

CEF-SCI

稅務居民身份自我證明表格 – 個人 Self-Certification Form for Tax Residency - Individual

保單/申請編號 Policy / Application No.	

重要提示 Important Notes

- 這是由帳戶持有人向中國太平洋人壽保險(香港)有限公司(以下簡稱「太保壽險香港」)提供的稅務居民身份自我證明表格,以作自動交換財務帳戶資料用途。太保壽險香港可把收集所得的資料交給稅務局,稅務局會將資料轉交到另一稅務管轄區的稅務當局。
 - This is a self-certification form for tax residency provided by an account holder to China Pacific Life Insurance (H.K.) Company Limited (hereafter called "CPIC Life (HK)") for the purpose of automatic exchange of financial account information. The data collected may be transmitted by CPIC Life (HK) to the Inland Revenue Department for transfer to the tax authority of another jurisdiction.
- 如帳戶持有人的稅務居民身份有所改變,應盡快將所有變更通知太保壽險香港
 - An account holder should report all changes in his / her tax residency status to CPIC Life (HK).
- 除不適用或特別註明外,必須填寫這份表格所有部份。如這份表格上的空位不夠應用,可另紙填寫。在欄/部標有星號(*)的項目為太保壽險 香港須向稅務局申報的資料。

All parts of the form must be completed (unless not applicable or otherwise specified). If space provided is insufficient, please continue on additional sheet(s). Information in fields/parts marked with an asterisk (*) are required to be reported by CPIC Life (HK) to the Inland Revenue Department.

第一部份 個人帳戶持有人的身份識辨資料 Section I Identification of Individual Account Holder						
1. 帳戶持有人姓名 Name of Account Holder		稱調 (例如:先生、太太、女士 Title (e.g. Mr, Mrs, Ms		姓氏* Last Name or Surname*	名字 (包括中間名)* Given Name (Including First Name and Middle Name)*	
	港身份證或護照號碼 ong Kong Identity Card or Passport No.					
	出生日期*(日/月/年) ate of Birth* (DD / MM / YYYY)					
4.	現時居住地址* (不接受郵政信箱) Current Residential Address* (Post Office Box is not acceptable)					
	此地址應用於本人現時所持有的所有保單 The address will be applied to all my existing	-				
	policy(ies) 此地址只應用於以下指定的保單 The address will be only applied to the specified policy(ies) below					
	保單號碼 Policy No.:					
	保單號碼 Policy No.:	□香港 Hong Kong	□其他	城市 Other City:	國家 Country:	
5.	通訊地址 Correspondence Address					
	此地址應用於本人現時所持有的所有保單 The address will be applied to all my existing					
	policy(ies) 此地址只應用於以下指定的保單 The address will be only applied to the specified policy(ies) below					
	保單號碼 Policy No.:					
	保單號碼 Policy No.:	□香港 Hong Kong	□其他均	或市 Other City:	國家 Country:	



第二部份 居留司法管轄區及稅務編號或具有等同功能的識辨編號(以下簡稱「稅務編號」)* Section II Jurisdiction of Residence and Taxpayer Identification No. or its Functional Equivalent ("TIN") *

請提供以下資料,列明(a)帳戶持有人的**所有**(不限於5個)居留司法管轄區,亦即帳戶持有人的稅務管轄區(香港包括在內)及(b)該居留司法管轄區發給帳戶持有人的稅務編號。

如帳戶持有人是香港稅務居民、稅務編號是其香港身份證號碼。

如沒有提供稅務編號,必須填寫合適的理由A或B或C:

理由 A: 帳戶持有人的居留司法管轄區並沒有向其居民發出稅務編號。

理由 B:帳戶持有人不能取得稅務編號。如選取這一理由,解釋帳戶持有人不能取得稅務編號的原因。 **理由 C**:帳戶持有人毋須提供稅務編號。居留司法管轄區的主管機關不需要帳戶持有人披露稅務編號。

Please complete the following table indicating (a) **ALL** (not restricted to five) jurisdictions of residence (including Hong Kong) where the account holder is a **resident for tax purposes** and (b) the account holder's TIN for each jurisdiction indicated.

If the account holder is a tax resident of Hong Kong, the TIN is the Hong Kong Identity Card No..

If a TIN is unavailable, provide the appropriate reason A, B or C:

Reason A: The jurisdiction where the account holder is a resident for tax purposes does not issue TINs to its residents.

Reason B: The account holder is unable to obtain a TIN. Explain why the account holder is unable to obtain a TIN if you have selected this reason.

Reason C: TIN is not required. Select this reason only if the authorities of the jurisdiction of residence do not require the TIN to be disclosed.

