要保書/保單號碼 Application/Policy No.

保險中介人資料 INSURANCE INTERMEDIARY INFORMATION	
保險中介人姓名 Name of Insurance Intermediary	
保險中介人編號 Insurance Intermediary's Code	聯絡電話 Contact No.

重要事項 IMPORTANT NOTES

- 此表格應由(準)保單持有人以正楷填寫及簽署。This form is to be filled in BLOCK LETTERS and signed by (Proposed) Policyholder.
- 請在適當的格內填上「√」。Please tick the appropriate boxes where applicable.

第一部份 Part I

A1. (準)保單持有人之資料 Particulars of (Proposed) Policyholder

(1) (準)保單持有人名稱 (Proposed) Policyholder's Name	(2) 公司成立日期 Date of Incorporation	____/____/____ 年 Year 月 Month 日 Day
(3) 業務性質 Nature of Business	(4) 公司成立地 Place of Incorporation	
(5) 聯絡電話 Contact No.	(6) 公司要員/員工數目 No. of Key-man/Employee	
(7) 註冊地址 Registered Address		
(8) 營運地址(如與註冊地址不同) Operation Address (If different from Registered Address)		
(9) 投保目的 Purpose of Insurance Application	<input type="checkbox"/> 要員保險 Key-man Insurance <input type="checkbox"/> 僱員福利 Employee Benefit <input type="checkbox"/> 其他 Other _____	
(10) 閣下是否計劃以保費融資方式繳付保費? [如是, 請完成及遞交《重要資料聲明書--保費融資》(IFS-PF)] Are you planning to pay the premium by premium financing? [if yes, please complete and submit "Important Facts Statement - Premium Financing" (IFS-PF)]	<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No	

A2. (準)受保人之個人資料 Personal Particulars of (Proposed) Insured

(1) 姓名 Full Name (須與身份證明文件相同 As shown on Identification Document)			
中文姓名 Name in Chinese	姓名(全名)		
英文姓名 Name in English	Surname	Middle and Other name(s)	
(2) 出生日期 Date of Birth	____/____/____ 年 Year 月 Month 日 Day	(3) 性別 Sex	<input type="checkbox"/> 男 M <input type="checkbox"/> 女 F
(4) 目標退休年齡 Target Retirement Age	<input type="checkbox"/> 60 歲 Age <input type="checkbox"/> 已退休 Retired	<input type="checkbox"/> 65 歲 Age <input type="checkbox"/> 不適用 Not Applicable	<input type="checkbox"/> 其他 Other _____ 歲 Age (請註明 Please specify)
(5) 職位 Position	(6) 持有公司股份百分比 Percentage of shares owned		
(7) 每年薪金/收入(港幣\$) Annual Salary/ Income (HK\$)	(8) 與(準)保單持有人的關係 Relationship with (Proposed) Policyholder		<input type="checkbox"/> 要員 Key-man <input type="checkbox"/> 董事/股東 Director/Shareholder <input type="checkbox"/> 其他 Other _____
(9) 在公司任職年期 Years of Working in the Company			



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B. (準)保單持有人之財務狀況 Financial Details of (Proposed) Policyholder			
收入 Income	每月收入 (港幣\$) Monthly Income (HK\$)	開支 Financial Outgoings	每月支出 (港幣\$) Monthly Outgoings (HK\$)
(1)營業收入 Business Turnover		(6)營運支出(包括保險保費) Operation expenses(including insurance premium)	
(2)租金收入 Rental Income		(7)信貸還款 (包括現有及申請中的保費借貸、抵押貸款及其他信貸的利息支出) Personal Loan Payment (including interest expenses for existing & applying Premium Financing, Pledge Loan and other Loans)	
(3)流動資產收入(如利息/股息) Income from liquid assets (interest / dividends)		(8)其他支出 Other expenses	
(4)其他經常收入(如利息) Other recurring income e.g. interest			
(5)每月總收入 Monthly Total Income =(1)+(2) +(3)+(4)		(9)每月總支出 Monthly Total Outgoings =(6) +(7) +(8)	
(10) 每月淨收入 / 可動用收入 Monthly Net Income / disposable income	= (5) - (9)	港幣\$ / HK\$	
(11) 全年總淨收入 / 可動用收入 Total Annual Net Income / disposable income	= (10) x 12	港幣\$ / HK\$	

