

PICS 2020Jun (CRS)

(Nov 2024)

Financial Needs Analysis (for Policyholder)**財務需要分析表格 (供投保人填寫)**

Note: Please answer all questions in this form. Do NOT sign on this form if any questions are unanswered and have not been crossed out.

註：請回答財務需要分析表格內的所有問題。如有任何未回答的問題未被刪去，請不要在表格上簽署。

YOUR PROFILE 您的個人資料

Name in English 英文姓名	Name in Chinese (if any) 中文姓名 (如有)
Gender 性別	Date of Birth 出生日期
Marital Status 婚姻狀況	Number of dependents 受供養人數目
Occupation 職業	Contact number 聯絡電話
Education Level 教育程度	
<input type="checkbox"/> Primary 6 or below 小六或以下	<input type="checkbox"/> Completed Secondary 中學畢業
<input type="checkbox"/> University or above 大學或以上	<input type="checkbox"/> Others 其他 _____

YOUR FINANCIAL INFORMATION 您的財務資料

Average Monthly Income in the past 2 years [A] (Examples: personal income and other types of income such as dividends, interest, rental income, etc.) 過去兩年的每月平均收入 (例：個人收入及其他類型的收入，例如股息，利息，租金收入等)	USD 美元
Average Monthly Expenses in the past 2 years [B] (Examples: living expenses, repayment of loans, rent/mortgage redemption, existing life and general insurance premiums, etc.) 過去兩年的每月平均開支 (例：生活支出，貸款還款，租金／按揭還款，現有人壽及一般保險保費等)	USD 美元
Monthly Repayment Amount of Existing Premium Financing (if applicable) [C] = [Y] + [Z] 每月的現有保費融資還款額 (如適用)	USD 美元
Monthly Interest Repayment Amount [Y] 每月的保費融資利息還款額	USD 美元
Monthly Principal Repayment Amount [Z] 每月的保費融資本金還款額	USD 美元
Remaining Repayment Tenor of Existing Premium Financing (if applicable) [D] 剩餘的現有保費融資還款年期 (如適用) Note: Take the longest tenor if having more than one premium financing facility(ies) 註：如持有多於一項保費融資安排，以最長年期為準	Year 年
Monthly Disposable Income 每月可動用收入 [E] = [A] - [B] - [C]	USD 美元

ASSETS AND LIABILITIES 資產及負債

<p>Liquid Assets [F] 流動資產</p> <p>Note: Liquid assets are assets which can be easily turned into cash. Real estate, coin collection and artwork are not considered to be liquid assets. 註: 流動資產是指可以容易變為現金的資產。物業、錢幣收藏及藝術品均不被視為流動資產。 Examples: cash, savings in bank accounts & money market accounts, actively traded stocks, bonds and mutual funds, US Treasury bills, etc. 例: 現金、銀行賬戶及貨幣市場賬戶存款、交投活躍的股票、債券及互惠基金、美國國庫債券等</p>	USD 美元
<p>Other Personal Loans and Debts [G] 其他個人貸款及債務</p> <p>Examples: credit card loan, outstanding investment financing facilities, overdraft and any other personal loans, etc. 例: 信用卡貸款、未償還的投資融資貸款、透支及任何其他個人貸款等</p>	USD 美元
<p>Outstanding Premium(s) of Pending Application(s)* and Existing Life Insurance to be paid by Liquid Assets [H] 以流動資產繳付正在投保*及現有人壽保單的保費</p> <p>* Pending Application(s) refers to any life insurance application(s) other than this application that you have submitted to other insurer(s) and/or HSBC Life and the premium(s) of which will be paid by you. 正在投保保單是指除本申請外您的任何已提交予其他保險公司及／或滙豐保險及將由您繳付保費的其他人壽保單申請。</p>	USD 美元
<p>Outstanding Repayment Amount of Existing Premium Financing (if applicable) [I] = [C] x 12 x [D] 剩餘的保費融資還款額 (如適用)</p>	USD 美元
Net Liquid Assets 淨流動資產 [K] = [F] – [G] – [H] – [I]	USD 美元
<p>Outstanding Principal of Existing Premium Financing (if applicable) [J] 未償還的保費融資金 (如適用)</p>	USD 美元

YOUR GOALS 您的目標

1. What are your objectives for seeking to purchase an insurance product? (tick one or more)

閣下選購保險產品的目標為何? (勾選一項或多項)

☐ a) Financial protection against adversities (e.g. death, accident, disability etc)

為應付不時之需提供財務保障(例如:身故,意外,殘疾等)

☐ b) Preparation for health care needs (e.g. critical illness, hospitalization etc)

為應付醫療保健需要(例如:危疾,住院等)

☐ Critical Illness 危疾

☐ Medical Indemnity 醫療賠償

☐ Long Term Care 長期護理

☐ c) Providing regular income in the future (e.g. retirement income etc)

為未來提供定期的收入(例如:退休收入等)

☐ d) Saving up for the future (e.g. child education, retirement etc)

