

Applicant's Declarations (for business introduced by insurance agents)

INVESTMENT-LINKED ASSURANCE SCHEME APPLICANT'S DECLARATIONS

Section I: Disclosure Declaration

The insurance intermediary, (insert name and registration number of the relevant insurance agent), has conducted a financial needs analysis for me and I have read the Product Key Facts Statement, Principal Brochure and marketing materials of the product(s) that I am applying for. I declare and agree that I fully understand and accept the following relating to my application(s) for this insurance policy:

- Product features including the policy term and all charges and fees;
- Amount of premium and premium term;
- Any loss that I may suffer as a result of early surrender of my policy, any cash withdrawal, premium reduction, and any permissible premium suspension/premium holiday entitlement;
- Investment returns are not guaranteed;
- Potential loss associated with any market value adjustment;
- The potential risks as disclosed in the Product Key Facts Statement, returns, and losses associated with my investment(s);
- If I switch my investment choices, I may be subject to a charge and my risk may be increased or decreased, I have the right to seek professional financial advice when in doubt;
- This application is for the purpose of the Capital Investment Entrant Scheme ("CIES") (if applicable); and
- I confirm that I have received a copy of the HKFI's education pamphlet entitled "Questions you need to ask before taking out an ILAS product".

Applicant's Name

Applicant's Signature

Date

Section II: Suitability Declaration

I understand and agree that (*tick one only*):

A the features and risk level of the product(s) and my selected mix of underlying investment choices are suitable for me based on my disclosed current needs and risk profile as indicated in the Needs Analysis Form and Risk Profile Questionnaire.

OR

B despite the fact that the features and/or risk level of the product(s) and/or my selected mix of underlying investment choices may not be suitable for me based on my disclosed current needs & risk profile as indicated in the Needs Analysis Form and Risk Profile Questionnaire, I confirm that it is my intention and desire to proceed with my application(s) as explained below:

(If Box B is ticked, Applicant must complete explanation in **own** handwriting in this box.)

OR

C

despite the fact that I am required to complete the Financial Needs Analysis and Risk Profile Questionnaire to ensure that the product(s) to be purchased is/are suitable for me, I confirm that it is my intention and desire to proceed with my application(s) without complying with the said requirements for the reason(s) below:

*(If Box C is ticked, Applicant must complete explanation in **own** handwriting in this box.)*

I acknowledge I should not purchase this product and/or the selected mix of underlying investment choices unless I understand these and their suitability has been explained to me and that the final decision is mine.

Applicant's Name

Applicant's Signature

Date

- Notes:*
- 1. For the purpose of these Declarations, the singular shall impart the plural; the word "I" shall include "we"; & the word "my" shall include "our". For joint applicants, all applicants must sign both sections.*
 - 2. You are required to inform your insurance agent or us (the insurance company) if there is any substantial change of information provided in these Declarations before the policy is issued.*