

QUESTIONNAIRE
LIFE INSURANCE APPLICATION FOR OVERSEAS RESIDENTS
海外居民之人壽保險申請問卷

Transamerica Life (Bermuda) Ltd., (“Transamerica”) does not permit company and/or product-specific discussions outside of the jurisdictions where it is authorized to sell life insurance products. Company-specific marketing materials, illustrations or product-specific information may not be discussed with or presented to an applicant in a jurisdiction where Transamerica is not authorized to sell insurance. This Questionnaire is required to be completed by the producer and the applicant for all applications for life insurance on individuals that are not residents of Hong Kong or Singapore. Please complete each question in as much detail as possible.

全美人壽百慕達(全美)不容許任何與全美及/或其有關產品的商討，在其被授權銷售保險產品的區域以外進行。營業員亦不能在全美被授權銷售保險產品的區域以外，向申請人討論或展示與全美有關的宣傳單張、建議書或與產品有關的資料。此問卷須由營業員及人壽保險申請人(如受保人為非香港或新加坡居民)填寫。請詳細回答以下所有問題。

Policy Number 保單號碼 _____

1. Please describe the following in detail 請詳述以下各項:
 - a. Location(s) where the specific Transamerica product was introduced to the applicant. 營業員向申請人介紹有關全美產品的地點。

(The term “applicant” refers to the proposed owner of the policy if the owner is a natural person or to the proposed insured if the owner is not.) 申請人一詞意指準保單持有人，如保單持有人為一自然人；反之，則指準受保人而言。
 - b. Personal face-to-face meeting 面對面的個人會議: Yes 是 No 否
 - c. Telephone 以電話通訊: Yes 是 No 否
 - d. Mail/Email 郵遞 / 電郵: Yes 是 No 否

2. Did the applicant introduce the subject of insurance on his/her own initiative 申請人 是否自發性提出有關保險的議題: _____ Yes 是 No 否
If no, please give the details 如否，請詳述: _____

3. Please indicate if any part of solicitation took place while the applicant was in his/her residence location 請說明是否有任何部分的銷售過程，曾經在申請人的居住地進行:
 (“Solicitation” includes the presentation of any marketing or sales materials or illustrations to an applicant. Company-specific marketing materials, illustrations or product specific information may not be discussed with or presented to an applicant in a jurisdiction where Transamerica is not authorized to sell insurance.)
 (“銷售過程”包括向申請人展示宣傳或銷售資料或建議書。營業員不能在全美被授權銷售保險產品的區域以外，向申請人討論或展示與全美有關的宣傳單張、建議書或與產品有關的資料)。
Yes 是 No 否
If yes, please give the details 如是，請詳述: _____

4. When/where did the applicant first receive company specific marketing materials, illustrations and product information 申請人於何時及何地首次收到全美的宣傳單張、建議書及產品資料:

5. Please describe how the applicant and producer met 請描述申請人與營業員會面之詳情:

6. Where the application was completed and signed 人壽保險申請書在何處填妥及簽署:

7. Did anyone other than the producer assist in completing the application or provide any product-specific information 除了營業員外，是否還有其他人士協助填寫人壽保險申請書或提供與產品有關的資料:
Yes 是 No 否
If yes, please give details 如是，請詳述: _____
8. Explain the circumstances by which the applicant was in the jurisdiction where the application was signed 請詳述申請人簽署人壽保險申請書時，當時是在何種原因及情況下到達當地:

9. Explain the circumstances of where and how the medical/paramedical exam and any other underwriting requirements are to be completed 請詳述體檢及其他核保要求在哪處及如何完成:

IMPORTANT NOTICE: The laws related to life insurance products, including tax and estate laws, vary by country/jurisdiction. Transamerica does not provide tax or legal advice and applicants are encouraged to consult with their own tax and/or legal counsel regarding the purchase of life insurance products.

重要聲明：有關人壽保險產品的法例，包括稅務及遺產法例，會因應不同區域而有所不同。全美不會提供稅務及/或法律意見，建議申請人就有關投保人壽保險產品之事宜，向其稅務及/或法律顧問徵詢意見。

I certify that the above information is accurate 本人證實以上陳述皆為屬實:

Applicant Name (please print)
申請人姓名

Applicant Signature
申請人簽署

Date
日期

Producer Name (please print)
營業員姓名

Producer Signature
營業員簽署

Agency Code
營業組代碼

Date
日期