為未來需要作儲蓄(例如:子女教育,退休等)

☐ e) Investment 投資

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)

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)

☐ 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

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 (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

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 do not want to choose or manage different investment options/investment choices, if available, under an insurance product

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)。

☐ f) Others 其他 (Please specify 請說明_____)

TOTAL PROTECTION AND SAVINGS NEEDS

2a) Life Protection needs 人壽保障需要

If you have selected "Financial protection against adversities" or "Others" (a protection-related objective) as one of your objective(s) of buying an insurance product in question 1, please answer the below question. (Please choose only one option)

如閣下於上述問題 1 中選擇「為應付不時之需提供財務保障」或「其他」(保障的相關目標)作為選購保險產品的其中一個目標，請回答以下問題。(請只選擇一項)

☐ The target life protection amount for the proposed Life Insured in this life insurance application is 這份人壽保險申請中的準受保人的目標人壽保障金額為 US\$ 美元 _____.

☐ I wish to go through an evaluation to determine the life protection amount for the proposed Life Insured in this life insurance application:

本人希望透過進行評估以得出這份人壽保險申請中的準受保人的人壽保障金額

[Note: Please conduct this evaluation for vulnerable customer.]

[註：請為特別關顧的客戶進行此評估]

Evaluation 評估	US\$ 美元
Family protection (e.g. living expenses of dependents, etc.) 家庭保障(例：受供養人的生活開支等)	
Liabilities 負債	+
Assets 資產	-
Existing life insurance coverage, including group insurance benefits, etc. 現有人壽保障包括團體人壽保障等	-
Protection amount I am looking for is estimated to be 本人尋求的保障金額估算為	=

Target life protection amount for the proposed Life Insured in this life insurance application is estimated to be 這份人壽保險申請中的準受保人的目標人壽保障金額約為 US\$ 美元 _____.

2b) Critical Illness Protection Needs 危疾保障需要

If you have selected "Preparation for health care needs – Critical Illness" as one of your objective(s) of buying an insurance product in question 1, please answer the below question.

如閣下於上述問題 1 中選擇「為應付醫療保健需要 – 危疾」作為選購保險產品的其中一個目標，請回答以下問題。

The target critical illness protection amount for the life insured in this life insurance application is 這份人壽保險申請中的準受保人目標危疾保障金額為 US\$ 美元 _____.

2c) Savings Needs 儲蓄需要

If you have selected "Providing regular income in the future" **or** "Saving up for the future" **or** "Investment" **or** "Others" (a wealth accumulation-related objective) as one of your objective(s) of buying an insurance product in question 1, please answer the below question. (Please choose only one option)

如閣下於上述問題 1 中選擇「為未來提供定期的收入」；或「為未來需要作儲蓄」；或「投資」；或「其他」(財富增值的相關目標)作為選購保險產品的其中一個目標，請回答以下問題。(請只選擇一項)

☐ My target saving amount on (_____ years) to be addressed by this life insurance application is 本人(於_____年)透過這份人壽保險申請達致的目標儲蓄金額為 US\$ 美元 _____.

☐ I do not have a specific target saving amount, but I would like to use the total amount of premium payment for savings purpose. 本人沒有一個特定預期要達到的儲蓄金額，但本人會用繳付保費的總金額作儲蓄之用。

3. What is your target benefit/protection period/expected timeframe for meeting the target amount for insurance policy? (tick one)

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)

☐ < 1 year 年

☐ 1-5 years 年

☐ 6-10 years 年

☐ 11-15 years 年

☐ 16-20 years 年

☐ > 20 Years 年

☐ Whole of life 終身

4. Your ability and willingness to pay insurance premiums 閣下繳付保費的能力及意願：

For how long are you able and willing to pay for an insurance policy? (tick one)

閣下能夠及願意為保單支付保費的年期為？(勾選一項)

☐ 2-5 years 年 ☐ 6-10 years 年 ☐ 11-15 years 年 ☐ 16-20 years 年

☐ > 超過 20 Years 年

☐ Whole of life 終身

☐ A single payment 一次性付款

5. My planned/actual retirement age is 本人預期／實際退休年齡為：_____

6. Will the premium payment term go beyond your planned/actual retirement age? 保費繳付期將超越您的預期／實際退休年齡？

☐ Yes 是

☐ No 否

☐ N/A (since single payment is selected as premium payment mode) 不適用(由於選擇躉繳作為保費繳付方式)

If 'Yes' is chosen above, please specify the source(s) of funds and provide the following information to facilitate affordability assessment:

如上述答案選擇「是」，請說明資金的來源及提供以下詳情以便協助評估閣下的負擔能力：

☐ Expected monthly income following retirement 預期退休後的每月收入：US\$ 美元 _____

Please specify source(s) of funds 請說明資金的來源：_____

☐ Expected one-off amount receivable following retirement 預期退休後一次性可得的金額：US\$ 美元 _____

