

<b>保單編號</b> <b>Policy Number</b>									
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HKMCA Ref No.: \_\_\_\_\_

**注意事項：**

1. 請以**正楷**填寫本身身故賠償申請表(「申請表」)。
2. 本申請表只適用於身故索償。每位索償人／受益人必須個別填寫一份申請表。
3. 切勿在空白或尚未填妥之申請表上簽署，或留空任何部分。
4. 如就本申請表有任何更改或修正，索償人／受益人必須在更改或修正的位置旁簽署作實。
5. 請於填妥並簽署本申請表後連同相關文件一併於簽署日期**30**天內提交至香港年金有限公司(「香港年金公司」)。如香港年金公司在簽署日期逾**30**天後收到閣下的申請表，香港年金公司保留權利要求閣下重新簽署新的申請表。
6. 身故賠償將在香港年金公司收到本申請表及相關文件之日釐定。若索償人／受益人於保證期結束前延遲向香港年金公司提交本申請表及相關文件，將導致減少應向索償人／受益人支付的身故賠償。
7. 若索償人／受益人在保證期後才向香港年金公司提出身故索償申請，索償人／受益人可能未能獲得任何身故賠償金額。
8. 如果超過一名索償人／受益人，身故賠償選項必須在香港年金公司收到身故索償申請後**30**天內由所有索償人／受益人全體一致選定並同意。如果未選定選項或所有索償人／受益人未全體一致選定並同意選項，香港年金公司則會以一筆過身故理賠方式向相關索償人／受益人支付身故賠償金額。
9. 香港年金公司保留不時更新本申請表的權利，如閣下未能符合香港年金公司的有關規定，香港年金公司有權決定拒絕此申請表及保留權利於其認為有需要時要求進一步澄清及索取其他證明文件。
10. 如有任何查詢，可透過以下途徑與香港年金公司聯絡：
  - 客戶服務熱線 : (852) 2512-5000
  - 客戶服務電郵 : [cs@hkmca.hk](mailto:cs@hkmca.hk)
  - 申請服務及客戶服務中心地址 : 香港九龍觀塘偉業街180號 Two Harbour Square 19樓
  - 辦公時間 : 星期一至星期五，上午9時至下午6時  
(公眾假期除外)



\*CLMDTH\*

## IMPORTANT NOTES :

1. Please complete this Death Claim Form (the "Form") in **BLOCK LETTERS**.
2. This Form can only be used for death claim. Each claimant/beneficiary is required to fill in an individual Form.
3. Do not sign a blank or incomplete Form or leave any space blank.
4. Any changes or amendments to this Form should be counter-signed by the claimant/beneficiary.
5. Please complete, sign and submit this Form with the relevant documents to HKMC Annuity Limited ("HKMCA") within 30 days of the signing date. If the Form is received by HKMCA after 30 days of the signing date, HKMCA reserves the rights to request you to sign a new Form.
6. The Death Benefit will be determined as at the date on which this Form and the relevant documents are received by HKMCA. The amount of Death Benefit payable to the claimant/beneficiary will be reduced if claimant/beneficiary delays in submitting this Form and relevant documents to HKMCA before the Guaranteed Period ends.
7. If claimant/beneficiary submits death claim application after the Guaranteed Period ends, claimant/beneficiary may not receive any Death Benefit.
8. If there is more than one claimant/beneficiary, the Death Benefit payment option must be selected and agreed by all claimants/beneficiaries unanimously within 30 days after HKMCA has received the death claim application. If no option is selected or no unanimous option is selected and agreed by all the claimants/beneficiaries, Lump Sum Death Benefit Payment will be applied and HKMCA shall pay the Death Benefits to respective claimants/beneficiaries.
9. HKMCA reserves the right to update this Form from time to time and to reject the Form submitted by you if you fail to fulfill HKMCA's requirements and reserve the right to ask for clarification and further supporting documentation if deemed necessary.
10. If you have any enquiries, you may contact HKMCA through the following channels:

Customer Service Hotline	:	(852) 2512-5000
Customer Service Email	:	cs@hkmca.hk
Application Servicing and Customer Service Centre Address	:	19/F, Two Harbour Square 180 Wai Yip Street, Kwun Tong Kowloon, Hong Kong
Office hours	:	Monday to Friday, 9 a.m. to 6 p.m. (except public holiday)

