AIA Hong Kong

AIA Financial Centre,
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Memo

Attn: All EDD & Honorable Advisors / EDDs / PSDDs / SDDs / DDs / MICs / Agency Leaders / Financial Planners (Hong Kong & Macau)

From: Claudia Lau
Head of Policy Services

Co/Dept:

Dept: Operations

Copy: All Department Heads

Date: 21 August 2026

Total page: 1 + Appendix 1+2

Subject: (Ref: A260856) 更新透過 AIA+ 及紙本遞交的「信用卡戶口直接付款授權書」
Revision of Direct Debit Authorisation For Credit Card Account submitted via AIA+ and paper form

承接早前發出之 memo (Ref: A260851)，由 **2026 年 8 月 22 日**起，AIA+（請參閱附件一）及紙本（請參閱附件二）遞交的「信用卡戶口直接付款授權書」將作出以下修訂:

更新表格:	**更新摘要:**
透過AIA+ 及紙本遞交的「信用卡戶口直接付款授權書」	須填寫信用卡持有人的證件類別及證件號碼。

如有任何查詢，請於 iEngage/PES 使用 Chatbot 進行查詢。

Further to agent memo previously issued (Ref: A260851), with effect from **22 August 2026**, the Direct Debit Authorization (DDA) For Credit Card Account submitted via AIA+ (please refer to Appendix 1) and paper form (please refer to Appendix 2) will be revised as followed:

Revised form:	**Key change details:**
Direct Debit Authorisation For Credit Card Account submitted via AIA+ and paper form	The credit cardholder's identification document type and document number must be provided.

Should you have any queries, please enquiry by using Chatbot in iEngage/PES.

Regards,



Claudia Lau

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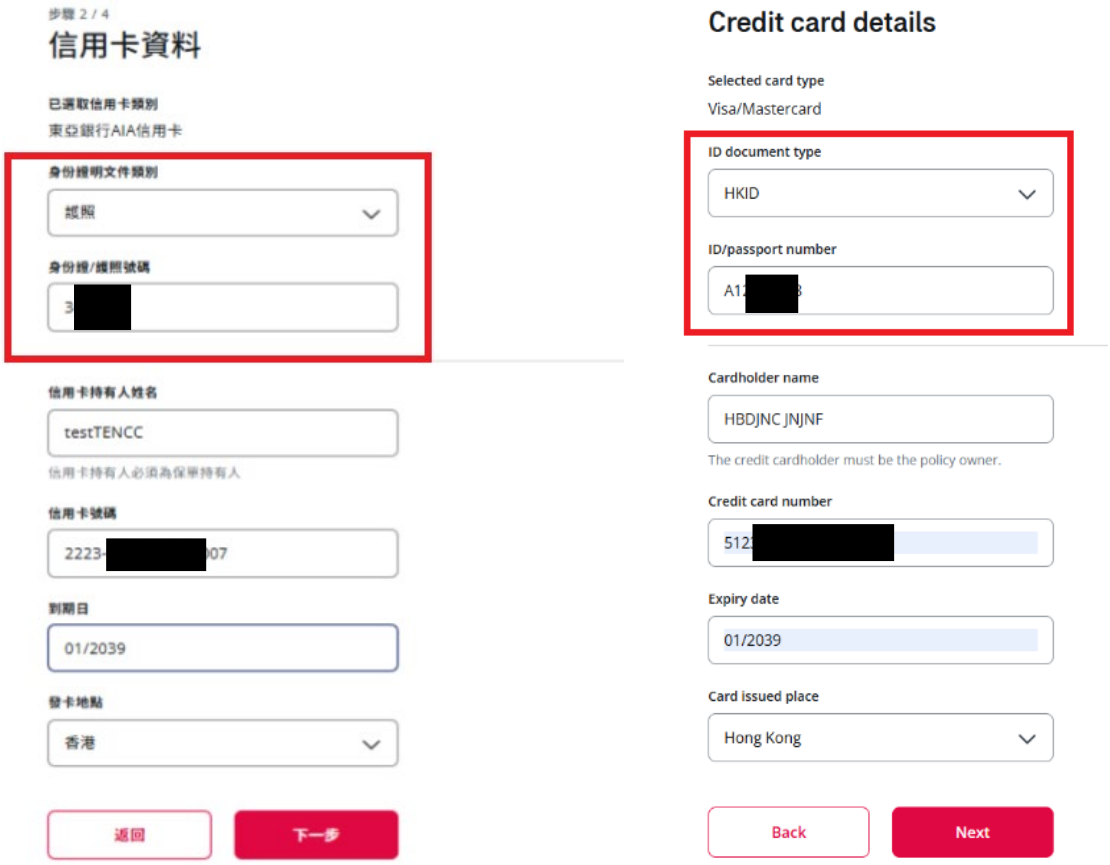
附件一: 透過 AIA+遞交「信用卡戶口直接付款授權書」
Appendix 1: Revised Direct Debit Authorization (DDA) for Credit Card Account submitted via AIA+



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附件 2: 更新的紙本「信用卡戶口直接付款授權書」
Appendix 2: Revised Direct Debit Authorization (DDA) for Credit Card Account (Paper Form)



AIA International Limited
(Incorporated in Bermuda with limited liability)

CREDIT CARD PAYMENT AUTHORISATION
信用卡付款授權書

Section 1: Policy / AIA Vitality Membership Information 第一部分：保單 / AIA Vitality 健康程式會員資料

