

Generali Life (Hong Kong) Limited

Assicurazioni Generali S.p.A.  
Hong Kong Branch

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忠意人壽(香港)有限公司

忠意保險有限公司 香港分行

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## CREDIT CARD PAYMENT AUTHORIZATION FORM 信用卡付款授權書

Please fill in the appropriate boxes and in English (Block Letters) 請填寫適當方格及用英文正楷填寫											
I authorize Generali Life (Hong Kong) Limited / Assicurazioni Generali S.p.A. Hong Kong Branch (whichever applicable) (the " <b>Company</b> ") to debit my credit card account stated as below in respect of the payment of premium, fees and / or charges (if any), and levy on insurance premium* under this application / policy until my further written notice. I understand at least 2 working days' written notice in advance is required for termination of this payment instruction. Details are as follows:- 本人授權忠意人壽(香港)有限公司/忠意保險有限公司香港分行(如適用)(「 <b>貴公司</b> 」)由本人下列指定之信用卡賬戶扣除此投保申請 / 保單之應繳保費、費用及 / 或收費〔如有〕、及保費徵費*，直至另行通知。 本人明白如需取消此付款指示，必須於最少兩個工作天前以書面提出。詳細資料如下：											
Name of Card Issuer 發卡銀行名稱						Country of Issue 發卡國家			Type of Credit Card 信用卡類別 <input type="checkbox"/> VISA <input type="checkbox"/> Master 萬事達卡		
Credit Card Number 信用卡賬戶號碼											
Credit Card Expiry Date 信用卡到期日 _____ (month 月) / _____ (year 年)											
* Name of Cardholder (in English) 持卡人英文姓名 * (As shown on your Credit Card 必須與閣下信用卡上的資料相同)						* Signature of Cardholder 持卡人簽名 _____ X					
<b>General Information 一般資料</b>						ID Number of Cardholder: 持卡人身份證明文件號碼:					
1) Policy Number: 保單號碼:						1) Policyholder Name: 保單持有人名稱:					
2) Policy Number: 保單號碼:						2) Policyholder Name: 保單持有人名稱:					
<b>Declaration 聲明</b> I / We acknowledge that I / we have been provided with a copy of the Personal Information Collection Statement (the " <b>Statement</b> ") issued by Generali Life (Hong Kong) Limited / Assicurazioni Generali S.p.A. Hong Kong Branch (whichever applicable) (the " <b>Company</b> "). I / We confirm that I / we have read and understood the <b>Statement</b> . I / We agree that the <b>Company</b> may collect, use, store, disclose, transfer and otherwise process my / our personal data in accordance with the terms of the <b>Statement</b> . I / We further confirm that I / we have obtained the express consent of the life insureds and any other relevant individuals (where applicable) for providing their personal data to the <b>Company</b> for the purposes stated in the <b>Statement</b> and for allowing the <b>Company</b> to collect, use, store, disclose, transfer and otherwise process such personal data in accordance with the terms of the <b>Statement</b> . 本人 / 我們確認，本人 / 我們已獲提供一份由忠意人壽 (香港)有限公司 / 忠意保險有限公司香港分行(如適用) (「 <b>貴公司</b> 」) 發出的收集個人資料聲明 (「 <b>該聲明</b> 」)。本人 / 我們確認已經閱讀並且明白 <b>該聲明</b> 。本人 / 我們同意 <b>貴公司</b> 可依照 <b>該聲明</b> 的條款收集、使用、儲存、披露、轉移及以其他方式處理本人 / 我們的個人資料。本人 / 我們進一步確認，本人 / 我們已獲得受保人和任何其他有關人士 (如適用) 的明示同意，可以按照 <b>該聲明</b> 所述的用途將他們的個人資料提供給 <b>貴公司</b> ，並允許 <b>貴公司</b> 可依照 <b>該聲明</b> 的條款收集、使用、儲存、披露、轉移及以其他方式處理該等個人資料。											
Signature of Policyholder 保單持有人簽署 _____ X						Date (dd / mm / yyyy) 日期 (日 / 月 / 年)					

### \*NOTES 附註

1. Please ensure that you sign the form in the usual way that you would sign on your Credit Card.  
請確保 貴戶在此授權書內之簽名，與信用卡之簽署完全相同。
2. Effective from 1 January 2018, the Insurance Authority collects levy on insurance premiums from policy holders through insurance companies.  
由 2018 年 1 月 1 日開始，保險業監管局透過保險公司向保單持有人收取保費徵費。

## Personal Information Collection Statement 收集個人資料聲明

- a) From time to time, it is necessary for you to supply Generali Life (Hong Kong) Limited / Assicurazioni Generali S.p.A. Hong Kong Branch (where applicable) (the “**Company**”) with data about yourself(ves), policyholder(s), life insured(s), beneficiary(ies), claimant(s), and / or other relevant individuals (the “**Personal Data**”) in connection with the provision of insurance and / or related products and services to you, the processing of claims under insurance policies issued and / or arranged by the **Company**, and / or the processing of any or all other requests, enquiries and complaints from you.

