香港年金
HKMC ANNUITY

更改用作收取保證每月年金金額銀行賬戶申請表
REQUEST FORM FOR CHANGE OF BANK ACCOUNT FOR RECEIVING GUARANTEED MONTHLY ANNUITY PAYMENTS

保單編號 Policy Number	

HKMCA Ref No.: _____

注意事項：

1. 請以**正楷**填寫本表格並將已填妥之表格連同附有賬戶持有人姓名及賬戶號碼的銀行存摺或最近3個月內發出的銀行月結單副本提交至香港年金有限公司(「**香港年金公司**」)以下地址。
2. 切勿在空白或尚未填妥之表格上簽署，或留空任何部分。
3. 如有任何更改或修正，敬請在更改或修正的位置旁簽署作實。
4. 如香港年金公司在簽署日期起計逾10天後收到閣下的表格，香港年金公司保留要求閣下簽署並提交新的表格之權利。
5. 保單持有人或其法定授權人(如適用)之簽署樣式必須與香港年金公司之記錄相符。
6. 如閣下希望更改銀行戶口申請能於下一個保單週月前生效，請於下一個保單週月前最少15天內提交本表格及相關文件(如適用)至香港年金公司，否則有關更改銀行戶口之申請將延後生效。
7. 保單持有人必須為賬戶持有人。
8. 香港年金公司有權隨時更新此表格，如閣下之申請未能符合有關規定，香港年金公司可決定接受或拒絕閣下之申請。
9. 如申請使用中國內地銀行賬戶收取年金，請先參閱第二部分《聲明(適用於使用中國內地銀行賬戶收取年金)》所載之條款、條件、風險及免責聲明，如閣下對此聲明的內容有任何疑問，請尋求獨立法律及／或財務意見。
10. 如有任何查詢，歡迎透過以下途徑與我們聯絡：

客戶服務熱線	：	(852) 2512-5000
客戶服務電郵	：	cs@hkmca.hk
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)

CHGBANKA

IMPORTANT NOTES：

1. Please complete this form in **BLOCK LETTERS** and return the completed form together with a photocopy of the bank passbook or bank statement (issued in the last 3 months) of your personal account showing your name and bank account number to HKMC Annuity Limited ("**HKMCA**") at the address below.
2. Do not sign on a blank or incomplete form or leave any space blank.
3. Any changes or amendments should be counter-signed by you.
4. If the form is received by the HKMCA more than 10 days after the signing date, the HKMCA reserves the right to request you to sign and submit a new form.
5. The signature(s) of the Policyowner or his/her lawful attorney (if applicable) in this form shall correspond to the record of the HKMCA.
6. If you wish the change of bank account be effective by the next monthiversary, please submit this form together with the relevant documents (if applicable) to the HKMCA at least 15 days prior to the next policy monthiversary, otherwise the effective date of such change will be delayed.
7. Policyowner must be the bank account holder.
8. The HKMCA shall have the right to update this form from time to time and to accept or reject the request submitted by you if you fail to fulfill the requirements.
9. For applications to use a Chinese Mainland Bank Account to receive annuity payments, please first read the terms, conditions, risks and disclaimers set out under Part II – Declaration (Applicable to the use of Chinese Mainland Bank Accounts for Receiving Annuity Payment). If you have any question about the content of this Declaration, please seek independent legal and/or financial advice.
10. If you have any enquiries, please contact us through the following channels:

Customer Service Hotline	:	(852) 2512-5000
Customer Service Email	:	cs@hkmca.hk
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 保單持有人資料
PART I POLICYOWNER'S INFORMATION

	姓 Surname	名 First and Middle Name
姓名 Name		

第二部分 更改銀行賬戶資料
PART II CHANGE OF BANK ACCOUNT DETAILS

1. 本人要求更改以下銀行賬戶為收取上述保單之保證每月年金金額的指定銀行賬戶。
2. 本人明白當有關之更改被香港年金公司接納，香港年金公司會於接納此更改後的下一個保單週月起支付保證每月年金金額至本人指定的新銀行賬戶。

1. I would like to request to change to the following bank account to receive the guaranteed monthly annuity payments for the above policy.
2. I understand that once this change is accepted by the HKMCA, the HKMCA will pay the guaranteed monthly annuity payments into my new designated bank account from the next policy monthiversary after the change is accepted by the HKMCA.