Policy Number or AIA Vitality Membership Number 保單號碼或AIA Vitality 健康程式會籍編號
Name of Insured / AIA Vitality Member 受保人 / AIA Vitality 健康程式會員姓名
Name of Policy Owner 保單持有人姓名

01710302

Agent / Broker Code 營業員 / 經紀號碼
Agent / Broker's Name 營業員 / 經紀姓名
Agent / Broker's Tel. No. 營業員 / 經紀聯絡電話

Credit Card Payment Authorisation Setup Request (Option 1 will be assumed if this box is left blank)
信用卡付款授權書設立要求（如此欄留空，將被視為選擇選項1）

1. ☐ Above-stated Policy / AIA Vitality Membership Number 上述保單 / AIA Vitality 健康程式會籍號碼
2. ☐ Above-stated Policy Number & Insured's AIA Vitality Membership 上述保單號碼及其受保人之AIA Vitality 健康程式會籍

Section 2: Credit Card Details 第二部分：信用卡資料

Card Number 信用卡號碼
Name of Cardholder 信用卡持有人姓名
Card Expiry Date 信用卡到期日 MM月 YYYY年
Card Issuing Place 信用卡發卡地 ☐ Hong Kong 香港 ☐ non-Hong Kong 非香港

Section 3: Declaration and Authorisation 第三部分：聲明及授權

(1) Until further notice, please charge my abovementioned credit card in accordance with the payment mode of the abovementioned policy for premium payment, any prescribed levy (where applicable) and membership fee of AIA Vitality membership (where applicable). I understand that (a) the amount is subject to change in accordance with the provisions of the abovementioned policy / membership and / or the statutory requirements on levy; (b) the transaction will be charged in HKD. 直至另行通知為止，請於我上述所提供的信用卡按保單繳費模式，收取上述保單保費、任何保費徵費（如適用）及AIA Vitality 健康程式會費（如適用）。我明白(a)有關金額會根據保單 / 會籍的條款及 / 或保費徵費之法例要求而有所變更；(b)交易金額會使用港元結算。

(2) I / We declare that the information contained herein and provided to AIA International Limited are in all respects true, correct and complete to the best of my / our knowledge and belief. 本人 / 我們現聲明，據本人 / 我們所知及所信，本表格所載之將提供予友邦保險(國際)有限公司，在所有方面均屬真實、準確及完整。

(3) I / We confirm that I / we have read, understood, and agreed to the AIA Personal Information Collection Statement* ("AIA PICS") and / or the AIA Vitality Personal Information Collection Statement** ("AIA Vitality PICS") (as applicable).
本人 / 我們確認本人 / 我們已閱讀、明白、及同意AIA個人資料收集聲明*（「AIA個人資料收集聲明」）以及 / 或AIA Vitality 健康程式的個人資料收集聲明**（「AIA Vitality 健康程式個人資料收集聲明」）（按適用情況）。

(4) If the Cardholder is not the Policyowner or Insured, please state the relationship between the Cardholder and the Policyowner. Please also provide personal particulars of the Cardholder below and note that the Policyowner's signature is also required. If any of the following information is missing, this application may be rejected. 如信用卡持有人並非保單持有人或受保人，請註明信用卡持有人與保單持有人之關係，並填寫信用卡持有人的個人資料，而保單持有人亦必須加簽。如欠缺任何一項資料，此申請可能會被拒絕。

Relationship with Policyowner 與保單持有人之關係
Signature of Policyowner 保單持有人簽名

Cardholder's Document Number (Correspond to Bank Record) 信用卡持有人之證件號碼（必需與銀行紀錄相符）
Document Type*** 證件類別*** (I) (P) (C) (B) (X)

Cardholder's Nationality 信用卡持有人之國籍
Cardholder's Gender 信用卡持有人之性別 ☐ Male 男性 ☐ Female 女性
Cardholder's Date of Birth 信用卡持有人之出生日期 MM月 DD日 YYYY年

Cardholder's Signature 信用卡持有人簽名
On 於 MM月 DD日 YYYY年

* The updated version of AIA PICS which complies with the relevant rules and regulations is available for download from its website: https://www.aia.com.hk/en/privacy-statement-main, and is also available upon request.
符合相關守則及法例的AIA個人資料收集聲明的最新版本可於以下網址下載：https://www.aia.com.hk/zh-hk/privacy-statement-main，及可向貴公司索取。
** The updated version of AIA Vitality PICS which complies with the relevant rules and regulations is available for download from its website: https://www.aia.com.hk/en/health-and-wellness/aia-vitality/privacy-statement, and is also available upon request.
符合相關守則及法例的AIA Vitality 健康程式個人資料收集聲明的最新版本可於以下網址下載：https://www.aia.com.hk/zh-hk/health-and-wellness/aia-vitality/privacy-statement，及可向貴公司索取。
*** Document Type: I = HKID Card, P = Passport, C = Certificate of Incorporation, B = Business Registration Certificate, X = PRC ID Card / Two-Way Exit Permit / Macau ID Card
證件類別：I = 香港身份證，P = 護照，C = 公司註冊證書，B = 商業登記證，X = 中華人民共和國身份證 / 往來港澳通行證 / 澳門身份證

Download our AIA+ mobile app to manage your policy!
下載AIA+手機應用程式以便輕鬆管理您的保單！

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PTA054007.0426 PCATF01

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