閣下須要不時向忠意人壽（香港）有限公司/忠意保險有限公司香港分行（如適用）（「**本公司**」）提供關於閣下自己、保單持有人、受保人、受益人、索償人及/或其他有關人士的資料（「**個人資料**」），以讓**本公司**為閣下提供保險及/或相關產品與服務，處理經由**本公司**發出及/或安排的保單之下的索償事宜，及/或處理閣下提出的任何或所有其他要求、查詢和投訴。

- b) Provision of the **Personal Data** to the **Company** by you is voluntary. However, failure to supply the **Personal Data** may result in the **Company** being unable to provide insurance and / or related products and services to you, process claims under insurance policies issued and / or arranged by the **Company**, and / or process any or all other requests, enquiries, or complaints from you.

閣下向**本公司**提供的個人資料全屬自願。然而，若閣下未能提供個人資料，可能導致**本公司**不能夠為閣下提供保險及/或相關產品與服務，處理經由**本公司**發出及/或安排的保單之下的索償事宜，及/或處理閣下提出的任何或所有其他要求、查詢和投訴。

- c) The purposes for which the **Personal Data** may be used are as follows: (i) administering your insurance application, arranging and executing insurance contracts and / or related products and services, and managing your account with the **Company**; (ii) processing (including, but not limited to, investigating, analyzing, assessing and adjudicating) and / or settlement of claims under insurance policies issued and / or arranged by the **Company**; (iii) exercising rights of subrogation(if applicable); (iv) collection of amounts outstanding (if any) from customers; (v) arranging coinsurance and / or reinsurance in respect of the insurance policies issued and / or arranged by the **Company**; (vi) communicating with customers via telephone, mail, e-mail, facsimile and other communication means; (vii) providing customer services (including, but not limited to, processing enquiries and complaints) and other related activities; (viii) conducting data matching procedures; (ix) designing insurance and / or related products and services for customers' use; (x) marketing insurance and / or other related products and services of the **Company** and / or its affiliated companies (which includes, but are not limited to, its group companies, parent company, trust companies of the **Company**'s parent company) (hereinafter referred to as the **Group Entities**"); (xi) statistical or actuarial research of the **Company**, its **Group Entities**, insurance industry associations or federations, government departments, regulatory or other recognized bodies; (xii) complying with the requirements under any laws, rules, regulations, codes, guidelines, court orders, compliance policies and procedures, and any other relevant requirements which the **Company** and / or its **Group Entities** are expected to comply with, including, without limitation, performing due diligence on customers and making disclosures of the relevant information; and (xiii) fulfilling any other purposes directly relating to (i) to (xii) above.

**個人資料**可被用於以下用途：(i) 處理閣下的保險申請，安排並執行保險合約或相關產品與服務，並管理閣下在**本公司**的賬戶；(ii) 處理（包括但不限於調查、分析、評估和裁定）及/或理賠經由**本公司**發出及/或安排的保單之下的索償事宜；(iii) 行使代位權（如適用）；(iv) 向客戶追收尚欠金額（如有）；(v) 經由**本公司**發出及/或安排的保單之下籌劃共同保險及/或再保險；(vi) 透過電話、郵件、電郵、傳真及其他通訊方式與客戶聯絡；(vii) 提供客戶服務（包括但不限於處理查詢和投訴）及其他相關活動；(viii) 進行資料核對程序；(ix) 設計保險及/或相關產品與服務供客戶使用；(x) 推銷**本公司**及/或**本公司**的關聯公司（包括但不限於本集團的公司、母公司、本母公司的信託公司）（下文合稱為「**集團實體**」）的保險及/或其他相關產品與服務；(xi) **本公司**、**集團實體**、保險業協會或聯會、政府部門、監管或其他認可機構的統計或精算研究；(xii) 為遵從任何法律、規則、規例、守則、指引、法院命令、合規政策和程序的規定，或**本公司**及/或**集團實體**應遵守的任何其他有關規定，包括但不限於對客戶進行盡職審查及披露有關資料；及 (xiii) 實現與上述(i)至(xii)直接有關的任何其他用途。