Please specify source(s) of funds 請說明資金的來源：_____

(Please complete the following if your monthly expenses following retirement will be different from your monthly expenses stated in YOUR FINANCIAL INFORMATION above) (如閣下退休後的每月開支與上述您的財務資料的每月開支不相符，請完成以下部份)

Expected monthly expense following retirement 預期退休後的每月開支：US\$ 美元 _____

Please state the reason why your monthly expense following retirement will be different from your monthly expenses stated in YOUR FINANCIAL INFORMATION above 請說明退休後的每月開支與上述您的財務資料的每月開支不同的原因：

Remarks 備註：

- Monthly Disposable Income you have before retirement will not be used to assess your affordability for any premium payable after your retirement. Monthly Disposable Income you expect to have following retirement will only be relevant for assessing your affordability for any premium payable after your retirement. 閣下退休前的每月可動用收入將不會用作評估閣下退休後需繳付任何保費的負擔能力。而閣下預期退休後的每月可動用收入只會用作評估閣下退休後需繳付任何保費的負擔能力。
- Expected one-off amount receivable following retirement (if any) is only relevant to the assessment of your affordability for premium payable after your retirement. 閣下預期退休後一次性可得的金額(如有)只會用作評估閣下退休後的繳付保費負擔能力。
- If you choose to pay premium with net liquid asset and your monthly disposable income < 0, the shortfall in living expenses would be first deducted from your net liquid assets before we conduct the affordability assessment. 如閣下選擇以淨流動資產繳付保費而閣下的每月可動用收入 < 0，我們將在進行負擔能力評估之前從閣下的淨流動資產扣減生活開支的不足額。

7. In considering your ability and willingness to make payments, what is/are your source(s) of funds? (You can choose more than one option)

就閣下繳付保費的能力及意願，請問閣下的資金來源為？(閣下可選多於一項)

- ☐ Disposable income, including salary, income, etc. 可動用收入，包括薪酬，收入等
- ☐ Net liquid assets, including savings, investments, etc. 淨流動資產，包括儲蓄，投資等
- ☐ Premium Financing 保費融資
- ☐ Others 其他[^]

Please specify the source(s) of funds 請說明資金來源：_____

☐ Expected monthly income starting in a month 預期一個月內將開始的每月收入：US\$美元_____

☐ Expected one-off amount in a month 預期一個月內可得的一次性金額：US\$美元_____

[^] If any, expected monthly income starting in a month and expected one-off amount in a month from other source(s) of funds are considered as part of your disposable income and your net liquid assets respectively for assessing your ability and willingness to pay insurance premiums.

如有，由其他資金來源所得的預期一個月內將開始的每月收入及預期一個月內可得的一次性金額將分別納入在閣下的可動用收入及淨流動資產，以作評估閣下繳付保費的能力及意願。

8a) If you have selected "Disposable income, including salary, income, etc." as one of your sources of funds in question 7, please answer the below question.

如閣下於上述問題7中選擇「可動用收入，包括薪酬，收入等」作為資金來源，請回答以下問題。

What percentage of your monthly disposable income (i.e. after deducting the expenditure) from all sources (including income from liquid assets) would you be able and willing to use to pay for the insurance premium (including your existing insurance policy(ies)) throughout the entire term of the insurance policy? (tick one)

在整個保單期內，閣下能夠及願意繳付的保費(包括閣下現有的其他保單)佔透過所有收入來源(包括流動資產收入)獲得的每月可動用收入(即經扣除開支)的比率為？(勾選一項)

- ☐ < 10%
- ☐ 10% – 20%
- ☐ 21% – 30%
- ☐ 31% – 40%
- ☐ 41% – 50%
- ☐ > 50%

8b) If you have selected "Net liquid assets, including savings, investments, etc." as one of your sources of funds in question 7, please answer the below question.

如閣下於上述問題7中選擇「淨流動資產，包括儲蓄，投資等」作為資金來源，請回答以下問題。

What percentage of your net liquid assets would you be able and willing to use to pay for the insurance premium (including your existing insurance policy(ies)) throughout the entire term of the insurance policy?

在整個保單期內，閣下能夠及願意繳付的保費(包括閣下現有的其他保單)佔閣下淨流動資產的比率為？

- ☐ < 10%
- ☐ 10% – 20%
- ☐ 21% – 30%
- ☐ 31% – 40%
- ☐ 41% – 50%
- ☐ > 50%

Please complete by the Licensed Insurance Intermediary if premium financing is selected

如勾選保費融資，由持牌保險中介人填寫

Information on the Proposed Policy with Premium Financing 建議保單之保費融資詳情

- i. Name of Lender 放債人名稱 _____
- ii. Loan amount 貸款金額 USD 美元 _____
- iii. Loan tenor 貸款年期 _____ Year 年
- iv. Loan interest rate p.a. 貸款年利率 _____ %
- v. Monthly repayment amount 每月還款額 USD 美元 _____
- vi. Leveraging ratio 槓桿比率 ^ _____
- vii. Affordability assessment completed and passed? 負擔能力評估已完成及通過? ☐ Yes 是 ☐ No 否

^ Leveraging ratio = Loan principal of premium financing for proposed policy / (Net liquid assets* – Outstanding principal of existing premium financing*)

槓桿比率 = 建議保單之保費融資貸款本金 / (淨流動資產* – 未償還的保費融資本金*)

* Refer to "Your Financial Information" on page 1

請參考第一頁的『您的財務資料』

If the ratio is close to or equal to 1, it means that your loan amount is almost as much as or equivalent to your own existing financial resources (e.g. net liquid assets). Where it exceeds 1, it represents that there will be an over-leveraging risk which means that you may have to surrender your policy to repay your loan should your lender request for its full repayment before the end of tenor of your premium financing facility.