**第一部分 死者資料**  
**PART I DECEASED'S DETAILS**

1. 死者姓名 Name of Deceased	姓 Surname 名 First and Middle Name
2. 身份證明文件號碼 Identification Document Number	
3. 出生日期 Date of Birth	____ / ____ / ____ 日 Day 月 Month 年 Year
4. 死亡日期 Date of Death	____ / ____ / ____ 日 Day 月 Month 年 Year
5. 死亡地點 Place of Death	
6. 死亡原因 Cause of Death	
7. 死者身故前住址 Deceased's Residential Address	____ 室 Flat      ____ 樓 Floor      ____ 座 Block
	大廈名稱 Building
	屋苑名稱 Estate
	街道名稱及號碼 Street Name and Street Number
	____ 區域或城市 District or City      ____ 國家或地區 Country or Territory

**第一部分 死者資料(續)**  
**PART I DECEASED'S DETAILS (CON'T)**

**若因疾病導致身故，請填報第8 – 9項**  
**If death is due to an illness, please complete items 8 – 9**

<p>8. 死者何時首次諮詢主診醫生以了解相關疾病?                  When did the deceased first consult physician for the related illness?</p>	<p style="text-align: center;">_____ / _____ / _____                  日 Day 月 Month 年 Year</p>
<p>9. 請提供最後主診醫生或醫院資料                  Please provide details of the last attending physician/hospital</p>	<p>主診醫生名稱 Name of Attending Physician</p>
	<p>醫院名稱 Name of Hospital</p>
	<p>地址及聯絡電話                  Address and Contact Phone Number</p>

**若因意外或非疾病導致身故，請填報第10 – 13項**  
**If death is due to an accident or non-illness, please complete items 10 – 13**  
 註：請附上警察報告、交通意外報告及/或口供紙副本(如有)  
**Remarks: Please provide a copy of the Police Report, Traffic Accident Report and/or Police Statement (if any)**

<p>10. 意外/事故日期                  Date of accident/incident</p>	<p style="text-align: center;">_____ / _____ / _____                  日 Day 月 Month 年 Year</p>	
<p>11. 意外/事故地點                  Location of accident/incident</p>		
<p>12. 意外/事故詳情                  Details of accident/incident</p>		
<p>13. 曾否就是次意外/事故報警?                  Has the accident/incident been reported to the Police?</p>	<p><input type="checkbox"/> 沒有    <input type="checkbox"/> 有                  No            Yes</p>	<p>警署 Police Station                  檔案編號 Case Ref. No.</p>

**第二部分 索償人／受益人資料**  
**PART II CLAIMANT/BENEFICIARY'S INFORMATION**

14. 索償人／受益人姓名 Name of Claimant/Beneficiary	英文姓名 Name in English 姓 Surname                      名 First and Middle Name		中文姓名 Name in Chinese	
15. 性別 Gender	<input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female	16. 出生日期 Date of Birth	_____ / _____ / _____ 日 Day    月 Month    年 Year	
17. 身份證明文件號碼 Identification Document Number				
18. 國籍／公民身分 Nationality/Citizenship (如多於一個國籍／公民身分，請註明所有國籍／公民身分) (For more than one nationality/citizenship, please specify all nationalities/citizenships)				
19. 與死者之關係 Relationship to the Deceased	(請提供關係證明) (Please provide relationship proof)			
20. 現時住宅地址 Current Residential Address	_____ 室 Flat                      樓 Floor                      座 Block			
	_____ 大廈名稱 Building			
	_____ 屋苑名稱 Estate			
	_____ 街道名稱及號碼 Street Name and Street Number			
21. 聯絡電話 Contact Telephone Number	住宅 Home	_____ - _____ - _____ 國家或地區號碼 Country or Territory Code	_____ - _____ - _____ 區域號碼 Area Code	_____ 電話號碼 Telephone Number
	手提電話 Mobile	_____ - _____ - _____ 國家或地區號碼 Country or Territory Code	_____ - _____ - _____ 區域號碼 Area Code	_____ 電話號碼 Telephone Number
	其他 Other	_____ - _____ - _____ 國家或地區號碼 Country or Territory Code	_____ - _____ - _____ 區域號碼 Area Code	_____ 電話號碼 Telephone Number