C. (準)保單持有人之資產狀況 Asset Details of (Proposed) Policyholder			
流動資產 Liquid Assets	港幣\$ / HK\$	債務 Liabilities	港幣\$ / HK\$
(1)現金及銀行存款 Cash and deposit(s) in bank		(4) 信貸(包括現有及申請中保費借貸、抵押貸款及其他信貸的貸款) Loan (including loan for existing & applying Premium Financing, Pledge Loan and other Loans)	
(2)其他流動資產 Other liquid assets (如股票/證券/債券/互惠基金/單位信託等 e.g. Stocks / Securities / Bonds /Mutual Funds /Unit Trust etc)		(5)物業按揭貸款額 Outstanding mortgage loan	
(3)流動資產總值 Total Liquid Assets = (1) + (2)		(6)總債務 Total Liabilities = (4) + (5)	
(7)流動資產總淨值 Total Net Liquid assets	= (3) - (4)	港幣\$ / HK\$	
(8)固定資產(如物業市值、人壽保險現金價值、公積金 / 強積金總額等) Fixed Asset (e.g. property market value, cash value of life insurance, total amount of pension/MPF etc.)		港幣\$ / HK\$	
(9)資產總淨值 Total Net Assets	= (3) + (8) - (6)	港幣\$ / HK\$	

## 第二部份 財務需要 Part II Financial Needs

### A. 家庭保障需要(準受保人) Family Protection Need (Proposed Insured)

家庭負擔 Family Commitments	港幣\$ / HK\$	保險保障 Insurance Protections	港幣\$ / HK\$
(1) 未來家庭生活總支出 Total Future Family Living Expenses		(6) 現有人壽保障金額 Existing Life Insurance Coverage	
(2) 教育支出需要 Education Fund Needs		(7) 正在申請中的人壽保障金額 Life Insurance Coverage Applying	
(3) 負債(按揭/借貸等) Liabilities (Mortgage Loan /Debts etc.)		(8) 現有及申請中的人壽保障金額 Total Life Coverage Including Applying = (6) + (7)	
(4) 其他支出 (善終費用/遺產稅等) Other Expenses (Funeral Expenses/Estate Duties etc.)			
(5) 總家庭負擔 = (1) + (2) + (3) + (4) Total Family Commitments		(9) 額外總家庭保障需要 = (5) - (8) Extra Total Family Protection Needs	

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B. 危疾/醫療保障計劃(準受保人) Critical Illness/Medical Protection Planning(Proposed Insured)			
家庭負擔 Family Commitments	港幣\$ / HK\$	保險保障 Insurance Protections	港幣\$ / HK\$
(1) 未來家庭生活總支出 Total Future Family Living Expenses		(3) 現有危疾/醫療保障金額 Existing Critical Illness/ Medical Coverage	
(2) 預計危疾/醫療護理費用 Expected Critical Illness/Medical Expenses		(4) 額外危疾/醫療保障需要 Extra Critical Illness/Medical Protection needs = (1) + (2) - (3)	

C. 財富增值計劃(準保單持有人/受保人) Wealth Accumulation Planning(Proposed Policyholder/Insured)	
(1) 預期儲蓄及/或投資年期 Target Years of Savings and/or Investment	年/Year(s)
(2) 理財目標 Financial Target 除了現時流動資產總值外，在上述預期時間下的額外目標儲蓄及/或投資金額 Apart from current Total Liquid Assets, the extra target saving/ investment amount within the aforesaid expected timeframe	港幣\$ HK\$

D. 要員保障需要(準保單持有人) Key-man Protection Need(Proposed Policyholder)	
額外要員保障需要 Extra Key-man Protection Needs	港幣\$ / HK\$

客戶須知：本財務需要分析表格旨在協助尋找適合的保險產品，以滿足閣下的需要及情況。請回答本表格所述的所有問題。請勿於未完成回答本表格的所有問題或於任何問題被刪除的情況下簽署本表格。請勿在白空的表格上簽署。如在本表格中提供的資料有任何重大變更，請告知我們（保險公司）。

Notes to customer: This FNA form is to facilitate the identification of suitable insurance product(s) to meet your needs and circumstances. Please answer all questions in this form. Do NOT sign on this form if any questions are unanswered or have been crossed out. Do NOT sign on blank form. You need to inform us (the insurance company) if there is any substantial change of information provided in this form.

