AIA International Limited
(Incorporated in Bermuda with limited liability)

FINANCIAL QUESTIONNAIRE
財政問卷

Policy Number **保單號碼**	**Applicant's Name** **申請人姓名**	**I.D. Card Number / Passport Number** **身份證號碼 / 護照號碼**
Area Code **區域編號**	**Agency / Broker Name** **營業員組別 / 經紀名稱**	**Financial Planner / Broker Code** **財務策劃顧問號碼 / 經紀號碼**
Operations **營運部** VIP ☐	**Financial Planner / Technical Representative's Name** **財務策劃顧問 / 業務代表姓名**	**Financial Planner / Technical Representative's Telephone No.** **財務策劃顧問 / 業務代表聯絡電話**

02282031

Instructions 說明：

If you are applying for Personal Insurance and you are the Proposed Insured

Please complete Part A, B, C, D & F on page 2 & 3. If you are a business owner, please further supplement your business details in Part E on page 3. Upon completion of the above parts, please sign and date in Part G on page 3.

If you are applying for Personal Insurance and you are NOT the Proposed Insured

The Applicant－please complete Part A, B, C, D & F on page 2 & 3. If you are a business owner, please further supplement the business details in Part E on page 3.Upon completion of the above parts, please sign and date in Part G on page 3.

The Proposed Insured－please complete Part A, B, C & D on page 4 & 5. If you are a business owner, please further supplement the business details in Part E on page 5. Upon completion of the above parts, please sign and date in Part F on page 5.

If you are applying for Business Insurance

Please complete Part A, B & C on page 6 & 7. Upon completion of the above parts, please sign and date in Part D on page 7.

如您正在申請個人保險而閣下為準受保人

請完成第二至三頁之A，B，C，D及F部分。若您是公司業務持有人，請於第三頁之E部份補充公司業務資料。當完成上述各部分後，請在第三頁之G部分簽署及填寫日期。

如您正在申請個人保險而閣下並不是準受保人

申請人－請完成第二至三頁之A，B，C，D及F部分。若您是公司業務持有人，請於第三頁之E部份補充公司業務資料。當完成上述各部分後，請在第三頁之G部分簽署及填寫日期。

準受保人－請完成第四至五頁之A，B，C及D部分。若您是公司業務持有人，請於第五頁之E部份補充公司業務資料。當完成上述各部分後，請在第五頁之F部分簽署及填寫日期。

如您正在申請商業保險

請完成第六至七頁之A，B及C部分。當完成上述各部分後，請在第七頁之D部分簽署及填寫日期。

PERSONAL INSURANCE 個人保險－TO BE COMPLETED BY THE APPLICANT由申請人填寫

(This is a mandatory section 此為必須填寫部份)

A. INCOME DETAILS 入息資料 (All the amounts below are in Hong Kong dollars 以下所用數額皆以港元計算)

Average monthly earned income in the past 24 months 在過去二十四個月裡之每月平均工作入息

	Year 年份:	Year 年份:
Income (salary / wages/ director's remuneration) 收入（工資 / 薪金 / 董事酬金）	HK$ 港幣 / Month月	HK $ 港幣 / Month月
Bonuses / Dividends 獎金/紅利	HK$ 港幣 / Month月	HK $ 港幣 / Month月

Average monthly unearned income in the past 12 months 在過去十二個月裡之每月平均非工作入息

Property Rental Income 物業租賃收入	HK$ 港幣 / Month月	Dividend from Shares 股份所得紅利	HK$ 港幣 / Month月
Interest from Bank Deposit 銀行存款利息	HK$ 港幣 / Month月	Net Business Investment Income 企業投資純收入	HK$ 港幣 / Month月
Interest from Fixed Income Securities 債券利息	HK$ 港幣 / Month月	Other (please specify) 其他（請註明）	Details 詳情： HK$ 港幣 / Month月

B. ASSETS資產 (All the amounts below are in Hong Kong dollars 以下所用數額皆以港元計算)

Current Liquid Assets 現時流動資產

Cash 現金	HK$ 港幣	Money in bank accounts 銀行存款	HK$ 港幣	Money market accounts 貨幣市場賬戶	HK$ 港幣
Actively traded stocks 交投活躍的股票	HK$ 港幣	Bonds and mutual funds 債券及互惠基金	HK$ 港幣	US Treasury Bills 美國國庫債券	HK$ 港幣
Assets other than the above (please specify and state the amount) 上述以外之資產 (請詳述及註明金額)			Details 詳情： HK$ 港幣		

Property 物業 (If more than three properties, please use separate paper 如多於三項，請另加紙填寫)