**第四部分 聲明**  
**PART IV DECLARATIONS**

**保單遺失聲明 Declaration of Policy Lost**

- 本人聲明，本人為本申請表中提及的索償人／受益人；(i)保單已被遺失及遍尋不獲；(ii)保單並沒有轉讓或抵押予他人。鑑於香港年金公司同意就保單支付款項予本人，本人謹此承諾就香港年金公司因此而可能須承擔法律責任或招致的所有申索、索求、法律行動、法律程序、賠償、費用及開支，及利息對香港年金公司作出彌償。

此外，本人謹此承認由香港年金公司所提供由保單持有人或受益人或受益人之信託人或法律代表或財產承辦人（如沒有指定受益人時），就上述保單所簽署及確認之賠款清償收據，則表示香港年金公司對上述保單所發出之賠款已為擁有法律權利承受該款項之人士所收受，而香港年金公司亦已履行上述保單之全部責任。

- By ticking the Box on the left, I represent that I am a Claimant/Beneficiary under the Policy as given on this Form; (i) the aforesaid Policy was lost and could not be located despite diligent efforts; (ii) the aforesaid Policy has not been assigned, pledged, or otherwise conveyed or encumbered to another person. If HKMCA makes any payment under this Policy in my favor, I hereby undertake to indemnify HKMCA from and against all claims, demands, actions, proceedings, damages, cost and expenses, and interest thereon whatsoever which HKMCA may be liable for or incur by reason of HKMCA making payment in my favor.

Furthermore, I/we hereby covenant and acknowledge that the production by HKMCA of a receipt for any sum paid under the aforesaid Policy, signed by the Policyowner or any Beneficiary or Beneficiaries of record or by a trustee for or legal representative of such Beneficiary, or the Insured's Estate where no Beneficiary has been named, shall be a discharge to HKMCA for the same and shall be final and conclusive evidence to all intents and purposes that such sum has been duly paid to and received by the person or persons lawfully and rightfully entitled to the same and that all claims and demands whatsoever against HKMCA in respect thereto have been fully satisfied.

1. 本人謹此聲明本申請表所填資料皆為本人所知及所信之事實及其全部，及已閱讀、明白及同意本申請表的注意事項並簽署作實。
  2. 本人現謹以本申請表向香港年金公司申請賠償，並同意所有曾替受保人診治之醫生所發出之報告及所有與此申請賠償相關的文件或證明，皆構成此死亡賠償申請之一部分，又同意香港年金公司提供本申請表或其附屬表格，並不構成已接納所申請賠償之保障為有效或放棄任何對此宗個案抗辯之權利。
  3. 本人確認已閱讀並明白香港按揭證券有限公司和其附屬公司有關《個人資料（私隱）條例》的收集個人資料聲明內容（詳見本申請表第七部分）。本人明白香港年金公司不會在未經本人同意下將本人於本申請表中提供之個人資料作直接促銷用途。
  4. 本人明白及同意直至所有有關文件收妥前本申請表將不會生效，本申請表是須經香港年金公司接納後方可作實。
1. I hereby declare that the information given on this Form is true, accurate and complete to my best knowledge and belief and by signing below, I have read, understood and agree to the Important Notes stated in this Form.
  2. I hereby make claim to HKMCA by submitting this Form and agree that the written statements of all the physicians who attended or treated the Insured and all other proofs and supporting documents associated with this claim application shall constitute and are hereby made part of this death claim application. I further agree that the furnishing of this Form, or any other forms supplemental hereto by HKMCA, shall not constitute nor be considered an admission by it that there was any assurance in force on the life in question, nor a waiver of any of its rights of defences.
  3. I confirm that I have read and understand the contents of the personal information collection statement of The Hong Kong Mortgage Corporation Limited and its subsidiaries in relation to the Personal Data (Privacy) Ordinance (please see Part 7 of this Form for details). I understand that HKMCA will not use my personal data provided in this Form for direct marketing purposes without my consent.
  4. I understand and agree that this Form shall not take effect until any required documents are submitted in full and this Form is endorsed by HKMCA.