### 第三部份「財務需要分析」 Part III Financial Needs Analysis

1. 閣下購買保險產品的目標為何？（勾選一項或多項）  
What are your objectives for seeking to purchase an insurance product? (tick one or more)
- (a) 為應付不時之需提供財務保障（如身故、意外、殘疾等） Financial protection against adversities (e.g. death, accident, disability etc.)
  - (b) 為應付醫療保健需要（如危疾、住院等） Preparation for health care needs (e.g. critical illness, hospitalization etc.)
  - (c) 為未來提供定期的收入（如退休收入等） Providing regular income in the future (e.g. retirement income etc.)
  - (d) 為未來需要作儲蓄（如兒童教育、退休等） Saving up for the future (e.g. child education, retirement etc.)
  - (e) 投資 Investment (請回答 1.1 Please answer 1.1)
  - (f) 其他 Others (請說明 Please specify \_\_\_\_\_)

以下是問題1的補充問題，僅適用在上述問題1中選擇「投資」作為目標之一的情況  
The supplementary question to Q1 below is applicable only if "Investment" is chosen as one of the objectives in Q1 above

- 1.1 為實現上述「投資」的目標，閣下希望如何管理保險產品項下的不同投資選項 / 投資選擇（如有）？（勾選一項）  
To meet your "Investment" objective indicated above, how would you prefer to manage different investment options/investment choices, if available, under the insurance product? (tick one)
- (a) 本人願意按個人決定（毋須獲授權保險人及 / 或持牌保險中介人提供任何專業意見的情況）選擇及管理保險產品項下的不同投資選項 / 投資選擇（如有），並且願意在保險產品的目標利益 / 保障期的整個期間作出此決定。  
I want to make my own decisions (without any professional advice to be provided by the authorized insurer and/or licensed insurance intermediaries) to choose and manage different investment options/investment choices, if available, under an insurance product, and I am willing to do it throughout the entire duration of the target benefit/protection period of an insurance product.
  - (b) 本人願意按個人決定（經獲授權保險人及 / 或持牌保險中介人提供專業意見的情況）選擇及管理保險產品項下的不同投資選項 / 投資選擇（如有），並且願意在保險產品的目標利益 / 保障期的整個期間作出此決定。  
I want to make my own decisions (with professional advice to be provided by the authorized insurer and/or licensed insurance intermediaries) to choose and manage different investment options/investment choices, if available, under an insurance product, and I am willing to do it throughout the entire duration of the target benefit/protection period of an insurance product.
  - (c) 本人不願意選擇或管理保險產品項下的不同投資選項 / 投資選擇（如有）。  
I do not want to choose or manage different investment options/investment choices, if available, under an insurance product.

2. 閣下的保單目標利益 / 保障期 / 實現目標金額的預期時間\*為？（勾選一項）  
What is your target benefit/protection period/expected timeframe for meeting the target amount for insurance policy? (tick one)
- (1)  < 1 年 year
  - (2)  1-5 年 years
  - (3)  6-10 年 years
  - (4)  11-15 年 years
  - (5)  16 - 20 年 years
  - (6)  > 20 年 years
  - (7)  終身 Whole of life

註：\* 如投保單將不能於實現目標金額的預期時間達至預期總儲蓄金額，請準備足夠收入及/或流動資產去應付突發需要。  
Note: \*If the expected timeframe for meeting the target amount cannot reach expected total savings amount, please prepare sufficient income and/or liquid asset for emergency use.