如比率接近或等於1，則表示閣下的貸款金額幾乎等同或等同於閣下自己現有的財務資源(例如淨流動資產)。當比率大於1，則代表有過度槓桿風險，即如閣下的債權人於保費融資期結束前要求閣下全數清還貸款，閣下可能需要退保才能償還該貸款。

Important note to client: The above loan information provided by the client is solely for the purpose of conducting affordability assessment[#] for the client's current insurance application and it does not constitute any loan terms. The final loan information including but not limited to loan amount, loan tenor, loan interest rate and monthly repayment amount is subject to credit underwriting review and approval of the lender.

客戶須知: 以上由客戶提供的貸款詳情只作評估客戶當前保險申請的負擔能力之用，並不構成任何貸款條款。最終貸款詳情，包括但不限於貸款金額，貸款年期，貸款年利率及每月還款額將取決於貸款機構的信貸承保審批而定。

This assessment has taken into account the premium financing intended to be used for the proposed insurance policy. (including the self-funded portion of the premium, all scheduled repayments (i.e. principal and/or interest repayments, where applicable) over the entire tenure of premium financing facility, and your ability to repay the sum owed under the premium financing facility if demanded by the lender before maturity of the policy with sufficient financial resources)

此評估已把新申請保單的保費融資考慮在內。(包括自資保費的部份，保費融資期內的預期總開支以及在貸款方要求提前償還保費融資貸款額時，確保閣下有足夠的財政資源償還貸款金額)

9. Product Recommendation and Selection 產品建議及選擇

Based on your answers provided on this form, the intermediary concerned has discussed the following insurance options (as available to the intermediary) to meet your objective(s) and need(s):

根據閣下在此表格提供的答案，有關之保險中介人已與閣下討論下列的保險產品以滿足閣下的目標及需要：

Name of Insurance Company 保險公司名稱	Name of Insurance Product 保險產品名稱	Objective(s) that can be met by the insurance product 此保險產品能滿足的目標	Product introduced to you and selected by you (if any) 曾介紹及最終選購(如有)的產品	Policy Currency 保單貨幣*	Premium 保費*	Premium Payment Mode 保費支付方式*	Premium Payment Term 保費支付年期*	Sum Insured/ Policy Amount/ Notional Amount 保額/ 保單金額/ 名義金額*
		<input type="checkbox"/> Financial protection against adversities 為應付不時之需提供財務保障 <input type="checkbox"/> Preparation for health care needs – Critical Illness 為應付醫療保健需要 – 危疾 <input type="checkbox"/> Preparation for health care needs – Long Term Care 為應付醫療保健需要 – 長期護理 <input type="checkbox"/> Providing regular income in the future 為未來提供定期的收入 <input type="checkbox"/> Saving up for the future 為未來需要儲蓄 <input type="checkbox"/> Investment 投資 <input type="checkbox"/> Others 其他： 	<input type="checkbox"/> Introduced 曾介紹 <input type="checkbox"/> Introduced and Selected 曾介紹及最終選購					
		<input type="checkbox"/> Financial protection against adversities 為應付不時之需提供財務保障 <input type="checkbox"/> Preparation for health care needs – Critical Illness 為應付醫療保健需要 – 危疾 <input type="checkbox"/> Preparation for health care needs – Long Term Care 為應付醫療保健需要 – 長期護理 <input type="checkbox"/> Providing regular income in the future 為未來提供定期的收入 <input type="checkbox"/> Saving up for the future 為未來需要儲蓄 <input type="checkbox"/> Investment 投資 <input type="checkbox"/> Others 其他： 	<input type="checkbox"/> Introduced 曾介紹 <input type="checkbox"/> Introduced and Selected 曾介紹及最終選購					

Name of Insurance Company 保險公司名稱	Name of Insurance Product 保險產品名稱	Objective(s) that can be met by the insurance product 此保險產品能滿足的目標	Product introduced to you and selected by you (if any) 曾介紹及最終選購 (如有) 的產品	Policy Currency 保單貨幣*	Premium 保費*	Premium Payment Mode 保費支付方式*	Premium Payment Term 保費支付年期*	Sum Insured/ Policy Amount/ Notional Amount 保額/ 保單金額/ 名義金額*
		<input type="checkbox"/> Financial protection against adversities 為應付不時之需提供財務保障 <input type="checkbox"/> Preparation for health care needs – Critical Illness 為應付醫療保健需要 – 危疾 <input type="checkbox"/> Preparation for health care needs – Long Term Care 為應付醫療保健需要 – 長期護理 <input type="checkbox"/> Providing regular income in the future 為未來提供定期的收入 <input type="checkbox"/> Saving up for the future 為未來需要儲蓄 <input type="checkbox"/> Investment 投資 <input type="checkbox"/> Others 其他： _____	<input type="checkbox"/> Introduced 曾介紹 <input type="checkbox"/> Introduced and Selected 曾介紹及最終選購					

* Required to be completed only if the insurance product(s) is/are being selected 須填寫如保險產品被最終選購

Note: Reason for only providing 1 insurance company suggestion, if any.