SIGN 

索償人／受益人簽署  
Signature of Claimant/Beneficiary

索償人／受益人姓名  
Name of Claimant/Beneficiary

日期(日/月/年)  
Date (DD/MM/YYYY)

若本表格是由法定授權代表簽署，請填寫此欄。  
Please complete this part if this Form is signed by the Lawful Attorney.

SIGN 

法定授權代表簽署  
Signature of Lawful Attorney

法定授權代表姓名  
Name of Lawful Attorney

日期(日/月/年)  
Date (DD/MM/YYYY)

收集個人資料聲明(見證人用)

- 閣下所提供的個人資料僅用作核對見證人身份及記錄保存之用；該等資料並不會用作直接促銷或向任何其他第三者披露或轉移。
- 閣下有權向香港年金公司要求查閱或更正閣下的個人資料。有關要求可以書面形式向按揭證券公司集團的個人資料保障主任提出，遞交香港九龍觀塘偉業街180號 Two Harbour Square 19樓。

Personal Information Collection Statement for Witness

- Personal data provided by you is required to enable us to verify your identity as a witness and also for record keeping only; your data will **NOT** be used for direct marketing or disclosed or transferred to any other third party.
- You have the right to request access to and correction of your personal data held by HKMCA. Your request can be made in writing to the Data Protection Officer of the HKMC Group at 19/F, Two Harbour Square, 180 Wai Yip Street, Kwun Tong, Kowloon, Hong Kong.

SIGN 

見證人簽署(如適用)\*  
Signature of Witness (if applicable)\*

見證人姓名(如適用)\*  
Name of Witness (if applicable)\*

日期(日/月/年)  
Date (DD/MM/YYYY)

見證人與索償人／受益人／法定授權代表的關係  
Relationship between Witness and Claimant/Beneficiary/Lawful Attorney

身份證明文件類別  
Type of Identification Document

身份證明文件號碼  
Identification Document Number

- 親屬 Relative  
 朋友 Friend  
 其他，請註明 Other, please specify

- 香港身份證 Hong Kong Identity Card  
 護照 Passport  
 其他 Other \_\_\_\_\_

\*請注意 PLEASE NOTE

如閣下或閣下的法定授權代表以圖章蓋印或指紋作簽署，必須由一名見證人見證下簽署本申請表。  
If you or your Lawful Attorney are using chop or fingerprint for signature, a witness is required to witness the signing of this Form.