限選一項 Please tick one box only:	☐ 本港銀行賬戶 # Local Bank Account #	☐ 中國內地銀行賬戶 * Chinese Mainland Bank Account *
銀行名稱 Bank Name		
銀行賬戶持有人之英文姓名（必須與銀行紀錄一致） English Name of Bank Account Holder (Must match the name registered with the bank)		
銀行賬戶號碼 Bank Account Number	銀行編號 Bank Number — 分行編號 Branch Number — 賬戶號碼 Account Number	

重要事項：

\# 適用於本港銀行賬戶
- 只接受經香港銀行開設的港元賬戶。

* 適用於中國內地銀行賬戶
- 只接受親臨中國內地中國銀行開立的 I 類人民幣賬戶。
- 中國內地銀行賬戶必須由保單持有人的個人名義持有。不接受聯名賬戶。
- 銀行賬戶號碼只需在「賬戶號碼」一欄填寫完整銀行賬戶號碼。

Important Notes:

\# For Local Bank Account
- Only Hong Kong Dollar bank accounts maintained with banks in Hong Kong will be accepted.

* For Chinese Mainland Bank Account
- Only Type I Renminbi accounts opened in person at a Bank of China branch in the Chinese Mainland will be accepted.
- The Chinese Mainland Bank Account must be held in the sole name of the Policyowner. Joint bank accounts are not accepted.
- For bank account number, please provide the full bank account number in "Account Number" area.

聲明（適用於使用中國內地銀行賬戶收取年金）
DECLARATION (APPLICABLE TO THE USE OF CHINESE MAINLAND BANK ACCOUNTS FOR RECEIVING ANNUITY PAYMENT)

本人作為保單持有人，確認已閱讀、明白並同意下列全部有關透過中國內地銀行賬戶（如本表格所指定）收取年金的條款、條件、風險及免責聲明，並確認香港年金公司乃按照本人作出的同意、陳述、保證及承諾而向中國銀行（香港）有限公司或香港年金公司另行通知本人的指定銀行（「服務銀行」）提交跨境年金支付服務指示。

收款賬戶資料－本人確認為收取年金而指定之中國內地銀行賬戶是以本人的個人名義持有（並非聯名賬戶），且本人已提供該銀行（「收款銀行」）之銀行名稱、賬戶號碼，以及與該銀行紀錄相符之賬戶持有人姓名。

陳述及保證－本人聲明及保證：(i)本人確認所提供之一切資料均屬真實、準確及完整；(ii)本人為保單年金之合法受益人；(iii)本人所指定之銀行賬戶為有效、合法及可接收由香港匯往中國內地之跨境人民幣匯款之銀行賬戶；及(iv)在中國內地收取年金符合中華人民共和國（「中國」）所有適用之法律、規例及外匯管制規定。

貨幣兌換及匯率－本人確認年金將以港元支付，而服務銀行或其代理銀行將按交易處理時之即時匯率，將款項兌換為人民幣。本人明白匯率於實時情況下或有波動，而最終存入本人銀行賬戶之人民幣金額，可能與任何估算或預期有所差異。本人接受與匯率波動有關之一切風險，且香港年金公司及服務銀行概不須就因該等波動所引致之任何損失承擔責任。

費用及收費－本人同意所有處理費、匯率差價、中轉銀行收費及與跨境付款相關之其他費用，均由本人承擔。該等費用可自匯款金額中扣除，而最終存入本人銀行賬戶之已兌換金額可能少於原年金之港元金額之價值。香港年金公司不會就任何該等費用作出退款或承擔責任。

合規及資料處理－本人確認匯款及有關個人資料使用受香港及中國內地之法律、規例及反洗錢要求，以及服務銀行跨境付款服務及有關個人資料使用之條款及條件（包括其營運規則，並可不時修訂）所規限。本人承諾向香港年金公司、服務銀行或任何監管機構提供其可能要求之任何額外資料或文件。本人之個人資料（包括但不限於匯款收款人的姓名、住址、年金資料及銀行賬戶資料）以及所有與年金申請相關的文件及／或保單合約，其中包括付款和銀行交易記錄的相關詳細資訊可不時為處理該匯款之目的而披露予服務銀行及其服務供應商，並可轉移至本人在中國內地或其他司法管轄區所開設的收款銀行，亦可按適用法律或法律程序或對匯款服務具有管轄權的其他司法管轄區（包括但不限於中國）的指引及要求，向監管機構、法院或政府機關披露。本人同意就該等資料的處理及披露，並明白香港年金公司將根據本人的同意向服務銀行提交匯款指示。

