

4. Declaration and Signature 聲明及簽署

I/We hereby authorize Standard Life (Asia) Limited (the "Company") to act upon written instructions transmitted by electronic means producing a facsimile of a document ("facsimile instructions") purporting to bear my/our signature(s) without verifying the authenticity of the signature(s) appearing thereon or enquiring as to the validity of the facsimile instructions and to consider the facsimile instructions to be of the same force and effect as written instructions made in accordance with the policy.

本人/吾等茲授權標準人壽保險(亞洲)有限公司(「貴公司」)根據通過電子方式發給貴公司並帶有聲稱屬於本人/吾等的簽署之傳真文件(「傳真指示」)，代表本人/吾等行事，並視該傳真指示之效力如同根據保單規定發出的書面指示一樣，貴公司亦不必核實該簽署的真偽或查問有關傳真指示的有效性。

The Company may be in its sole discretion accept or reject such facsimile instruction.
貴公司可全權決定接受或拒絕此傳真指示。

All instructions transmitted to the Company through facsimile transmission and reasonably believed by the Company to have been given by me/us and which have been relied on or acted upon by the Company shall be irrevocable and binding on me/us whether or not such instructions have in fact been given personally or authorized by me/us.

所有通過傳真發給貴公司，且貴公司合理地相信乃由本人/吾等發出的指示，凡屬貴公司已經依指示行事的，均不得撤回，並對本人/吾等具有約束力；不論該指示實際上是否由本人/吾等親自發出或授權發出，概無例外。

Under no circumstances shall the Company have any duty to enquire or verify the identity or authority of the person giving instruction by means of facsimile transmission.
在任何情況下，貴公司概無責任查問或核實通過傳真發出指示的人士的身分或授權。

I/We hereby undertake to indemnify and save the Company harmless from all losses and liabilities that the Company may suffer, in any way relating to or arising out of the Company action upon, delaying in acting upon or refusing to act upon any facsimile instructions, including improper, unauthorized or fraudulent facsimile instruction given by any person.

本人/吾等特此承諾，如因貴公司依據任何傳真指示(包括由任何人士發出的不妥當、未經授權或欺詐性傳真指示)行事，延遲依據或拒絕依據任何傳真指示行事，由此導致貴公司遭受的各種損失和責任，本人/吾等將全面賠償貴公司使貴公司免受受損。

I/We fully understand that if the Policy is expressed to be for the benefit of or purporting to confer a benefit upon my/our spouse or child(ren), or if my/our spouse or child(ren) is named as the beneficiary(ies) of the Policy, the Policy may be subject to application of the Married Persons Status Ordinance (Chapter 182 of the Laws of Hong Kong) ("MPSO"). In such circumstances, the money payable under the Policy may not be able to be used to repay my/our debts. As a result, I/we may not be able to use or effect any assignment of the Policy as collateral for any of my/our debts.

本人/吾等完全明白，若本保單表明若本人/吾等的配偶或子女受益或擬以賦予利益予本人/吾等的配偶或子女，或本保單上將本人/吾等的配偶或子女列為受益人，本保單可能須符合香港法例第182章《已婚者地位條例》的規定所監管。在該等情況下，保單下應付的款項可能不可用於償還本人/吾等的債項。因此，本人/吾等可能不可使用或轉讓本保單作為本人/吾等債項的抵押品。

I/We hereby declare that any personal information of third parties provided by me/us to the Company (whether provided under this application or otherwise provided) in relation to this application has been obtained by me/us in compliance with the PDPO and the relevant third party has agreed to the disclosure of his/her personal information to the Company in relation to this application for the purposes as set out in this personal information collection statement. I/We agree to indemnify and hold harmless, on demand, the Company against all losses, liabilities and costs which the Company may incur arising out of, or in connection with, any breach of the declaration set forth in this paragraph.

本人/吾等特此聲明，由本人/吾等就此申請提供予貴公司的任何第三方個人資料(無論載於此申請書或從其他途徑所提供)乃由本人/吾等在遵守個人資料(私隱)條例的情況下獲得，且有關第三方已同意為此等個人資料收集聲明所載之目的就此申請向貴公司提供其個人資料。本人/吾等同意應貴公司要求，就貴公司因發生任何違反本條款所載的聲明，而可能招致或與之相關的任何損失、責任及費用，對貴公司作出賠償，並使貴公司免受損害。

I/We further acknowledge that I/we have been given sufficient time to seek independent advice (legal, financial or otherwise) in relation to this Application and the declarations made in the above. The Chinese version of the declarations is translated for my/our reference only.
本人/吾等進一步確認，本人/吾等有充足時間就此申請及上文所作聲明而尋求獨立顧問(法律、財務或其他)之意見，本聲明之中文譯本只供本人/吾等作參考。

パスポートと同じサインをお願い致します

Signature of First Policy Owner
第一保單持有人簽署

Date Signed (dd/mm/yy)
簽署日期 (日/月/年)

Signature of Second Policy Owner
(if applicable)
第二保單持有人簽署(如適用)

Date Signed (dd/mm/yy)
簽署日期 (日/月/年)

Signature of Policy Assignee (for collateral assignment only) (if applicable)
保單受讓人簽署(只限抵押轉讓)(如適用)

Date Signed (dd/mm/yy)
簽署日期 (日/月/年)

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

Date Signed (dd/mm/yy)
簽署日期 (日/月/年)

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

Date Signed (dd/mm/yy)
簽署日期 (日/月/年)