**第六部分 索償文件參考表**  
**PART VI CLAIMS DOCUMENT CHECKLIST**

<b>基本所須文件 Basic Documents Required :</b>		
文件類別 Document Type	自然死亡 Natural Death	意外或非自然死亡 Accidental Death/ Unnatural Cause of Death
<input type="checkbox"/> 身故賠償申請表 Death Claim Form	✓	✓
<input type="checkbox"/> 保單正本或保單遺失聲明 Original Policy or Declaration of Policy Lost	✓	✓
<input type="checkbox"/> 死亡證／公證書／法院命令假定死亡證／由認可機構發出之死亡證明之正本或經認證之副本 <sup>^</sup> Original or Certified True Copy <sup>^</sup> of Death Certificate/Notarial Certificate/Court Order for Presumptive Death/Proof of Death issued by authorised authorities	✓	✓
<input type="checkbox"/> 死者的身份證明文件正本或經認證之副本 <sup>^</sup> Original or Certified True Copy <sup>^</sup> of the Deceased's Identification Document	✓	✓
<input type="checkbox"/> 受益人身份證明文件之認證副本 <sup>^</sup> 及與死者之關係證明 Certified True Copy <sup>^</sup> of the Beneficiary's Identification Document and relationship proof to the Deceased	✓	✓
<input type="checkbox"/> 未成年受益人的出生證明書之認證副本 <sup>^</sup> Certified True Copy <sup>^</sup> of Birth Certificate of the Minor's Beneficiary	如適用 If Applicable	如適用 If Applicable
<input type="checkbox"/> 未成年受益人的法定監護人證明書 Legal Guardianship Paper for Minor's Beneficiary	如適用 If Applicable	如適用 If Applicable
<input type="checkbox"/> 受益人的銀行戶口證明文件（用於收取每月身故賠償之用） Beneficiary's Bank Account Proof (for receiving the monthly death benefit payment)	如適用 If Applicable	如適用 If Applicable
<input type="checkbox"/> 遺產管理書或遺囑認證書 Letters of Administration or Grant of Probate	如適用 If Applicable	如適用 If Applicable
<input type="checkbox"/> 遺產管理人或遺產執行人的身份證明文件副本 Copy of Administrator's or Executor's Identification Document	如適用 If Applicable	如適用 If Applicable
<input type="checkbox"/> 警方及／或交通意外報告 Police and/or Traffic Accident Report	不適用 Not Applicable	✓
<input type="checkbox"/> 驗屍報告／死因報告（根據要求） Post-mortem/Coroner's Report (upon request)	不適用 Not Applicable	✓
<input type="checkbox"/> 喪葬證明書 Certificate of Cremation/Funeral	不適用 Not Applicable	✓
<input type="checkbox"/> 剪報 Newspaper Clippings	不適用 Not Applicable	✓
<input type="checkbox"/> 由受益人填寫的個人自我證明表格（可從香港年金公司網站下載或聯絡香港年金公司索取） Individual Self-Certification Form to be completed by Beneficiary (This form can be downloaded from the website of HKMCA or obtained by contacting HKMCA)	✓	✓
<b>如於香港以外地區死亡的額外所須文件 Additional Documents Required for Death outside Hong Kong</b>		
<input type="checkbox"/> 如死者為香港永久性居民，入境事務處發出之註銷香港身份證證明文件 Proof of deregistration of HKID card issued by the Immigration Department if the deceased is a permanent resident of Hong Kong		✓
<input type="checkbox"/> 如死者為中國大陸居民，註銷居民身份證明文件 Deregistration of Residence – Deceased is citizen of Mainland China		✓
<input type="checkbox"/> 如死者為外地居民，本國的死亡登記證明文件 Proof of death registration in home country if deceased is an overseas citizen		✓

<sup>^</sup>必須經由香港年金公司認證

<sup>^</sup>Must be certified by HKMCA

## 第七部分 收集個人資料聲明(「本聲明」) PART VII PERSONAL INFORMATION COLLECTION STATEMENT (“PICS”)

1. 本聲明不會限制資料當事人在《個人資料(私隱)條例》下所享有的權利。
2. 除非有關資料收集表格中注明為必要的個人資料，否則提供個人資料屬自願性質。如該注明為必要的個人資料未獲提供，將導致我們無法完成如下所述的目的。

### 目的

3. 使用資料當事人個人資料的目的將取決於資料收集的情況和背景，但我們認為的目的將包括下列所述：
  - (a) 管理、維持及營運我們與融資、貸款及收購貸款、退休規劃、保險及信貸支援業務相關的產品／服務／活動(「業務」)；
  - (b) 處理及評估任何涉及資料當事人的與我們業務相關的申請、要求、查詢或投訴；
  - (c) 提供涉及資料當事人的與我們業務相關的後續或持續的服務，包括但不限於提供資料、管理已發出的保單或擔保或已提供的貸款或信貸支援；
  - (d) 任何有關我們的業務的索賠或請求的目的，包括相關的核實及調查工作，而無論該索賠或請求是資料當事人提出的、或針對資料當事人的、或涉及資料當事人的；
  - (e) 偵查、調查及防止欺詐、罪行、不當行為或違規情況；
  - (f) 協助按揭證券公司集團的任何成員設計其產品／服務／活動；
  - (g) 為市場推廣、統計、精算、產品研發或其他目的進行調研及維持資料庫；
  - (h) 就本聲明所列任何目的，不時對所持有的與資料當事人有關的個人資料進行核對及核實第三方提供的資料和資訊；
  - (i) 評估任何來自或涉及資料當事人的與我們業務相關的日後的申請；
  - (j) 建立及維持資料當事人檔案及分類及業務營運模式，以及進行風險管理；
  - (k) 登記資料當事人及管理透過電訊或網上平台或流動應用程式而提供的業務；
  - (l) 進行核保、身份及信貸審查及債務追收；
  - (m) 向資料當事人提議、提供及促銷本公司、按揭證券公司集團的其他成員或我們的商業夥伴的業務(詳見以下「直接促銷中個人資料的使用及提供」部分)；
  - (n) 進行與資料當事人的商業合作(包括轉介或其他形式的合作)；
  - (o) 向資料當事人發送關於按揭證券公司集團任何成員的關於教育、消閒或其他活動的通訊及印刷品；
  - (p) 向資料當事人提供優惠以作客戶關係管理用途；
  - (q) 依照任何適用的法律、規則、規例、實務守則或指引的要求進行披露，或以此協助香港或其他地區的警方或其他政府或監管機構執法及調查；
  - (r) 遵守我們預期或一般須遵從的任何適用的司法管轄區的法律、監管要求及任何其他規則、指引或指令；
  - (s) 遵守為符合制裁或防止或偵測清洗黑錢、恐怖分子融資活動或其他非法或禁止的活動或行為而制訂的按揭證券公司集團內共用個人資料和資訊及／或其他個人資料和資訊使用而指定的任何責任、要求、政策、程序、措施或安排；
  - (t) 供我們的實際或潛在承讓人，或就我們對資料當事人享有權利的參與人或從屬參與人衡量有關轉讓、參與或從屬參與所涉交易；及
  - (u) 與上述任何目的直接有關的目的。