銀行酌情權及不作保證－本人確認服務銀行擁有接受、拒絕、延遲或撤銷任何付款指示的絕對酌情權，亦明白香港年金公司不能控制或干預服務銀行之決定。香港年金公司及服務銀行均不保證任何匯款將於任何特定時間成功處理或入賬。倘若服務銀行或收款銀行拒絕該匯款，或該匯款因任何原因延誤或退回，本人須自行承擔因此而產生之一切費用，包括退回費用及匯率損失。

客戶核實責任－本人確認核實指定銀行賬戶是否合資格接收來自香港之跨境匯款，並遵守收款銀行或適用法規及指引所施加之任何要求，乃本人單方面之責任。本人明白，倘若本人未有進行該核實或收款銀行拒絕接納該匯款，香港年金公司及服務銀行概不承擔任何責任。

彌償及責任限制－本人同意就以下事項，向香港年金公司及其董事、職員、僱員及代理人作出彌償：(i)因本人提供之資料有任何不準確或不完整而引致或與之相關之任何申索、損失、責任、費用及支出（包括法律費用）；(ii)因本人違反於本確認中所作之任何陳述、保證或承諾；(iii)因服務銀行或收款銀行拒絕、延誤、撤銷或退回款項；或(iv)與匯款有關之任何監管行動或調查。香港年金公司（在法律允許的情況下）對因該匯款服務所引致之任何間接、附帶、特殊或相應而生之損害概不負責，包括但不限於匯率損失、銀行費用或延誤。

服務終止－本人確認香港年金公司保留隨時修訂、暫停或終止本匯款服務之權利，無須作事先通知，亦無須就此承擔任何責任。於服務終止後，香港年金公司再無繼續處理或退回款項之義務。

完整協議－本人同意本申請連同任何經引用而納入之條款及條件，均構成跨境年金支付服務之完整協議。除非以書面形式明確載於本表格內，香港年金公司或其代表所作之任何口頭陳述或聲明均不具約束力。

知悉及確認－本人確認已獲建議就此申請尋求獨立法律或財務意見，而本人已作出該等諮詢，或自願放棄尋求該等意見之權利。本聲明連同任何以引用方式而納入的文件，均構成本人與香港年金公司之間關於跨境年金支付服務的完整協議，並受香港特別行政區法律管轄。

聲明（適用於使用中國內地銀行賬戶收取年金）（續）
DECLARATION (APPLICABLE TO THE USE OF CHINESE MAINLAND BANK ACCOUNTS FOR RECEIVING ANNUITY PAYMENT) (CON'T)

I, being the Policyowner, confirm that I have read, understand, and agree to all the terms, conditions, risks and disclaimers set out below in relation to receiving annuity payments via the Chinese Mainland Bank Account (as specified in this form) and acknowledge that the HKMCA relies on my consent, representations, warranties, and undertakings when submitting payment instructions to Bank of China (Hong Kong) Limited or another bank appointed by us with notice to you ("Servicing Bank").

Receiving Account Details. I confirm that the Chinese Mainland Bank Account designated for receiving annuity payments is held in my sole name (no joint bank account) and I have provided the bank name, account number, and exact bank account holder name as registered with that bank ("Receiving Bank").

Representations and Warranties. I represent and warrant that (i) all information provided in this confirmation is true, accurate, and complete; (ii) I am the lawful beneficiary of the annuity payments under the insurance policy; (iii) the designated account is active, valid, and enabled to receive cross-border Renminbi remittances from Hong Kong; and (iv) the receipt of annuity payments in Chinese Mainland complies with all applicable laws, regulations, and foreign exchange controls of the People's Republic of China ("PRC").

Currency Conversion and Exchange Rate. I acknowledge that the annuity payment will be made in Hong Kong Dollars ("HKD") and that the Servicing Bank or its correspondent bank will convert the funds into Renminbi ("RMB") using the spot exchange rate determined by the processing bank at the time of the transaction. I understand that exchange rates fluctuate in real time, and the final RMB amount credited to my account may differ from any estimate or expectation. I accept all risks associated with exchange rate fluctuations, and neither the HKMCA nor the Servicing Bank shall be liable for any losses arising from such fluctuations.