註：請說明只提供一家保險公司建議的原因，如適用 _____

Please complete by the Licensed Insurance Intermediary

由持牌保險中介人填寫

Reason(s) for Recommendation 建議原因

- ☐ The product(s) listed in the table above was/were recommended to the client with the aim to fulfil the client's current insurance needs after considering the client's financial situation, life protection needs, insurance preferences and ability and willingness to pay premiums, and striking a balance between the above factors.
上表的產品建議考慮到客戶的財務狀況，人壽保障需要，保險偏好及繳付保費的能力和意願，並在各方面取得平衡，以滿足客戶當前的保險需要。

☐ Others 其他 (Please specify 請詳述): _____

Is there any mismatch(s) against client's preference in such recommendation? 產品建議是否與客戶需要存在偏差？

- ☐ No 否
- ☐ Yes, the mismatch(s) is/are 是，偏差的情況是：
- ☐ i. Target protection amount 目標保障金額
- ☐ ii. Target saving amount 目標儲蓄金額

If yes, reason(s) for recommendation despite the mismatch(s) indicated above 如是，儘管產品建議與上述的客戶需要存在偏差，但仍然建議的原因為：

- ☐ There is a budget concern to fulfil all of client's target protection amount and/or target saving amount in this same application. The mismatch(es), the reason(s) behind the recommendation of the product(s) despite the mismatch(es), as well as the associated risks that client's needs could not be fully met by the recommended product(s) have been clearly explained to the client.
客戶在是次申請的預算中未能夠滿足到全部的目標保障金額及／或目標儲蓄金額。持牌保險中介人已清楚向客戶解釋此偏差，仍然建議此產品的原因及相關風險以致於所建議的產品未能完全滿足客戶的需要。
- ☐ Client does not wish to fulfil the entire target protection amount and/or target saving amount with insurance product(s) offered by the same insurer. The mismatch(es), the reason(s) behind the recommendation of the product(s) despite the mismatch(es), as well as the associated risks that client's needs could not be fully met by the recommended product(s) have been clearly explained to the client.
客戶不希望以同一間保險公司的保險產品滿足全部的目標保障金額及／或目標儲蓄金額。持牌保險中介人已清楚向客戶解釋此偏差，仍然建議此產品的原因及相關風險以致於所建議的產品未能完全滿足客戶的需要。
- ☐ Others 其他 (Please specify 請詳述): _____

Affordability Assessment Result of Proposed Policyholder 建議保單持有人的負擔能力評估結果

- ☐ The client has passed the affordability assessment based on the selected source(s) of funds for premium payment, which factors in the premium financing (if applicable).
客戶已通過負擔能力評估根據所選作繳付保費的資金來源，此評估已把保費融資考慮在內(如適用)。

Client Acknowledgement and Declarations 客戶確認及聲明

Product Information 產品資料

- ☐ I confirm that the licensed insurance intermediary has explained the product features, fees & charges, important notes, key risks, key exclusions and cooling-off period, etc to me together with the presentation of product brochure/factsheet and insurance proposal.
本人確認持牌保險中介人已向本人解釋了產品冊子／單張和保險計劃建議書，以及當中的產品特點、費用和收費、重要事項、主要風險、主要不保事項、冷靜期等。

Target Protection Amount 目標保障金額

- ☐ I confirm that the total sum insured of selected product(s) aligns with my target protection amount I wish to apply for.
本人確認本人所選產品的總保障金額符合本人的目標保障金額。
- ☐ I acknowledge that the total sum insured of selected product(s) is US\$ _____, which is less than the target protection amount of US\$ _____. I wish to apply for and agree to proceed with the application because:
本人知悉本人所選產品的總保障金額為美元 _____，此金額比本人的目標保障金額美元 _____ 為少，惟本人仍同意繼續此申請，原因為：

- ☐ Not Applicable. The objective(s) of “Financial protection against adversities” or others with a protection-related objective has/have not been selected as my objective(s) in question 1.
不適用。本人沒有於上述問題 1 中選擇「為應付不時之需提供財務保障」或其他具有保障的相關目標作為選購保險產品的目標之一。