### 資料承轉人

4. 個人資料會予以保密，但取決於所適用的法律，我們可能就以上第3段所列的目的將其提供給以下各方(不論在香港境內或境外)：
  - (a) 按揭證券公司集團的任何成員；
  - (b) 資料當事人在香港或其他地區的任何經紀人、推薦人或介紹人；
  - (c) 任何聯名申請人或聯名借款人，及為資料當事人就我們的業務所承擔的責任擬提供或正在提供財務或信貸支援的人士；
  - (d) 任何參與按揭證券公司集團成員營運的有關我們業務的計劃的商業夥伴；
  - (e) 與任何有關本公司或按揭證券公司集團的任何成員提供的業務的索賠有關的任何人士，不論該索賠是資料當事人提出的、或針對資料當事人的、或涉及資料當事人的；
  - (f) 在香港或其他地區對按揭證券公司集團的任何成員有保密責任，並為其提供行政、審計、資料處理、文件管理、科技、通訊、存儲、支付或其他服務(包括直接促銷服務)的任何代理人、承辦商或第三方；
  - (g) 如適用，與我們的業務相關的任何承保人或再保險人(包括該再保險人的任何再保險人)或就我們的業務提供財務支援的任何實體；
  - (h) 任何由或將由業務獲取的資金來支付的估價方、醫療服務提供方或產品或服務的提供方；
  - (i) 信貸資料服務機構，或在涉及違約時，債務追收代理；
  - (j) 任何代理人、核數師、會計師、稅務顧問、律師、顧問或其他專業顧問；

**第七部分 收集個人資料聲明(「本聲明」)(續)**  
**PART VII PERSONAL INFORMATION COLLECTION STATEMENT (“PICS”) (CON’T)**

- (k) 香港或其他地區的任何法院、裁判院或行政、政府或監管機構，或執法機關(包括本地或外地的稅務機關); 及
- (l) 任何實際或潛在承讓人、受讓人、我們的權利或業務的參與人或從屬參與人。

**直接促銷中個人資料的使用及提供**

5. 我們擬：

- (a) 將我們持有的資料當事人的姓名、聯絡資料、業務組合資料、交易模式及行為、財務、就業或其他背景及人口統計數據不時用於直接促銷，而除非獲得資料當事人的同意或表示不反對，否則我們不能使用該等資料；及
- (b) 對以下類別的產品／服務／活動進行直接促銷：
  - (i) 保險、金融服務、退休規劃及相關產品／服務／活動；及
  - (ii) 獎賞、會員、聯名商品或禮遇計劃，及相關產品／服務／活動。

6. 以上產品／服務／活動可能由我們及／或下列人士提供或推薦：

- (a) 按揭證券公司集團的任何成員；
- (b) 第三方金融機構及承保人；及
- (c) 第三方獎賞、會員、聯名商品或禮遇計劃的供應商或營運商。

7. 除促銷上述產品／服務／活動外，我們亦可能將以上第5(a)段所列的資料當事人的資訊提供予以上第6段所列的全部或任何人士，以供該等人士在促銷該等產品／服務／活動中使用，而我們為此用途須獲得資料當事人書面同意(包括表示不反對)。