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**第四部份 保險中介人建議理由 Part IV Reason(s) for Recommendation by Insurance Intermediary**

**A. 推介的原因 Reason(s) of recommendation**

請保險中介人填妥推介保險產品給客戶的原因：

Please complete the reason(s) of recommending insurance product(s) to customer by insurance intermediary:

- 根據客戶選購產品的目標及投資選項/選擇(如適用) · 推介了上述配合供款年期、保障 / 實現目標金額年期、財政狀況和需要的產品。  
According to the customer's objective(s) and "investment" options/choices (if applicable) for seeking to purchase an insurance product, the above is/are recommended which fit(s) premium paying term, protection period/expected timeframe for meeting the target amount, financial situations and needs.
- 只有一份**保險產品符合客戶購買保險產品的目標及投資選項/選擇(如適用)、供款年期、保障 / 實現目標金額年期、財政狀況和需要。  
**Only ONE product** fulfills customer's objective(s) and "investment" options/choices (if applicable), premium payment term, protection period/expected timeframe for meeting the target amount, financial situations and needs.
- 其他  
Other(s) : \_\_\_\_\_

**B. 選購產品的投保額未符合客戶需要的原因(如適用) Reason(s) of Selected Product's Insurance Coverage not Matching with Customer's Need(s) (if applicable)**

如選購產品為保障型產品(例如人壽 / 危疾) · 其投保額與客戶的保障需要相差超過 20% · 請保險中介人在以下確定原因。

If selected product is a protection product (e.g. life insurance / Critical illness) and its coverage has variance of more than 20% versus the protection needs, please complete below by the insurance intermediary.

- 投保額高於客戶的保障需要超過 20% · 以抵抗通脹。  
The sum insured is **higher than** the customer's protection needs by **exceeding 20%** for fighting against inflation.
- 投保額低於客戶的保障需要超過 20% · 因為客戶的保費供款限制。  
The sum insured is **less than** the customer's protection needs by **exceeding 20%** for the reason of customer's premium payment limitation.
- 其他原因：  
Other Reason(s): \_\_\_\_\_

**C. 選購產品的目標儲蓄/投資金額未符合客戶需要的原因(如適用) Reason(s) of Selected Product's Target Saving/ Investment Amount not Matching with Customer's Need(s) (if applicable)**

如選購產品的目標儲蓄/投資金額與客戶的需要(「理財目標」)相差超過 20% · 請保險中介人在以下確定原因。

If the target saving/ investment amount of the selected product has variance of more than 20% versus the needs ("Financial Target"), please complete below by the insurance intermediary.

- 目標儲蓄/投資金額高於客戶的需要超過 20% · 以抵抗通脹。  
The target saving/ investment amount is **higher than** the customer's needs by **exceeding 20%** for fighting against inflation.
- 目標儲蓄/投資金額低於客戶的需要超過 20% · 因為客戶的保費供款限制。  
The target saving/ investment amount is **less than** the customer's needs by **exceeding 20%** for the reason of customer's premium payment limitation.
- 其他原因  
Other Reason(s): \_\_\_\_\_



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## 收集個人資料聲明 PERSONAL INFORMATION COLLECTION STATEMENT

China Life Insurance (Overseas) Company Limited (incorporated in the People's Republic of China with limited liability) (the "Company") recognizes its responsibilities in relation to the collection, holding, processing or use of personal data under the Personal Data (Privacy) Ordinance. 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 unauthorized or accidental access, erasure or other use.

The provision of your personal data is voluntary. Please note that if you do not provide us with the required personal information, the Company may not be able to provide your requested information, products or services.

In this Personal Information Collection Statement ("PICS"), the following terms shall have these following meanings:-

"Our affiliates" means any subsidiary undertaking of the Company, any associated company of the Company, and parent undertaking of the Company, any subsidiary undertaking of parent undertaking, any associated companies undertaking of parent undertaking, for the avoidance of doubt, undertaking within the group of China Life Insurance (Group) Company ("Our affiliates" shall be construed accordingly).