	Owner-occupied Property 自住用途之物業	Investment Property 1 投資物業1	Investment Property 2 投資物業2
Address 地址			
Estimate Current Market Value 估計市值	HK$ 港幣	HK$ 港幣	HK$ 港幣
Outstanding Mortgage - 未償按揭額	HK$ 港幣	HK$ 港幣	HK$ 港幣
Owner / % of ownership x 業主 / 業權之百分比	%	%	%
Property Net Market Value = 物業淨市值	HK$ 港幣	HK$ 港幣	HK$ 港幣

Business Equity 業務持股權

The equivalent dollar amount of shares owned by the Applicant who is a business owner 持有公司業務之申請人所持有股權之等值金額	HK$ 港幣

C. LIABILITIES 債務 (All the amounts below are in Hong Kong dollars以下所用數額皆以港元計算)

Mortgage(s) 按揭	HK$ 港幣	Credit line / Overdraft 信貸額/透支	HK$ 港幣
Personal Loan(s) 私人貸款	HK$ 港幣	Others (please specify) 其他（請註明）	Details 詳情： HK$ 港幣
At this time do you have an undischarged bankruptcy? 現時你是否有未償清的破產債務？ If "yes", please provide details. 若"是"，請提供詳情。			☐ Yes是 ☐ No否 Details 詳情：

D. ESTIMATED NET WORTH 估計淨值

Current Liquid Assets 現時流動資產	+	Property Net Market Value 物業淨市值	-	Liabilities 債務	=	HK$ 港幣

E. DETAILS OF BUSINESS INTEREST 公司業務詳細資料 (All the amounts below are in Hong Kong dollars以下所用數額皆以港元計算)

If the Applicant is a business owner, please complete the followings: 若申請人是公司業務持有人，請填寫以下資料：

Name of Company 公司名稱		Nature of Business 業務性質	
Position held and for how long 擔任的職位及年期		Percentage of shares owned 公司資產所佔百份比	
No. of years in the business 業務在職年期		No. of employees in the company 公司僱員人數	

Audited company accounts for the past 2 years 公司過去兩年經核證之賬目	Year 年份	Year 年份
Business Turnover 營業額	HK$ 港幣	HK$ 港幣
Gross Profit 毛利	HK$ 港幣	HK$ 港幣
Net Profit 純利	HK$ 港幣	HK$ 港幣

Worth of the Business 業務淨值	Year 年份
Total Assets 資產總值	HK$ 港幣
Total Liabilities 債務總額	HK$ 港幣
Estimated Net Worth of the Business 估計業務淨值	HK$ 港幣

F. POLITICALLY EXPOSED PERSON (PEP) DETAILS (Only applicable to Source of Wealth Requirement) 政界人士資料（只適用於財富來源之審查要求）	YES 是	NO 否
Are you, or is your family member*, or have you, or has your family member* been, entrusted with a key position in any government branch, judicial office, military authority, public / statutory body or state-owned corporation (e.g., secretary of department / director of bureau / commissioner, deputy secretary of department / deputy director of bureau / deputy commissioner, permanent secretary, deputy permanent secretary, member of parliament, judge, chairman or deputy chairman of military authority or state-owned corporation, or equivalent position)? 您或您的家庭成員*是否擔任或曾擔任任何政府部門、司法機構、軍方組織、公共 / 法定機構或國有企業之重要職位（例如：司 / 局 / 署長、副司 / 局 / 署長、常任秘書長、副常任秘書長、議員、法官、軍方組織或國有企業正 / 副主席、或同等職位）？	☐	☐
Are you, or is your family member*, or have you, or has your family member* been, entrusted with a key position in a political party (e.g., chairman, deputy chairman, secretary, treasurer, member of executive committee)? 您或您的家庭成員*是否擔任或曾擔任政黨之重要職位（例如：主席、副主席、秘書長、司庫、執行委員會委員）？	☐	☐

If the answer is "Yes" to either question above, please provide details of the relevant key position that has been entrusted with, including the highest title within the relevant organization, the name of the organization, the country / region / province of the organization, and the term of appointment. If the position is held by your family member*, please provide his / her name and relationship with you.
*Family member refers to your spouse, partner, parent, child and his / her spouse or partner, and your sibling.
若上述任何選項屬「是」，請闡明有關重要職位之詳情，包括在有關機構內之最高職銜、機構之名稱、機構所屬之國家 / 地區 / 省份、以及其任命年期。如重要職位是由您的家庭成員*擔任，請提供他 / 她的姓名及與您的關係。
*家庭成員是指您的配偶、伴侶、父母、子女及其配偶或伴侶以及您的兄弟姊妹。