**如資料當事人不希望我們如上述使用其個人資料或將其個人資料提供予其他人士作直接促銷用途，資料當事人可通知我們行使其選擇權拒絕促銷。**

**查閱及改正資料的權利**

8. 資料當事人可以書面形式向我們的個人資料保障主任提出查閱或改正其個人資料的要求，其通訊地址為：香港九龍觀塘偉業街180號Two Harbour Square 19樓。

9. 我們可就處理任何查閱資料的要求收取不超乎適度的費用。

本聲明中，除非文義不許可或另有所指，

「本公司」、「我們」及「我們的」指收取相關個人資料的文件中所述的公司(其為按揭證券公司集團成員)及其繼承人及承讓人；

「資料當事人」就個人資料而言，指屬該個人資料的當事人的個人；及

「按揭證券公司集團」指香港按揭證券有限公司、其附屬公司及附屬企業。

**注意**

- (a) 本聲明可由我們不時修改或更新。
- (b) 資料當事人使用或繼續使用或參加任何我們的產品／服務／活動、提供其本人資料、或向我們提供服務或與我們簽訂商業或其他合同安排時，資料當事人被視為已經接受及同意本聲明所陳述的安排及受相關條款約束。

由本公司刊發

## 第七部分 收集個人資料聲明(「本聲明」)(續) PART VII PERSONAL INFORMATION COLLECTION STATEMENT (“PICS”) (CON’T)

1. Nothing in this PICS shall limit the rights of data subjects under the Personal Data (Privacy) Ordinance.
2. The supply of personal data is voluntary except for the personal data specified in the relevant data collection form as obligatory. Failure to supply such obligatory data will prevent us from fulfilling the purposes described below.

### PURPOSES

3. The purposes for which personal data of a data subject may be used will vary depending on the circumstances and context of its collection, but the purposes perceived by us will include the following:
  - (a) administering, maintaining and operating our products/services/events relating to our financing, loans and loans acquisition, retirement planning, insurance and credit support businesses (**Services**);
  - (b) processing and evaluating any applications, requests, enquiries or complaints involving the data subject relating to our Services;
  - (c) providing subsequent or ongoing services in relation to our Services involving the data subject, including but not limited to providing information, administering the policies or guarantees issued or the loans or credit supports granted;
  - (d) any purposes in connection with any claim or requests made by or against or otherwise involving the data subject in respect of our Services, including the related verification and investigation work;
  - (e) detecting, investigating and preventing fraud, crime, wrongdoing or irregularity;
  - (f) facilitating design of products/services/events of any members of the HKMC Group;
  - (g) conducting research and maintaining databases for marketing, statistical, actuarial, product development or other purposes;
  - (h) matching any personal data held which relates to the data subject from time to time for any of the purposes listed herein and verifying data or information provided by any third party;
  - (i) creating and maintaining data subject profile and segregation and business model and performing risk management;
  - (j) evaluating any future application by or involving the data subject in relation to our Services;
  - (k) registering data subjects and administering the provision of Services through telecommunications or online channels, or mobile applications;
  - (l) conducting underwriting, identity and credit checks and debt collection;
  - (m) offering, providing and marketing to the data subject the Services of the Company, other members of the HKMC Group or our business partners (see “Use and Provision of Personal Data in Direct Marketing” section below)
  - (n) carrying out business co-operation with the data subject (including referral or other modes of co-operation);
  - (o) sending to the data subject newsletters and printed materials about educational, recreational or other events of any member of the HKMC Group;
  - (p) providing benefit to the data subject for relationship management purposes;
  - (q) making disclosures as required by any applicable law, rules, regulations, codes of practice or guidelines or for assisting law enforcement purposes, investigations by police or other government or regulatory authorities in Hong Kong or elsewhere;
  - (r) complying with the laws, regulatory requirements and any other rules, guidelines or orders of any applicable jurisdiction which we are expected to or would normally comply with;
  - (s) complying with any obligations, requirements, policies, procedures, measures or arrangements for sharing personal data and information within the HKMC Group and/or any other use of personal data and information for compliance with sanctions or prevention or detection of money laundering, terrorist financing or other unlawful or prohibited activities or conduct;
  - (t) enabling an actual or potential assignee of us, or participant or sub-participant of our rights in respect of a data subject to evaluate the transaction intended to be the subject of the assignment, participation or sub-participation; and
  - (u) purposes directly relating to any of the above.