**Purpose:** From time to time it is necessary for us to use your personal data for the following purposes:

1. offering, providing and marketing to you the products/services of the Company, our affiliates or our co-branding partners (see "Use of Personal Data for Direct Marketing Purposes" below), and administering, maintaining, managing and operating such products/services;
2. processing and evaluating any applications or requests made by you for products/services offered by the Company and our affiliates;
3. providing subsequent services (including but not limited to health inspection / management) to you and administering the policies issued including but not limited to additions, alterations, variations, cancellation, renewal or reinstatement;
4. any purposes in connection with any claims made by or against or otherwise involving you or other claimants in respect of any products/services provided by the Company and/or our affiliates, including investigation of claims; detect and prevent fraud (whether or not relating to the policy issued in respect of this application);
5. evaluating your financial needs;
6. designing new or enhancing existing products/services of the Company and/or our affiliates;
7. conducting market or actuarial research for statistical or similar purposes undertaken by the Company and/or our affiliates, the financial services industry or our respective regulators;
8. investigating any data held which relates to you from time to time for any of the purposes listed herein;
9. meeting requirements imposed by any applicable, present, existing or future law, rules, regulations, codes of practice or guidelines or assisting with law enforcement purposes, investigations by police or other government or regulatory authorities in Hong Kong or elsewhere;
10. conducting identity and/or credit checks and/or debt collection;
11. carrying out other services in connection with the operation of the Company's business;
12. sending out administrative communications about any account you may have with the Company or about future changes to this PICS;
13. performing relevant due diligence procedures in accordance with the Common Reporting Standard (or Automatic Exchange of Financial Account Information) as set out in the Inland Revenue Ordinance (Cap. 112); and
14. 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 transferred to:

1. any of our affiliates;
2. any person (including private investigators and claims investigation companies) 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 provide services in connection with the product/services provided by the Company and/or our affiliates, including any reinsurance company, insurance intermediary, fund management company, health management institution or financial institution;
4. any agent, contractor or third party who provides administrative, technology, data processing, telecommunications, computer, payment, debt collection, call centre services, direct marketing services or other services to the Company and/or our affiliates in connection with the operation of its business;
5. other companies who help gather your information or communicate with you, such as research companies and credit reference agencies or, in the event of default, debt collection agencies;
6. any actual or proposed assignee, transferee, participant or sub-participant of our rights or business;
7. any government department or other appropriate governmental or regulatory authority (which may be further transferred to governmental or regulatory authority of certain other jurisdiction(s) to whom the Company and/or our affiliates are requested or required by any applicable, present, existing or future law, rules, regulations, codes of practice or guidelines to make disclosures;
8. any financial services provider industry association or federation;
9. any person preventing and detecting insurance fraud, who may collect and use the personal data only as reasonably necessary to carry out the purposes of preventing and detecting insurance fraud: insurance adjusters, agents and brokers; employers; health care professionals; hospitals; accountants; financial advisors; solicitors; fraud prevention organisations; other insurance companies (whether directly or through fraud prevention organisation 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.

Your personal data may be provided to any of the above parties who may be located in Hong Kong or outside of Hong Kong, and in this regard you consent to the transfer of your data outside of Hong Kong.

Transfer of your personal data will only be made for one or more of the purposes specified above. For our policy on using your personal data for promotional or marketing purposes, please see the section entitled "Use of Personal Data for Direct Marketing Purposes".

**Use of Personal Data for Direct Marketing Purposes:** The Company intends to:

1. Use your name, contact details, products and services portfolio information, transaction pattern and behaviour, financial background and demographic data held by the Company from time to time for direct marketing;
2. Conduct direct marketing (including providing reward, loyalty or privileges programmes) in relation to the following classes of products and services that the Company, our affiliates and our co-branding partners may offer:
  - (a) insurance, annuities, banking, wealth management, retirement plans, investment, financial services, credit cards, securities and related products and services; and
  - (b) health, wellness and medical, food and beverage, sporting activities, memberships and related products and services;
3. The above products and services may be provided by the Company and/or:
  - (a) any of our affiliates;
  - (b) third party financial institutions;
  - (c) the Company, our affiliates and our co-branding partners providing the products and services set out in 2;
  - (d) third party reward, loyalty or privileges programme providers; and
  - (e) external service providers supporting the Company or any of the above listed entities in providing the products and services set out in 2.
4. In addition to marketing the above products and services, the Company also intends to provide the data described in 1 above to all or any of the persons described in 3 above for use by them in marketing those products and services;
5. The Company requires your written consent (which includes an indication of no objection) to use and provide the data to the third parties as set out above for any promotional or marketing purpose.