Target Saving Amount 目標儲蓄金額

- ☐ I confirm that the total projected return amount of the selected product(s) aligns with my target saving amount.
本人確認本人所選產品的預期回報金額符合本人的目標儲蓄金額。
- ☐ I acknowledge that the total projected return amount of the selected product(s) may not match my target saving amount of US\$ _____ but I have made the decision to go ahead with the application because:
本人知悉本人所選產品的預期回報金額可能與本人的目標儲蓄金額美元 _____ 不符，惟本人決定繼續此申請，原因為：

- ☐ Not applicable. The objective(s) of “Providing regular income in the future”, “Saving up for the future”, “Investment” or others with a wealth accumulation-related objective has/have not been selected as my objective(s) in question 1 **OR** I indicated I do not have a specific target saving amount and would like to use the total amount of premium payment for saving in question 2c.
不適用。本人沒有於上述問題 1 中選擇「為未來提供定期的收入」，「為未來需要作儲蓄」，「投資」或其他具有財富累積相關目標作為選購保險產品的目標之一 **或** 本人已於上述問題 2c 中表示沒有一個特定預期要達到的儲蓄金額及會用繳付保費的總金額作儲蓄之用。

Alternative Solution 替代方案

- ☐ An alternative life insurance product(s) which could meet my needs has/have been introduced to me.
本人已了解到符合本人需要的人壽保險產品替代方案。
- ☐ I acknowledge that there is no alternative life insurance product which matches with my need.
本人知悉沒有符合本人需要的人壽保險產品替代方案。

Purchasing/Applying for* Similar Life Insurance Product(s) in the past 12 months 於過去 12 個月內購買／申請 * 多份類同人壽保險產品

- ☐ I confirm that I have purchased/applied for* similar type of life insurance product(s) in the past 12 months. The reason of purchasing/applying for multiple policies is
本人確認於過去 12 個月內曾購買／申請 * 類同的人壽保險產品，而購買／申請多份類同產品的原因為

- ☐ Not applicable. I have NOT purchased/applied for* similar type of life insurance product(s) in the past 12 months.
不適用。本人沒有於過去 12 個月內曾購買／申請 * 類同的人壽保險產品。

* If there are more than one application of similar life insurance product covered by this FNA, it will also be defined as applying for similar life insurance products in the past 12 months.
如果此財務需要分析表格會包括多於一份的類同保險申請，亦被定義為過去 12 個月內申請多份類同人壽保險產品。

Information for Affordability and Suitability Assessment 用於負擔能力和適合性評估的資料

☐ I, the proposed policyholder, confirm that the information and details of my financial profile provided in this “Insurance – Financial Needs Analysis”:

本人作為建議保單持有人，確認本人在「保險 – 財務需要分析表格」中提供的財務狀況資料和細節：

(1) are true, valid and reliable and are disclosed by me in good faith with regard to the assessment of this particular insurance application; and

是真實，有效和可靠的，以及本人以最大誠信提供，有關資料和細節就申請此份保險所用；及

(2) can be relied upon as adequate and sufficient by HSBC Life (International) Limited (“HSBC Life”) to conduct relevant affordability and suitability assessment particular to this insurance application without regard to any other financial information I may have provided/will provide to HSBC Life via other HSBC Life’s application channel(s).

是足夠和充分的，滙豐人壽保險(國際)有限公司(「滙豐保險」)可以憑藉有關資料和細節對此份保險申請進行有關負擔能力和適合性評估，而不會參考本人可能已經／將經滙豐保險其他申請渠道向滙豐保險提供的任何其他財務資料。

<hr/>	<hr/>	<hr/>
Applicant's Name 投保人姓名	Applicant's Signature 投保人簽署	Date 日期

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：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。

Note: 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.

註：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，必須通知承保人／公司。

For Licensed Intermediary Use Only

Reason(s) for recognizing the insurance product recommended and selected in Q9 as suitable (for suitability mismatch scenario only)

Name of Licensed Intermediary

Signature of Licensed Intermediary

Date

Reminder to Brokers:

Please ensure the Broker's Memo you submit to the insurer clearly sets out the factors considered and the reasons for the product recommendations made to your customer.

Data Privacy Notice

Notice relating to the Personal Data (Privacy) Ordinance

We protect your privacy. Read this notice to find out how we collect, store, use and share your personal data.

1 HOW WE COLLECT AND STORE YOUR DATA

We collect your data

- when you interact with us, apply for and use our products and services
- visit our websites (please see the “Privacy and Security” section of www.hsbc.com.hk and refer to “Use of cookies policy” for details of how we use cookies)
- from other people and companies, including other HSBC group companies

We may store your data locally or overseas, including in the cloud. We apply our global data standards and policies wherever your data is stored.

We’re responsible for keeping your data safe in compliance with Hong Kong law.