### TRANSFEREES

4. Personal data will be kept confidential but, subject to the provisions of any applicable law, may be provided to the following parties (within or outside Hong Kong) for the purposes outlined in paragraph 3 above:
  - (a) any member of the HKMC Group;
  - (b) any broker, referrer or introducer of the data subject in Hong Kong or elsewhere;
  - (c) any co-applicant or co-borrower, and any person proposing to provide or providing any financial or credit support in relation to a data subject’s obligations in connection with our Services.
  - (d) any business partner which has participated in programmes operated by any member of the HKMC Group in relation to our Services;
  - (e) any person in connection with any claims made by or against or otherwise involving the data subject in respect of any Services provided by the Company or any member of the HKMC Group;

- (f) any agent, contractor or third party, which provides administrative, audit, data-processing, document management, technology, telecommunication, storage, payment or other services (including direct marketing services) to any member of the HKMC Group in Hong Kong or elsewhere under a duty of confidentiality to the same;
- (g) where applicable, any insurer or reinsurer (including any re-insurers of such reinsurer) of, or any entity providing financial support in relation to our Services;
- (h) any valuer, medical service provider or an provider of products or services which is, or will be paid by funds drawn from the Services;
- (i) credit reference agencies or, in the event of default, debt collection agencies;
- (j) any agent, auditor, accountant, tax adviser, lawyer, consultant or other professional adviser;
- (k) any court, tribunal or administrative, governmental or regulatory body or enforcement agency in Hong Kong or elsewhere (including local or foreign tax authorities); and
- (l) any actual or potential assignee, transferee, participant or sub-participant of our rights or business.

#### USE AND PROVISION OF PERSONAL DATA IN DIRECT MARKETING

5. We intend to:

- (a) use the names, contact details, Services portfolio information, transaction pattern and behaviour, financial, employment or other background and demographic data of a data subject held by us from time to time for direct marketing and we cannot use such data unless we have received the data subject's consent or indication of no objection; and
- (b) conduct direct marketing in relation to the following classes of products/services/events:
  - (i) insurance, financial services, retirement planning and related products/services/events; and
  - (ii) reward, loyalty, co-branding or privilege programmes, and related products/services/events.

6. The above products/services/events may be provided or solicited by us and/or:

- (a) any member of the HKMC Group;
- (b) third-party financial institutions and insurers; and
- (c) third-party reward, loyalty, co-branding or privilege programme providers or operators.

7. In addition to marketing the above products/services/events, we may provide a data subject's information described in paragraph 5(a) to all or any of the persons described in paragraph 6 above for use by them in marketing those products/services/events, and we require the data subject's written consent (which includes an indication of no objection) for that purpose.

***If a data subject does not wish us to use or provide to other persons his/her personal data for use in direct marketing as described above, the data subject may exercise his/her opt-out right by notifying us.***

#### RIGHTS OF ACCESS AND CORRECTION

8. A data subject may request access to or correction of his/her personal data by making a request in writing to our Data Protection Officer at 19/F, Two Harbour Square, No. 180 Wai Yip Street, Kwun Tong, Kowloon, Hong Kong.

9. We may charge a fee which is not excessive for processing any data access request.

In this PICS, unless the context does not permit or otherwise requires,

**Company, we, our and us** mean the company named in the document collecting the relevant data (which is a member of the HKMC Group) and its successors and assigns;

**data subject**, in relation to personal data, means the individual who is the subject of the personal data; and

**HKMC Group** means The Hong Kong Mortgage Corporation Limited, its subsidiaries and subsidiary undertakings.

#### Notes

- (a) This PICS may from time to time be revised or updated by us.
- (b) By using or continuing to use or participate any of our products/services/events, providing information about the data subject himself/herself, or providing services to or entering into commercial or other contractual arrangements with us, a data subject is deemed to have accepted and agreed to the arrangements set out in and to be bound by the provisions herein.