You may withdraw your consent to the use and provision to a third party of your personal data for direct marketing purposes at any time, and thereafter the Company shall, without

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**收集個人資料聲明 PERSONAL INFORMATION COLLECTION STATEMENT**

charge to you, cease to use such data for direct marketing purposes. If you wish to withdraw your consent, please contact the Company's Personal Data Protection Officer (details below).

The Company has the right to charge a reasonable fee for the processing of any data request. **Access and correction of personal data:** Under the Personal Data (Privacy) Ordinance, you have the right to ascertain whether the Company holds your personal data, to correct any data that is inaccurate, and to ascertain the Company's policies and practices in relation to personal data. 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 types of data held should be addressed in writing to:

The Personal Data Protection Officer  
 China Life Insurance (Overseas) Company Limited  
 22/F, CLI Building, 313 Hennessy Road,  
 Wan Chai, Hong Kong  
 Telephone: (+852) 3999 5519 Fax: (+852) 2892 0520

The Company have the right to charge a reasonable fee for the processing of any data request.

**聲明和授權：**本人 / 我們確認本人/我們已閱讀並明白收集個人資料聲明（“本聲明”）。本人 / 我們特此確認並同意公司根據本聲明使用和移轉本人/我們的個人資料，包括為直接促銷之目的使用和提供本人 / 我們的個人資料。本人/我們已取得在此申請提供第三方資料（如有）所需的同意。本人 / 我們確認並同意為本聲明中所述之目的將本人 / 我們的個人資料移轉至香港境外給本聲明所述的承轉人的類別。

**重要提示：**請於以下簽署部份簽名，以示閣下同意。若閣下不同意根據“為直接促銷目的而使用個人資料”部份所述為直接促銷之目的而使用和提供閣下的個人資料，請在以下方格劃上「✓」號。

**Declaration and authorization:** I/We acknowledge and confirm that I/we have read and understood the Personal Information Collection Statement (“PICS”). I/We hereby give my/our acknowledgement and agree to the use and transfer of my/our personal data by the Company in accordance with the PICS, including the use and provision of my/our personal data for the purpose of direct marketing. I/We have obtained the consent to provide the third party information (if any) in this application. I/We acknowledge and consent to the transfer of my/our personal data outside of Hong Kong for the purposes and to the types of transferee as set out in the PICS.

**Important:** Please indicate your agreement by signing on the space provided below. If you do not agree to the use and provision of your personal data for direct marketing as set out in the section “Use of personal data in direct marketing”, please tick the box below.

- 本人 / 我們不同意根據以上收集個人資料聲明（參閱“為直接促銷目的而使用個人資料”部份）為直接促銷之目的而使用和提供本人 / 我們的個人資料，亦不希望接收任何推廣及直接促銷材料。  
 I/We do not agree with the use and provision of my / our personal data for direct marketing purposes as set out above in the Personal Information Collection Statement (see “ Use of Personal Data for Direct Marketing Purposes ”) and do not wish to receive any promotional and direct marketing materials.

\_\_\_\_\_  \_\_\_\_\_  \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 保險中介人簽署 (準)保單持有人簽署 年 Year 月 Month 日 Day  
 Insurance Intermediary's Signature (Proposed) Policyholder's Signature

**警告：**請小心細閱及填寫本財務需要分析表格。請不要留空任何問題。如有任何未回答的問題未被刪去，請不要在表格上簽署。  
**WARNING:** Please read and fill in this form carefully. Do not leave any questions blank. Do NOT sign if any questions are unanswered and have not been crossed out.

**警告：**若閣下未能為現有保費融資或保單抵押貸款按時支付還款及利息，保單有機會被放款人要求退保。由於保單權益已經轉讓給放款人一方，保單價值將先會用作償還閣下欠放款人的貸款及利息，餘額才會支付給保單持有人或保單受益人。  
**WARNING:** If you fail to repay the principal and interest of your existing premium financing or policy pledge loan, the policy will be surrendered as may be requested by the lender. As the policy is assigned to the lender, the policy value first will be used to repay your outstanding loan balance and interest. The remaining balance will be paid to the Policyholder or the beneficiary thereafter.

**注意 Note：**  
 若財務需要分析表格上填報的資料有重大改變，閣下在保單未簽發前，必須通知本公司。  
 You are required to inform us (the insurance company) if there is any substantial change of information provided in this form before the policy is issued.