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
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香港分行

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Trust Verification Form
信託核實表格

Private & Confidential 私人及機密

Policy Number
保單號碼 | | | | | | | | |

Complete this form if the Insurance Application / Policy is directly or ultimately owned by a Trust **如投保申請 / 保單由信託直接或最終持有，請填寫此表格**			
Name of (Proposed) Insured (準)受保人姓名		ID. Card / Passport No. 身份證 / 護照號碼	
Name of the (Proposed) Policy Owner (準)保單持有人姓名		Name of the Insurance Intermediary 保險中介人姓名	

1. Trust Information 信託資料

Full Name of Trust
信託全名 _____

Set up date of Trust
信託成立日期 _____

Identification No. (if any) granted by any applicable official bodies (e.g. tax identification number)
任何官方機構授予之識別號碼(如繳稅證件號碼) _____

Type of Trust 信託類別 ☐ Revocable 可撤回 ☐ Irrevocable 不可撤回

Governing Laws of the Trust (Country)
信託監管法律 (國家) _____

Purpose and Nature of the Trust
成立信託的目的與性質 _____

2. Settlor & Individual Having Ultimate Control 信託財產授予人及對信託擁有最終控制權之個人

(e.g. Settlor or any individual who is entitled to a vested interest in not less than 25% of the capital of the trust property or an individual who has ultimate control over trust. 如信託財產授予人，或有權享有信託財產的資本既得權益不少於 25%的任何個人，或對信託擁有最終控制權之個人。)

Full Name 全名	Relationship to Proposed Insured 與準受保人關係	ID Card / Passport No.* 身份證/護照號碼*	Date of Birth 出生日期	Country of Birth 出生國家	Tax Residence 稅務居住地	Residential Address* 住宅地址*

*** Please provide the certified true copy 請附上已核證之副本**

3. Trust Beneficiary(ies) 信託受益人

If only a class of beneficiary is available for identification, list out the name and scope of the class (e.g. children of a named individual)
若只有一類別之受益人可供識別，請列明該組別之名稱和類別 (如: 某指名人士之子女) 。

Full Name 全名	Relationship to Settlor 與財產授予人關係	Sex 性別	ID Card / Passport No.* 身份證/護照號碼*	Date of Birth 出生日期	Country of Birth 出生國家	Country of Residence 居住國家	Tax Residence 稅務居住地	Discretionary Beneficiary? 酌情受益人?	Beneficial Interest Share 實益百分比
								☐ Yes 是 ☐ No 否	
								☐ Yes 是 ☐ No 否	
								☐ Yes 是 ☐ No 否	
								☐ Yes 是 ☐ No 否	
								☐ Yes 是 ☐ No 否	

*** Please provide the certified true copy 請附上已核證之副本**

Total must be equal to 100% `總數必須等於 100%

4. Trustee 信託人

a. ☐ **Institutional or Corporate Trustee acting in professional capacity #**
機構或公司信託人(以專業身份行事#)

☐ **Institutional or Corporate Trustee not acting in professional capacity #**
機構或公司信託人 (非以專業身份行事#)

 # Professional capacity means acting in the course of a profession or business which consists of or includes the provision of services in connection with the administration or management of trusts (or a particular aspect of the administration or management of trusts)
 # 以專業身份行事是指包含或包括提供信託管理服務(或某方面的信託管理服務)的行業或業務的過程中管理信託

Full Name 全名	Governing Laws and Regulations 監管法律及條例	Nature of Business 業務性質

b. ☐ **Individual Trustee / Protector / Enforcer**
個人信託人/保護人/執行人

Full Name 全名	Capacity (Individual Trustee/ Protector/ Enforcer) 身份 (個人信託人/保護人/執行人)	ID Card / Passport No.* 身份證/護照號碼*	Date of Birth 出生日期	Country of Birth 出生國家	Tax Residence 稅務居住地	Residential Address* 住宅地址*
	☐ Individual Trustee 個人信託人 ☐ Protector 保護人 ☐ Enforcer 執行人					
	☐ Individual Trustee 個人信託人 ☐ Protector 保護人 ☐ Enforcer 執行人					

*** Please provide the certified true copy 請附上已核證之副本**

5. Authorized Signatories 獲授權簽署人士

Please provide information of all authorized person(s) who are signing the application for and on behalf of the trust.
請提供所有獲授權代表信託簽署投保申請書之獲授權人士的資料。

Full Name 全名	Title 職銜	I.D. or Passport No. * 身份證或護照號碼 *	Signature and Date 簽署及日期

*** Please provide the certified true copy 請附上已核證之副本**

6. PEP Self-declaration 政治人物自我聲明 *(Compulsory to complete 必須填寫)*

Are you or any relevant parties[#1] of this policy a politically exposed person ("PEP[#2]"), PEP family member or PEP close associate?
閣下或本保單相關各方人士[#1]是否政治人物「PEP[#2]」、其家庭成員或與政治人物有關係密切的人？