Fees and Charges. I agree that all handling fees, exchange rate margins, correspondent bank charges, and other costs related to the cross-border payment shall be borne by me. Such fees may be deducted from the remittance amount, and the final credited amount may be less than the original HKD amount converted. The HKMCA shall not reimburse or bear any such fees.

Compliance and Data Processing. I acknowledge that the payment and the use of my personal data is subject to the laws, regulations, and anti-money laundering requirements of Hong Kong and Chinese Mainland, and the terms and conditions (including the operating rules) of the Servicing Bank's cross-border payment service, and the Servicing Bank's Data Policy Notice (as amended from time to time). I undertake to provide any additional information or documentation as may be requested by the HKMCA, the Servicing Bank, or any regulatory authority. My personal data (including but not limited to name, residential address, annuity information and bank account details of remittance beneficiary) and all relevant annuity application documents and/or contracts which shall contain relevant details of payment and banking transaction record may be disclosed to the Servicing Bank and its service providers for the purpose of processing the payment from time to time, may be transferred to the Receiving Bank where I hold a bank account in the Chinese Mainland or other jurisdictions, and disclosed to regulatory authorities, courts, or government agencies as required by applicable law or legal process or guidelines of any country with jurisdiction over the remittance transactions including but not limited to the PRC. I consent to such data processing and disclosure, and I understand that the HKMCA relies on this consent when submitting payment instructions to the Servicing Bank.

Bank Discretion and No Guarantee. I acknowledge that the Servicing Bank has absolute discretion to accept, reject, delay, or reverse any payment instruction, and that the HKMCA has no control over the Servicing Bank's decision. Neither the HKMCA nor the Servicing Bank guarantees that any payment will be successfully processed or credited by any particular time. If the Servicing Bank or my Receiving Bank rejects the payment, or if the payment is delayed or returned for any reason, I shall bear all resulting costs, including return fees and exchange rate losses.

Customer's Responsibility to Verify. I acknowledge that it is my sole responsibility to confirm with my Receiving Bank that the designated account is eligible to receive cross-border RMB remittances from Hong Kong and to comply with any requirements imposed by my Receiving Bank or by applicable regulations and guidelines. I understand that if I fail to verify or if my Receiving Bank refuses to accept the payment, the HKMCA and the Servicing Bank shall have no liability.

Indemnity and Limitation of Liability. I agree to indemnify and hold harmless the HKMCA and its directors, officers, employees, and agents from and against (i) any claims, losses, liabilities, costs, and expenses (including legal fees) arising out of or in connection with any inaccuracy or incompleteness in the information I provide; (ii) any breach of my representations, warranties, or undertakings in this confirmation; (iii) any rejection, delay, reversal, or return of a payment by the Servicing Bank or my Receiving Bank; or (iv) any regulatory action or investigation relating to my payment. To the maximum extent permitted by law, the HKMCA shall not be liable for any indirect, incidental, special, or consequential damages arising from the payment service, including but not limited to exchange rate losses, bank fees, or delays.

聲明（適用於使用中國內地銀行賬戶收取年金）（續）
DECLARATION (APPLICABLE TO THE USE OF CHINESE MAINLAND BANK ACCOUNTS FOR RECEIVING ANNUITY PAYMENT) (CON'T)

Termination of Service. I acknowledge that the HKMCA reserves the right to amend, suspend, or terminate this payment service at any time without prior notice and without any liability resulting therefrom, and upon termination the HKMCA shall have no further obligation to process or return payments.

Entire Agreement. I agree that this application, together with any terms and conditions incorporated by reference, constitutes the entire agreement regarding the cross-border annuity payment service. Any verbal statements or representations made by the HKMCA or its representatives are not binding unless expressly set out in this written application.

Acknowledgment. I confirm that I have been advised to seek independent legal or financial advice regarding this arrangement and either have done so or voluntarily waive such advice. This confirmation, together with any documents incorporated by reference, constitutes the entire agreement between me and the HKMCA regarding the annuity payment service and shall be governed by the laws of the Hong Kong Special Administrative Region.

SIGN

保單持有人簽署 **Signature of the Policyowner**	日期（日／月／年） **Date (DD/MM/YYYY)**

若本表格是由保單持有人之法定授權代表簽署，請填寫此欄。
Please complete this part if this form is signed by the lawful attorney of the Policyowner.