2 WHAT WE USE YOUR DATA FOR

We use your data

- to send you direct marketing if you’ve consented to it
- to consider applications for, offer, provide and manage products and services

For example: (i) insurance, annuities, pensions and health and wellness products and services; (ii) educational materials; (iii) products and services relating to campaigns and promotions which you have signed up to

- to design and improve our products, services and marketing
- to help us and other HSBC group companies comply with laws, regulations and requirements, including our internal policies, in or outside Hong Kong
- to detect, investigate and prevent financial crimes
- for the other purposes set out in section B

3 WHO WE SHARE YOUR DATA WITH

We share your data with

- other HSBC group companies
- third parties who help us to provide services to you or who act for us
- third parties who you consent to us sharing your data with
- local or overseas law enforcement agencies, industry bodies, regulators or authorities
- the other third parties set out in section C

We may share your data locally or overseas.

You can access your data

You can request access to the data we store about you. We may charge a fee for this.

You can also ask us to

- correct or update your data
- explain our data policies and practices

You control your marketing preferences

You control whether you receive marketing from us.

You can change this at any time by contacting us.

You can contact us

dfv.enquiry@hsbc.com.hk
The Data Protection Officer
HSBC, PO Box 72677,
Kowloon Central Post Office,
Hong Kong

A

Collect and store

We may collect

- biometric, medical and health/lifestyle data such as your heart rate, BMI and steps count
- your geographic data and location data based on your mobile or other electronic device
- data from people who act for you or who you deal with through our services
- data from public sources, aggregators and other sources available to us
- data from policyholders or members of our insurance policies of which you benefit from or are insured by

If you don't give us data then we may be unable to provide products or services.

We may also generate data about you

- by combining information that we and other HSBC group companies have collected about you
- based on the analysis of your interactions with us and information which we have collected about you
- through the use of cookies and similar technology when you access our website or apps

B

Use

We use your data to

- handle and take care of claims
- help us to comply with requirements or requests that we or the HSBC group have or receive such as legal or regulatory in or outside Hong Kong. Sometimes we may have to comply and other times we may choose to voluntarily comply
- conduct identity, medical or credit checks
- create and maintain the credit and risk related models of the HSBC group (such as underwriting models, health and wellness models and models/algorithms for data analytics and artificial intelligence)
- manage our business, including exercising our legal rights
- determine, pay or collect money owed to you or to us
- match data held by HSBC group companies for purposes listed in this notice
- provide personalised advertising to you on third party websites (this may involve us aggregating your data with data of others)
- other uses relating to the above or to which you have consented

If you provide data about others

If you provide data to us about another person, you should tell that person how we will collect, use and share their data as explained in this notice.

C

Share

We share your data with

- local or overseas bodies or authorities such as legal, regulatory, law enforcement, government and tax and any partnerships between law enforcement and the financial sector
- any person who is a party to a transaction (or a potential transaction) buying interest or assuming risk in an insurance policy, such as reinsurers
- payment recipients, beneficiaries or any person who act for our customer or you, or anyone whose data is provided for receiving benefits under an insurance policy or otherwise
- hospitals, clinics, medical practitioners, laboratories, technicians, loss adjusters, risk intelligence providers, legal advisers or private investigators who act for us
- any third party who we may transfer our business, policies or assets to so it can evaluate our business and use your data after any transfer
- partners and providers of reward, co-branding or loyalty programs, charities or non-profit organisations
- social media advertising partners (who can check if you have or use our products and services and send our adverts to you and advertise to people who have a similar profile to you)

We may share your anonymised data with other parties not listed above. If we do this you won't be identifiable from this data.

D

Direct Marketing

This is when we use your data to send you details about financial, insurance, pensions, annuities or related products, services and offers (such as health and wellness) and promotional campaigns provided or hosted by us or our co-branding, rewards or loyalty programme partners, charities or other third party financial institutions and service providers.

We may use data such as your demographics, the products and services that you're interested in, transaction behaviour, portfolio information, location data, social media data, analytics, health and wellness data and information from third parties when we market to you.

We don't give your data to others for them to market their products and services to you. If we ever wanted to do this, we'd get your separate consent.

This notice will apply for as long as we store your data. We'll send you the latest version at least once a year. If we use your data for a new purpose, we'll get your consent.

Note: In case of any discrepancies between the English and Chinese versions, the English version shall apply and prevail.

資料私隱通知

關於個人資料(私隱)條例的通知

我們致力保護您的私隱。請閱讀此通知，了解我們如何收集、儲存、使用及披露您的個人資料。

1

我們如何收集及儲存您的資料

我們收集您資料的途徑包括

- 您與我們互動，向我們申請及使用我們的產品和服務
- 您瀏覽我們網站(有關我們如何使用「cookies」的詳情，請參閱我們網站 www.hsbc.com.hk 進入「私隱與保安」閱覽「Use of cookies 政策」)
- 其他人士及公司(包括其他滙豐集團旗下公司)

我們可能將您的資料儲存於本地或海外，包括雲端。無論您的資料儲存於何處，均受我們的環球資料標準及政策約束。

我們有責任根據香港法律保護您的資料安全。

2

我們如何使用您的資料

我們將您的資料用於

- 經您同意後向您發送直接促銷資料
- 考慮申請、為您推薦、提供及管理產品與服務
例如：(i) 保險、年金、退休金、健康與保健產品及服務；(ii) 教育材料；(iii) 關於您已報名參與之活動及推廣的產品與服務
- 設計及改進我們的產品、服務及市場推廣活動
- 幫助我們及其他滙豐集團旗下公司遵守香港或其以外的國家或地區的法律、法規和要求，包括我們的內部政策
- 偵測、調查及預防金融罪案
- B 部分所列的其他目的

