Transamerica Life (Bermuda) Ltd.
(Incorporated in Bermuda with limited liability)

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REQUEST FOR SURRENDER FORM
退保申請表格

IMPORTANT INFORMATION 重要資料

Please complete in ENGLISH and BLOCK CAPITALS.
The Chinese text is for reference only. If there is any conflict between the meaning of the words or terms of the English and Chinese text of this form, the English version shall prevail.
If you make a mistake completing this form, simply cross out the error, note the correct details and initial each correction.
The policy of Insurance is issued or assumed by Transamerica Life (Bermuda) Ltd. ("TLB").
Once the policy has been surrendered, the policy owner(s) will no longer be able to access the policy on myTLB.

請以英文正楷填寫。
中文譯本僅供參考用途。如中文譯本與英文原文有歧義，概以英文原文為準。
如表格內所填寫的資料有任何錯誤，請予以修正並在旁邊簡簽作實。
保單由全美人壽（百慕達）有限公司（「全美人壽百慕達」）發出或承擔責任。
當退保申請處理完成後，保單持有人就不能再登入 myTLB管理此保單。

Insured's Name 受保人姓名		Policy Number 保單號碼	
Policy Owner's Name 保單持有人姓名			

If you intend to use (i) the funds arising; or (ii) any saving made by reducing the premium payable, from this transaction to purchase another life insurance policy, you should consult your financial representative about the implications and associated risks involved in policy replacement. You may also find more information about policy replacement on the website of the Insurance Authority.

如閣下打算透過本申請（i）提取資金；或（ii）降低保單的應付保費，以資助購買另一份新的人壽保險保單，閣下應就此轉保所涉及的影響和相關風險諮詢您的財務代表。 閣下亦可瀏覽保險業監管局的網站了解更多有關轉保的資料。

I elect to exercise the policy surrender provisions. If a full surrender is elected, it is agreed that the entire liability of TLB, except for payment of the net cash value, is hereby discharged and terminated. The undersigned certifies that:

(1) the policy is not subject to any lien, assignment or legal claim by any person or organisation who is not a party to this agreement; and
(2) that he/she/it is not involved in pending bankruptcy proceedings

本人選擇將保單完全退保，以收取其淨現金價值。如經雙方同意，除須繳付淨現金價值外，全美人壽百慕達之全部法律責任謹此解除並終止。下方簽署人證明：

(1) 並未有不屬於本協議一方之任何人士或機構享有保單之任何留置權、轉讓權或法定申索；及
(2) 他/她/它並未涉及任何正待處理之破產法律程序。

☑ Select the box that applies
請選擇合適空格

1. Surrender
退保

☐ Full 完全　☐ Partial 部份　☐ Partial Surrender Amount: USD _____ 美元
部份退保金額

Reason to full surrender / partial surrender:
完全退保/部份退保的原因: _____

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☑ Select the box that applies
請選擇合適空格

2. Payment Instruction 付款指示

I/we, hereby, authorise TLB to arrange proceeds as follows (If no option is selected, proceeds will be paid by cheque to policy owner):
本人/吾等現授權全美人壽百慕達按下列指示安排所得款項（若未有作出選擇，所得款項將以支票形式支付予保單持有人）：

☐ Pay Out 支付

Payment Currency 付款貨幣	☐ USD 美元	☐ HKD 港元
Payment Method 付款方法	☐ By cheque 支票形式 (applicable to amount less than USD500,000 or equivalent. For USD cheque, a local clearing USD cheque will be issued. 適用於金額少於50 萬美元或等值。若以美元支票形式，只會開發本地結算美元支票。)	☐ By Telegraphic Transfer 電匯形式 (Please complete below Telegraphic Transfer Details Section. 請填寫以下電匯資料部分。)
Pay to 支付予： (if the policy is subject to collateral assignment. 若保單受抵押轉讓所限制。)	☐ Policy Owner 保單持有人	☐ Collateral Assignee 抵押受讓人

☐ Pay Premium Due to This Policy 支付保單到期應付保費

☐ Apply to Policy Number 撥至保單號碼：

☐ Loan Repayment 償還貸款 ☐ Pay Premium 支付保費

☐ Others 其他 _____(subject to review and approval須經審查及批核)

3. Telegraphic Transfer Details 電滙資料

Correspondent Bank Information (if applicable) 代理銀行資料（如適用）

Correspondent Bank Name 代理銀行名稱	
Correspondent Bank Swift Code 代理銀行代碼	
Correspondent Bank Address 代理銀行地址	

Beneficiary Bank Information 收款銀行資料

Beneficiary Account Holder Name 收款銀行帳戶持有人姓名	
Beneficiary Account Number 收款帳號	
Beneficiary Swift Code 收款銀行代碼	
Beneficiary Bank Name 收款銀行名稱	
Beneficiary Bank Address 收款銀行地址	

Note: Payment must be made to policy owner/collateral assignee only. Payment requested to be made in HKD may be subject to the prevailing exchange rate as determined with reference to our sources.
註： 款項必須支付予保單持有人/抵押受讓人。要求以港元支付的款項可能按當時銀行公佈的匯率換算。

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☑ Select the box that applies
請選擇合適空格

4. For Surrender by Collateral Assignees:
適用於由抵押受讓人作出之退保：

If this policy is being surrendered by a collateral assignee who has surrender rights under the assignment agreement, has the collateral assignee complied with all of the notice provisions to the assignor under the assignment agreement prior to submitting this request?
若此保單是由根據轉讓協議具有退保權利之抵押受讓人提出退保，抵押受讓人在提出此申請前，是否已符合轉讓協議規定對轉讓人之所有通告條款?

☐ Yes 是 ☐ No 否

Is the policy subject of the collateral assignment the same as the one identified at the top of this form?
抵押轉讓書所指之保單是否與此表格上端所指之保單相同?