G. DECLARATION 聲明

I / We hereby declare, to the best of my/our knowledge, that the foregoing statements are true and complete and will form part of the basis of any contract of life assurance. 茲聲明上述乃本人 / 我們所知之事實和全部，並構成選擇任何壽險合約之基礎。

Name of Applicant 申請人姓名	Signature of the Applicant (Please do not sign on blank form) 申請人簽署（請勿在空白表格上簽署）	Date: (MM/DD/ YYYY) 日期：(月/日/年)
Name of Financial Planner/ Technical Representative 財務策劃顧問 / 業務代表－姓名	Signature of the Financial Planner/ Technical Representative 財務策劃顧問 / 業務代表簽署	Date: (MM/DD/ YYYY) 日期：(月/日/年)

PERSONAL INSURANCE 個人保險－TO BE COMPLETED BY THE PROPOSED INSURED 由準受保人填寫

(For Proposed Insured other than the Applicant 如準受保人非申請人)

A. INCOME DETAILS 入息資料 (All the amounts below are in Hong Kong dollars 以下所用數額皆以港元計算)

Average monthly earned income in the past 24 months 在過去二十四個月裡之每月平均工作入息

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Average monthly unearned income in the past 12 months 在過去十二個月裡之每月平均非工作入息

Property Rental Income 物業租賃收入	HK$ 港幣 / Month月	Dividend from Shares 股份所得紅利	HK$ 港幣 / Month月
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B. ASSETS資產 (All the amounts below are in Hong Kong dollars 以下所用數額皆以港元計算)

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	Owner-occupied Property 自住用途之物業	Investment Property 1 投資物業1	Investment Property 2 投資物業2
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Owner / % of ownership x 業主 / 業權之百分比	%	%	%
Property Net Market Value = 物業淨市值	HK$ 港幣	HK$ 港幣	HK$ 港幣

Business Equity 業務持股權

The equivalent dollar amount of shares owned by the Proposed Insured who is a business owner 持有公司業務之準受保人所持有股權之等值金額	HK$ 港幣

C. LIABILITIES 債務 (All the amounts below are in Hong Kong dollars以下所用數額皆以港元計算)

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Personal Loan(s) 私人貸款	HK$ 港幣	Others (please specify) 其他（請註明）	Details 詳情： HK$ 港幣
At this time do you have an undischarged bankruptcy? 現時你是否有未償清的破產債務？ If "yes", please provide details. 若 "是" ，請提供詳情。			☐ Yes 是 ☐ No 否 Details 詳情：

D. ESTIMATED NET WORTH 估計淨值

Current Liquid Assets 現時流動資產	+	Property Net Market Value 物業淨市值	-	Liabilities 債務	=	HK$ 港幣

E. DETAILS OF BUSINESS INTEREST 公司業務詳細資料 (All the amounts below are in Hong Kong dollars以下所用數額皆以港元計算)

If the Proposed Insured is a business owner, please complete the followings: 若準受保人是公司業務持有人，請填寫以下資料：

Name of Company 公司名稱		Nature of Business 業務性質	
Position held and for how long 擔任的職位及年期		Percentage of shares owned 公司資產所佔百份比	
No. of years in the business 業務在職年期		No. of employees in the company 公司僱員人數	

Audited company accounts for the past 2 years 公司過去兩年經核證之賬目	Year 年份	Year 年份
Business Turnover 營業額	HK$ 港幣	HK$ 港幣
Gross Profit 毛利	HK$ 港幣	HK$ 港幣
Net Profit 純利	HK$ 港幣	HK$ 港幣

Worth of the Business 業務淨值	Year 年份
Total Assets 資產總值	HK$ 港幣
Total Liabilities 債務總額	HK$ 港幣
Estimated Net Worth of the Business 估計業務淨值	HK$ 港幣

F. DECLARATION 聲明

I / We hereby declare, to the best of my/our knowledge, that the foregoing statements are true and complete and will form part of the basis of any contract of life assurance. 茲聲明上述乃本人 / 我們所知之事實和全部，並構成選擇任何壽險合約之基礎。

Name of Proposed Insured 準受保人姓名	Signature of Proposed Insured (Please do not sign on blank form) 準受保人簽署（請勿在空白表格上簽署）	Date: (MM/DD/ YYYY) 日期：(月/日/年)
Name of Applicant 申請人姓名	Signature of the Applicant (Please do not sign on blank form) 申請人簽署（請勿在空白表格上簽署）	Date: (MM/DD/ YYYY) 日期：(月/日/年)
Name of Financial Planner/ Technical Representative 財務策劃顧問 / 業務代表－姓名	Signature of the Financial Planner/ Technical Representative 財務策劃顧問 / 業務代表簽署	Date: (MM/DD/ YYYY) 日期：(月/日/年)