- d) The **Personal Data** held by the **Company** shall be kept confidential, but the **Company** may provide the **Personal Data** to the following parties (whether within or outside the Hong Kong Special Administrative Region) for the purposes set out in paragraph (c) above, without prior notification to you and/or any other relevant individuals to whom the **Personal Data** is related: (i) intermediaries, claims service provider, reinsurers, banks and credit-card companies, health and medical organizations, professional advisers, contractors, business partners, and / or any other relevant parties, as appropriate, who provide administrative, telecommunication, computer, payment, marketing, investigation, advisory and/ or other services to the **Company** in connection with the operation of its business; (ii) relevant insurance industry associations or federations, and/ or members of such industry associations or federations; (iii) overseas locations or branches, as appropriate, of the **Company** and / or its **Group Entities**; (iv) persons to whom the **Company** and / or its **Group Entities** are under an obligation to make disclosure under the requirements of as mentioned in (c) (xii); (v) any court, government departments, regulatory or other recognized bodies (including, without limitation, tax authority, insurance authority, etc.) under any laws binding on the **Company** and / or its **Group Entities**; (vi) lawful successors or assigns of the **Company**; and (vii) persons who owe a duty of confidentiality to the **Company** and / or its **Group Entities**.

由**本公司**持有的**個人資料**將受到保密，但**本公司**可依據以上（c）段所列的用途向以下各方（不論在香港特別行政區境內還是境外）提供**個人資料**，事前無須知會閣下及/或該等**個人資料**所涉及的任何其他有關人士：(i) 中介人、索償服務提供商、共同保險公司、再保險公司、銀行及信用卡公司、健康及醫療機構、專業顧問、承包商、業務夥伴及/或以適用於向**本公司**提供行政、電訊、電腦、付款、推銷、調查、諮詢及/或其他與業務營運相關服務的有關各方；(ii) 相關的保險業協會或聯會，及/或該等協會或聯會的成員；(iii) **本公司**及/或以適用的**集團實體**海外辦事處或分行；(iv) 根據上述(c) (xii)的規定，**本公司**及/或**集團實體**負有義務須向其作出披露的人士；(v) 任何根據法律約束之下，**本公司**及/或**集團實體**須向其提供資料的任何法院、政府部門、監管或其他認可機構（包括但不限於稅務局、保險業監管局等）；(vi) **本公司**的合法繼承人或受讓人；及 (vii) 對**本公司**及/或**集團實體**負有保密責任的人士。

- e) The **Company** may verify any or all of the **Personal Data** by using information collected and released or transferred by relevant insurance industry associations or federations, and / or members of such industry associations or federations.

**本公司**可使用由相關的保險業協會或聯會及/或該等協會或聯會的成員所收集及發放或轉移的資料，來核實任何或所有**個人資料**。

- f) In accordance with the *Personal Data (Privacy) Ordinance (Cap 486)*: (i) any individual has the right to: (A) check whether the **Company** holds **Personal Data** about him / her and, if so, obtain a copy of such data; (B) require the **Company** to correct any **Personal Data** relating to him / her that is inaccurate; and (C) ascertain the **Company**'s policies and practices in relation to **Personal Data** and to be informed of the kind of **Personal Data** held by the **Company**; and (ii) the **Company** has the right to charge a reasonable fee for the processing of any data access request.

根據第486章《個人資料（私隱）條例》：(i) 任何人士均有權：(A)查詢**本公司**有沒有持有其**個人資料**，如有的話，可取得一份該等資料；(B) 要求**本公司**改正其任何不正確的**個人資料**；及(C) 查明關於**本公司**的**個人資料**政策和處事常規，並可獲通知有關**本公司**所持**個人資料**的種類；及 (ii) **本公司**有權就處理任何查閱**個人資料**的要求之下收取合理的費用。

- g) The person to whom requests for access to **Personal Data** and / or correction of **Personal Data** and / or for information regarding policies and practices and kinds of **Personal Data** held are to be addressed as follows: *Personal Data Protection Officer, Generali Life (Hong Kong) Limited / Assicurazioni Generali S.p.A. Hong Kong Branch (where applicable), 21/F, 1111 King's Road, Taikoo Shing, Hong Kong.*

如欲查閱及/或改正**個人資料**及/或查詢關於**本公司**的政策和處事常規及所持**個人資料**的種類，請向以下人員提出要求：個人資料保護主任忠意人壽（香港）有限公司 或 忠意保險有限公司香港分行（如適用）香港太古城英皇道1111號21樓

Note: In case of discrepancies between the English and Chinese versions of this Personal Information Collection Statement, the English version shall prevail.

附註：本收集個人資料聲明的英文及中文版本之間如有任何歧義，概以英文版本為準。