SIGN

保單持有人之法定授權代表簽署 **Signature of Lawful Attorney of Policyowner**	保單持有人之法定授權代表姓名 **Name of Lawful Attorney of Policyowner**	日期（日／月／年） **Date (DD/MM/YYYY)**

如保單持有人或其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表格。
Where any Policyowner or his/her lawful attorney uses name chop or fingerprint as signature, a Witness is required to witness the signing of this form.

聲明（適用於使用中國內地銀行賬戶收取年金）（續）
DECLARATION (APPLICABLE TO THE USE OF CHINESE MAINLAND BANK ACCOUNTS FOR RECEIVING ANNUITY PAYMENT) (CON'T)

收集個人資料聲明（見證人用）

1. 閣下所提供的個人資料僅用作核實閣下之見證人身分及記錄保存之用；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。
2. 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送至香港九龍柯士甸道西一號環球貿易廣場65樓，向按揭證券公司集團的個人資料保障主任提出。

Personal Information Collection Statement (for Witness only)

1. 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.
2. You have the right to request access to and correction of your personal data held by the HKMCA. Your request can be made in writing to the Data Protection Officer of the HKMC Group at Level 65, International Commerce Centre, 1 Austin Road West, 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)
見證人與保單持有人／法定授權代表的關係 Relationship between Witness and Policyowner/Lawful Attorney ☐ 親屬 Relative ☐ 朋友 Friend ☐ 其他，請註明 Other, please specify _____	身份證明文件類別 Type of Identification Document ☐ 香港身份證 Hong Kong Identity Card ☐ 護照 Passport ☐ 其他 Other _____	身份證明文件號碼 Identification Document Number _____

第三部分 聲明
PART III DECLARATION

1. 本人確認已閱讀、明白及同意本表格的注意事項並簽署作實。
2. 本人進一步確認已閱讀及明白香港年金公司的收集個人資料聲明。有關最新版本的收集個人資料聲明，可於www.hkmca.hk查閱或下載，或向香港年金公司索取。
3. 本人明白及同意直至所有有關文件收妥前本申請將不會生效，本申請是須經香港年金公司接納後方可作實。

1. I confirm that, by signing below, I have read, understand and agreed to the Important Notes stated in this form.
2. I further confirm that I have read and understand the Personal Information Collection Statement ("PICS") of the HKMCA. For the latest version of the PICS, it can be viewed or downloaded from www.hkmca.hk or is made available upon request.
3. I understand and agree that the request for change(s) shall not take effect until any required documents are submitted in full and the request is endorsed by the HKMCA.

第四部分 簽署
PART IV SIGNATURES

SIGN

保單持有人簽署 Signature of the Policyowner	日期（日／月／年） Date (DD/MM/YYYY)

若本表格是由保單持有人之法定授權代表簽署，請填寫此欄。
Please complete this part if this form is signed by the lawful attorney of the Policyowner.

SIGN

保單持有人之法定授權代表簽署 Signature of Lawful Attorney of Policyowner	保單持有人之法定授權代表姓名 Name of Lawful Attorney of Policyowner	日期（日／月／年） Date (DD/MM/YYYY)

如保單持有人或其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表格。
Where any Policyowner or his/her lawful attorney uses name chop or fingerprint as signature, a Witness is required to witness the signing of this form.

收集個人資料聲明（見證人用）

1. 閣下所提供的個人資料僅用作核實閣下之見證人身分及記錄保存之用；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。
2. 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送至香港九龍柯士甸道西一號環球貿易廣場65樓，向按揭證券公司集團的個人資料保障主任提出。

Personal Information Collection Statement (for Witness only)

1. 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.
2. You have the right to request access to and correction of your personal data held by the HKMCA. Your request can be made in writing to the Data Protection Officer of the HKMC Group at Level 65, International Commerce Centre, 1 Austin Road West, 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)
見證人與保單持有人／法定授權代表的關係 Relationship between Witness and Policyowner/Lawful Attorney ☐ 親屬 Relative ☐ 朋友 Friend ☐ 其他，請註明 Other, please specify _____	身份證明文件類別 Type of Identification Document ☐ 香港身份證 Hong Kong Identity Card ☐ 護照 Passport ☐ 其他 Other _____	身份證明文件號碼 Identification Document Number _____