Business Insurance 商業保險

Please complete this section when applying for Business Insurance such as Keyman Insurance, Corporate Financial Planning, Employee Benefit, Partnership Insurance and Business Loan Protection
如申請商業保險（如公司要員壽險、公司財務策劃、員工福利、合夥人壽險、商業借貸保障)，請填寫此部分

A. PROPOSED INSURED INCOME DETAILS 準受保人入息資料 (All the amounts below are in Hong Kong dollars以下所用數額皆以港元計算)

Average monthly earned income in the past 24 months 在過去二十四個月裡之每月平均收入

	Year 年份:	Year 年份:
Annual Income (salary / wages / director's remuneration) 全年收入（工資 / 薪金 / 董事酬金）	HK$ 港幣 / Month月	HK$ 港幣 / Month月
Bonuses / Dividends 獎金/紅利	HK$ 港幣 / Month月	HK$ 港幣 / Month月

B. DETAILS OF BUSINESS INTEREST 公司業務詳細資料 (All the amounts below are in Hong Kong dollars以下所用數額皆以港元計算)

(Note: Please refer to the Financial Underwriting Requirements for submission of solid proof 註：請參閱財政核保要求遞交證明文件)

Name of Company 公司名稱		Nature of Business 業務性質	
Position held and for how long 擔任的職位及年期		Percentage of shares owned 公司資產所佔百份比	
No. of years in the business 業務在職年期		No. of employees in the company 公司僱員人數	

Audited company accounts for the past 2 years 公司過去兩年經核證之賬目	Year 年份	Year 年份
Business Turnover 營業額	HK$ 港幣	HK$ 港幣
Gross Profit 毛利	HK$ 港幣	HK$ 港幣
Net Profit 純利	HK$ 港幣	HK$ 港幣

Worth of the Business 業務淨值	Year 年份
Total Assets 資產總值	HK$ 港幣
Total Liabilities 債務總額	HK$ 港幣
Estimated Net Worth of the Business 估計業務淨值	HK$ 港幣

C. Other Supplementary Information 其他補充資料

Keyman Insurance / Corporate Financial Planning 公司要員壽險 / 公司財務策劃

(i) Please give reasons why the Proposed Insured is considered to be so valuable to the company. 請提供準受保人為公司要員之原因。

_____

(ii) Are or will other key employees have cover effected on their lives? If "Yes", please give details. If "No", please give details and explanation.
公司其他的要員是否 / 會否購買此保險？倘 "是" ，請詳述之。倘 "否" ，請詳述及說明原因。

☐ Yes 是 ☐ No 否

_____

Partnership Insurance 合夥人壽險

(i) What liabilities arise on the death of the Proposed Insured? 倘準受保人去世，公司要負擔什麼債務？

_____

(ii) Are policies affected on all shareholders / partners? If yes, please give details 是否所有股東 / 合夥人均已投保？倘是，請詳述之。

☐ Yes 是 ☐ No 否

_____

(iii) What is the current valuation on the shares/partnership? (Please submit Buy & Sell Agreement and current official valuation report for reference.)
公司股份 / 合夥資產時值多少？（請遞交買賣協議書以作參考）

_____

Business Loan Protection 商業借貸保障

(Please submit Loan Agreement for reference.)（請遞交貸款合約以作參考）

Name of Lender 貸款人姓名		Loan Amount 貸款額	HK$ 港幣
Repayment Period 還款期		Purpose of the Loan 借貸目的	
Commencement Date of the Loan 借貸日期			

D. DECLARATION 聲明

I / We hereby declare, to the best of my/our knowledge, that the foregoing statements are true and complete and will form part of the basis of any contract of life assurance. 茲聲明上述乃本人 / 我們所知之事實和全部，並構成選擇任何壽險合約之基礎。

Name of Proposed Insured 準受保人姓名	Signature of Proposed Insured (Please do not sign on blank form) 準受保人簽署 (請勿在空白表格上簽署)	Date: (MM/DD/ YYYY) 日期：(月/日/年)
Name of Applicant 申請人姓名	Signature of the Applicant (Please do not sign on blank form) 申請人簽署（請勿在空白表格上簽署）	Date: (MM/DD/ YYYY) 日期：(月/日/年)
Name of Financial Planner/ Technical Representative 財務策劃顧問 / 業務代表－姓名	Signature of the Financial Planner/ Technical Representative 財務策劃顧問 / 業務代表簽署	Date: (MM/DD/ YYYY) 日期：(月/日/年)