3

我們與誰披露您的資料

我們與下列人士披露您的資料

- 其他滙豐集團旗下公司
- 幫助我們向您提供服務或代表我們行事的第三方
- 您同意我們與之披露您資料的第三方
- 本地或海外執法機構、行業組織、監管機構或權力機關
- C 部分所列的其他第三方

我們可能在本地或海外披露您的資料。

您可查閱自己的資料

您可要求查閱我們所儲存有關您的資料。我們可能就此向您收取費用。

您可要求我們

- 改正或更新您的資料
- 說明我們的資料政策及慣例

您可控制自己的市場推廣偏好

您可控制您會否從我們收取市場推廣資料。

您可隨時聯絡我們對此作出更改。

您可聯絡我們

dfv.enquiry@hsbc.com.hk

資料保護主任

香港上海滙豐銀行有限公司
香港九龍中央郵政局
郵政信箱 72677 號

A

收集及儲存

我們或會

- 收集生物辨識、醫療及健康/生活模式資料，例如您的心跳率、身高體重指數及步數統計
- 基於您的流動或其他電子裝置收集您的地域及位置資料
- 從代表您的人士或您透過我們服務與之往來的人士收集資料
- 從公開渠道、資料整合機構及其他我們接觸得到的渠道收集資料
- 從您受益或受保於我們的保險下的保單持有人或保單成員收集資料

若您不向我們提供資料，我們可能無法提供產品或服務。

我們亦可能透過以下途徑衍生有關您的資料

- 整合我們及其他滙豐集團旗下公司收集的有關您的資料
- 分析您與我們的互動及我們已收集得來有關您的資料
- 於您瀏覽我們網站或應用程式時使用 cookies 或類似技術

B

使用

我們將您的資料用於

- 處理及安排索償
- 幫助我們遵守包括香港或其以外的地區或國家的法律或監管機構對我們或滙豐集團現有或所收到的相關監管規定或要求。這些監管規定或要求可能是我們必須遵從或選擇自願遵從的
- 進行身份審查、身體檢查或信用審查
- 設立及維持滙豐集團的信貸及風險相關準則(例如承保準則、健康及保健準則，以及用於資料分析及人工智能的準則/算法)
- 管理我們業務，包括行使我們的法律權利
- 釐定、支付或收取欠您或欠我們的款項
- 與滙豐集團旗下公司所持有的資料核對，以供作本通知所列明的用途
- 於第三方網站上為您提供個人化廣告(這可能涉及我們將您與他人的資料進行整合)
- 與上述用途相關或經您同意的其他用途

若您提供他人的資料

若您向我們提供有關其他人士的資料，您應按本通知所述，告知該人士我們將如何收集、使用和披露其資料。

C

披露

我們與下列人士披露您的資料

- 本地或海外的法律、監管、執法、政府和稅務等機構或權力機關，以及執法機構與金融業界之間的任何合作夥伴
- 交易(或潛在交易)下收購保單權益或承擔保單風險的一方，例如再承保人
- 收款人、受益人或任何為我們的客戶或您行事的人；或任何為收取保單賠償或為其他目的而資料被提供的人
- 代表或為我們提供服務的醫院、診所、醫生、化驗所、技術員、理賠員、風險情報提供機構、法律顧問或私家偵探
- 我們可能轉讓業務、保單或資產的任何第三方，以便其評估我們的業務及在轉讓後使用您的資料
- 獎賞、合作品牌或忠誠計劃的合作夥伴及供應商，以及慈善或非牟利機構
- 社交媒體廣告合作夥伴(可查看您是否擁有或使用我們的產品及服務，並向您及與您個人資料相似的人士發送我們的廣告)

我們可能與上文並未列出的其他人士披露您的匿名資料。在此情況下，有關資料將無法識別出您的身分。

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直接促銷

指我們使用您的資料向您發送由我們或我們的合作品牌、獎賞或忠誠計劃合作夥伴、慈善機構或其他第三方金融機構及服務供應商所提供或舉辦的金融、保險、退休金、年金或相關產品、服務和優惠詳情(例如健康與保健)及推廣活動的詳細資料。

向您進行市場推廣時，我們或會使用您的資料，例如人口統計資料、您感興趣的產品及服務、交易行為、投資組合資料、位置資料、社交媒體資料、分析、健康及保健資料和來自第三方的資料。

我們不會向他人提供您的資料，以供其向您推廣產品及服務。如有此意，我們會另行徵求您的同意。

本通知於我們儲存您的資料期間適用。我們亦會每年向您提供此通知的最新版本。若我們將您的資料用於新用途，則會徵求您的同意。

注意：中英文本如有任何歧義，概以英文本為準。