☐ Yes 是 ☐ No 否

5. Declaration by Policy Owner and/or Collateral Assignee (if applicable) **保單持有人及／或抵押受讓人（如適用）之聲明**

I/We confirm that I/we am/are not an undischarged bankrupt, subject to any winding up, receivership or judicial management proceedings, and that there are no pending or threatened bankruptcy or winding up, receivership or judicial management proceedings against me/us. For the avoidance of doubt, where the Collateral Assignee is a bank, licensed financial institution or other regulated lending institution, the declaration set out in this paragraph shall not apply to the Collateral Assignee.
本人／吾等確認，本人／吾等並非未獲解除破產的破產人，亦不受任何清盤、接管或司法管理程序所規限，且並無任何針對本人／吾等提出而尚待處理或已被威脅提出的破產、清盤、接管或司法管理程序。為免生疑問，如抵押受讓人為銀行、持牌金融機構或其他受監管放貸機構，則本段所載的聲明並不適用於該抵押受讓人。

6. Signatures 簽署

**Signature of Policy Owner*
保單持有人簽署***

Signed at 簽署地點	(Country 國家)	Date 日期	(dd/mm/yyyy 日/ 月/ 年)
Name 姓名			
Phone Number 電話號碼	Country Code 國家號碼 – Area Code 地區號碼 – Phone Number 電話號碼		
Signature (include Title, if Corporation or Trust). If a collateral assignee is surrendering, please sign below and leave this section blank. 簽署（如屬公司或信託，請加上職銜）如由抵押受讓人作出退保申請，請把本欄留空並於下方「抵押受讓人」欄內簽署。	X		

**Signature of Witness to Policy Owner
保單持有人之見證人簽署**

Signed at 簽署地點	(Country 國家)	Date 日期	(dd/mm/yyyy 日/ 月/ 年)
Name 姓名			
ID Number 身份證明文件號碼		Signature 簽署	
Type 類別 ☐ HKID 香港身份證 ☐ Passport 護照 ☐ Other 其他 _____		X	
Address 地址			

* Note 注意：
To update your contact information, please submit the Personal Information Update Form available from your financial representative.
如要更新聯絡資料，請向您的財務代表索取個人資料更新表格，並於填妥後交回。

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☑ Select the box that applies
請選擇合適空格

6. Signatures (Continued)
簽署（續）

Signature of Irrevocable Beneficiary (if applicable)
不可撤銷受益人簽署（如適用）

Signed at 簽署地點	(Country 國家)	Date 日期	(dd/mm/yyyy 日/ 月/ 年)
Name 姓名			
Phone Number 電話號碼	Country Code 國家號碼 – Area Code 地區號碼 – Phone Number 電話號碼		
Signature (include Title, if Corporation or Trust) 簽署（如屬公司或信託，請加上職銜）	X		

Signature of Witness to Irrevocable Beneficiary (if applicable)
不可撤銷受益人之見證人簽署（如適用）

Signed at 簽署地點	(Country 國家)	Date 日期	(dd/mm/yyyy 日/ 月/ 年)
Name 姓名			
ID Number 身份證明文件號碼		Signature 簽署	
Type 類別 ☐ HKID 香港身份證 ☐ Passport 護照 ☐ Other 其他 _____		X	
Address 地址			

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☑ Select the box that applies
請選擇合適空格

6. Signatures (Continued)
簽署（續）

The collateral assignee agrees to hold TLB harmless and shall fully indemnify TLB on demand against all losses and/or damages that TLB may suffer as a result of any claims, demands, actions, expenses or costs of whatever nature howsoever arising out of TLB acting in accordance with The collateral assignee's instructions to exercise the policy surrender provisions and apply the funds as requested in this request for surrender form.

抵押受讓人同意，就全美人壽百慕達因其按照抵押受讓人指示行使保單退保條款及按本退保申請表格要求運用款項而引致的任何性質之申索、損害、訴訟、開支或費用而導致的所有損失及／或損害，免除全美人壽百慕達的賠償責任，並就全美人壽百慕達之損害提供補償。

Signature of Collateral Assignee (if any)*
抵押受讓人簽署（如有）*

Signed at 簽署地點	(Country 國家)	Date 日期	(dd/mm/yyyy 日/ 月/ 年)
Name 姓名			
Phone Number 電話號碼	Country Code 國家號碼 – Area Code 地區號碼 – Phone Number 電話號碼		
Signature (include Title, if Corporation or Trust) 簽署（如屬公司或信託，請加上職銜）	X		

Signature of Witness to Collateral Assignee
抵押受讓人之見證人簽署

Signed at 簽署地點	(Country 國家)	Date 日期	(dd/mm/yyyy 日/ 月/ 年)
Name 姓名			
ID Number 身份證明文件號碼		Signature 簽署	
Type 類別 ☐ HKID 香港身份證 ☐ Passport 護照 ☐ Other 其他 _____		X	
Address 地址			

* Note 注意：
To update your contact information, please submit the Personal Information Update Form available from your financial representative.
如要更新聯絡資料，請向您的財務代表索取個人資料更新表格，並於填妥後交回。

General Notices 一般通知

TLB makes no representation and assumes no liability for the tax implication, if any, of this transaction. TLB does not offer tax or legal advice. Because tax laws are subject to change and different interpretations, we recommend that you seek counsel from a qualified advisor.

全美人壽百慕達並不會就是項交易作任何陳述並且不會就是項交易之任何稅務影響（如有）承擔任何法律責任。 全美人壽百慕達並不提供稅務或法律意見。由於稅務法例可能會有更改及不同詮釋，因此全美人壽百慕達建議閣下諮詢合資格顧問之意見。

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