☐ No 否 ☐ Yes 是, please provide 請提供

a. Name of this "PEP":
此政治人物的姓名: _____

Position
職位: _____

b. Name of the relevant party(ies) of this policy 本保單相關人士的姓名: _____

Relationship with this "PEP"
與此政治人物的關係: _____

[#1] *Relevant parties include but not limited to the proposed insured, beneficiary(ies), person acting on behalf of the policyholder, beneficial owner(s) etc.*
相關各方人士包括但不限於準受保人、受益人、代表保單持有人行事的人、實益擁有人等。

[#2] A politically exposed person (PEP) is an individual who is or has been entrusted with a prominent public function in Hong Kong / a place outside Hong Kong/ by an international organization
政治人物被界定為在香港 / 香港以外地方 / 國際組織擔任或曾擔任重要公職的個人。

7. Declaration 聲明

The undersigned Trustee(s) and Settlor(s) hereby confirm the existence of the Trust and the following:
下方簽署之信託人和財產受予人特此確認本信託之存在及以下事項:

a. The Settlor(s) has/ have entered into a trust agreement, with the Trustee(s). The Trust is in full force and effect as of the date of this Trust Verification Form. The Trust has not been revoked, terminated or otherwise amended in any manner which would cause any representation of this Trust Verification Form to be incorrect;
財產受予人已與信託人達成信託協議，而有關信託已於此信託核實表格簽署日期全面生效。本信託沒有被撤回, 終止或有任何形式之更改令本信託核實表格之任何陳述不正確；

b. If there is any change to the information provided in this Trust Verification Form, the Trustee(s) shall inform Generali Life (Hong Kong) Limited / Assicurazioni Generali S.p.A. Hong Kong Branch (hereinafter "Generali") within 7 working days.
若本信託核實表格上的資料有任何更改， 信託人須於七個工作天內通知忠意人壽（香港）有限公司/忠意保險有限公司香港分行(以下簡稱「忠意」)；

c. The Trustee(s) is/are fully empowered to act for the Trust and is/are acting in a professional capacity to exercise the authority to purchase the policy. The Trustee(s) has/have taken all appropriate and necessary actions to ensure that the purchase is properly authorized;
信託人獲本信託全面授權代表其行事，並專業地行使其權力購買上述保單。信託人已採取所有合理和必要的行動以確保此保單之購買已獲授權；

d. If more than one Trustee is designated, each of the Trustee can act independently of the other Trustee(s), in his/her absolute discretion to exercise all ownership rights, subject to provisions of the Policy, including but not limited to surrender and obtaining policy loan without the consent of the life insured, the Settlor(s) or any other person;
若信託人多於一位，每位信託人能獨立地根據此保單之條款，行使所有權益包括但不限於退保及取得保單貸款等，而無需得到受保人, 財產受予人或其他人士之同意；

e. Any funds used for the payment of premiums are not the proceeds of any criminal activity including but not limited to drug trafficking or money laundering activities;
用於支付保費的資金並不是任何犯罪活動包括但不限於販毒或洗錢活動之收益；

f. Generali is fully discharged from all legal liability or responsibility arising from the use and the application of the fund paid to the Trustee(s);
忠意對任何支付信託人之款項的應用不負上任何法律責任或義務；

g All information in this Trust Verification Form is true and complete and Generali may rely solely on this Form, as well as the information as stated the relevant application documents for all purposes relating to this policy. Generali shall have no further knowledge or duty to inquire into any terms of the Trust.
本信託核實表格上的所有資料是真確和完整的，忠意有權只根據本表格或有關申請文件上的所列的資料處理有關此保單之所有事宜。忠意對有關信託之條款沒有額外資訊，並不負責查閱有關信託之條款；

h I / We confirm that I / we have accessed, read and understood the Personal Information Collection Statement (the "**Statement**") of Generali Life (Hong Kong) Limited / Assicurazioni Generali S.p.A. Hong Kong Branch (whichever applicable) (the "**Company**"), which is available on the **Company**'s website: https://www.generali.com.hk/EN_US/personal_information. I / We agree that the **Company** may collect, use, store, disclose, transfer and otherwise process my / our personal data in accordance with the terms of the **Statement**. 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 **Company** for the purposes stated in the **Statement** and for allowing the **Company** to collect, use, store, disclose, transfer and otherwise process such personal data in accordance with the terms of the **Statement**.
本人 / 我們確認已經查閱並且明白由忠意人壽(香港)有限公司 / 忠意保險有限公司 香港分行（如適用）（「**貴公司**」）的收集個人資料聲明（「**該聲明**」)，該聲明可於**貴公司**網站查閱：https://www.generali.com.hk/ZH_HK/personal_information; 本人 / 我們同意**貴公司**可依照**該聲明**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**該聲明**所述的用途將他們的個人資料提供給**貴公司**，並允許**貴公司**可依照**該聲明**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。

Name of Settlor 財產受予人姓名	Name of Settlor 財產受予人姓名
Signature 簽署 X	Signature 簽署 X
Date 日期	Date 日期

Name of Trustee 信託人名稱	Name of Trustee 信託人名稱
Signature 簽署 X	Signature 簽署 X
Date 日期	Date 日期