居留司法管轄區 Jurisdiction of Residence	稅務編號 TIN	如沒有提供稅務 編號,填寫理由 A、B 或 C Enter Reason A, B or C if no TIN is available	如選取理由 B, 解釋帳戶持有人不能取得稅務編號的原因 Explain why the account holder is unable to obtain a TIN if you have selected Reason B	生效日期 (日/月/年) Effective Date (DD/MM/YYYY)	**結束日期 (日 / 月 / 年) **End Date (DD / MM / YYYY)
(1)					
(2)					
(3)					
(4)					
(5)					

^{**}若太保壽險香港已將帳戶持有人的有效稅務居民身份自我證明表格存檔,當其帳戶之若干資料被更新或太保壽險香港相信其稅務居民相關資料可能有變時,太保壽險香港會要求帳戶持有人再次填寫稅務居民身份自我證明表格或提供額外資料。

^{**}若帳戶持有人曾經就上述以外之其他居留司法管轄區作自我證明而未曾提供該"稅務居民身份之結束日期",太保壽險香港將會連同相關資料告知稅務機關。

^{**}Once CPIC Life (HK) have a valid self-certification form on file, the account holder will be requested to complete another one or provide additional details, when certain information on an account has been updated or CPIC Life (HK) believes the reportable status may have changed.

^{**}If the account holder has self-certified any other jurisdiction of residence without updating CPIC Life (HK) the End Date of such tax residency, CPIC Life (HK) will also provide the tax authority the relevant information.

中國太平洋人壽保險(香港)有限公司 China Pacific Life Insurance (H.K.) Co. Ltd.



第三部份 聲明及簽署

Section III Declarations and Signature

本人知悉及同意,太保壽險香港可根據《稅務條例》(第 112 章)有關交換財務帳戶資料的法律條文,(a)收集本表格所載資料並可備存作自動交換財務帳戶資料用途及(b)把該等資料和關於帳戶持有人及任何須申報帳戶的資料向香港特別行政區政府稅務局申報,從而把資料轉交到帳戶持有人的居留司法管轄區的稅務當局。

本人證明,就與本表格所有相關的帳戶,本人是帳戶持有人。

本人承諾,如情況有所改變,以致影響本表格第一部份所述的個人的稅務居民身份,或引致本表格所載的資料不正確,本人會在情況發生改變後 30日內,向太保壽險香港提交一份已適當更新的稅務居民身份自我證明表格。

本人聲明就本人所知所信,本表格內所填報的所有資料和聲明均屬真實、正確和完備。

I acknowledge and agree that (a) the information contained in this form is collected and may be kept by CPIC Life (HK) for the purpose of automatic exchange of financial account information, and (b) such information and information regarding the account holder and any reportable account(s) may be reported by CPIC Life (HK) to the Inland Revenue Department of the Government of the Hong Kong Special Administrative Region and exchanged with the tax authorities of another jurisdiction or jurisdictions in which the account holder may be resident for tax purposes, pursuant to the legal provisions for exchange of financial account information provided under the Inland Revenue Ordinance (Cap.112).

I certify that I am the account holder of all the account(s) to which this form relates.

I undertake to advise CPIC Life (HK) of any change in circumstances which affects the tax residency status of the individual identified in Part 1 of this form or causes the information contained herein to become incorrect, and to provide CPIC Life (HK) with a suitably updated self-certification form for tax residency within 30 days of such change in circumstances.

I declare that the information given and statements made in this form are, to the best of my knowledge and belief, true, correct and complete.

帳戶持有人簽署	帳戶持有人姓名
Signature of Account Holder:	Name of Account Holder:
身份 □ 保單持有人 □ 承讓人 □ 受益。	□ 其他,請列明
Capacity: Policy Owner Assignee Bene	iiciary Other, please specify
日期(日/月/年) Date (DD / MM / YYYY):	

警告:根據《稅務條例》第 80(2E)條,如任何人在作出自我證明時,在明知一項陳述在要項上屬具誤導性、虛假或不正確,或罔顧一項陳述是否在要項上屬具誤導性、虛假或不正確下,作出該項陳述,即屬犯罪。一經定罪,可處第3級(即港幣10,000元)罰款。

WARNING: It is an offence under section 80(2E) of the Inland Revenue Ordinance if any person, in making a self-certification, makes a statement that is misleading, false or incorrect in a material particular AND knows, or is reckless as to whether, the statement is misleading, false or incorrect in a material particular. A person who commits the offence is liable on conviction to a fine at level 3 (i.e. HKD10,000).