

Application/Policy Number 投保書/保單編號:	

Declaration by Intermediary 保險中介人聲明書

Important Notes:

- 1. This form is to be signed by the Insurance Intermediary.
- 2. Every application must be accompanied by this form.

重要事項:

- 1. 此表格應由保險中介人填寫及簽署。
- 2 每份投保由請必須一併遞交出表於

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"本公司"或"貴公司":

AXA China Region Insurance Company (Bermuda) Ltd (Incorporated in Bermuda with limited liability)

安盛保險(百慕達)有限公司

(於百慕達註冊成立的有限公司)

/AXA China Region Insurance Company Limited

安盛金融有限公司

/AXA Wealth Management (HK) Limited

安盛財富管理(香港)有限公司

	ame of Insurance Intermediary 險中介人姓名	Signature of Insurance Intermediary 保險中介人簽署	Date (YYYY/MM/DD) 簽署日期(年/月/日)
	是成 项分人/ 1寸分人// 百/ 10 短名/ 1 開/	C1X 体中明之所有 X 计。	
3)	the Proposed Owner/Owner have sig 建議持有人/持有人於香港簽署有關	ned all the documents in respect of the in	surance application in Hong Kong.
AN	D及	1 1 7 () () () () () () () () () (200 3 10 VIII 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2)	language of the Proposed Owner's/C	he proposed insurance plan(s) in Hong Ko Owner's choice 本,本人已向建議持有人/持有人詳盡解釋	
ΑN	投保申請之整個宣傳及銷售過程,均 D及	在香港進行	
1)	the entire solicitation and selling prod	cess in respect of the insurance application	n has been conducted in Hong Kong
	·	(VIII)	
本ノ	Į.	(保險中介人姓名)_	
reç	gistration number), confirm that:		,
l.		(name of insurance intermedia	arv)
2.	Declaration 聲明		
	ame of Proposed Owner/Owner: 議持有人/持有人姓名:		
建	ame of Proposed Insured/Insured: 議被保人/被保人姓名:		
		ed Owner/Owner 建議被保人/被保人/	建議持有人/持有人
	每历1文体中胡必须一件题又此农恰。		