

# FATCA及CRS客戶自我聲明書暨個人資料同意書(個人專用)

□本人不是或不僅是中華民國稅務居民。(請以<u>英文</u>填寫本聲明書,並請填寫本人之所有稅籍(包含中華民國),如無法

# FATCA and CRS Individual Self-Certification & Personal information Form

註:「\*」為必填欄位 Note: "\*" mandatory blanks

提供稅務識別碼者,請選填原因A、B或C。)

□本人僅為中華民國之稅務居民。(請以<u>中文</u>填寫本聲明書)

I am only the ROC tax resident. (Fill in Part II and the self-certification in Chinese)

第一部分:\*稅籍 Part I: Tax Residence(s)

the appropriate reason A, B or C where appropriate Lists: 言若美国教授者,我等美国教育。为政务、Note: For Specific U.S. pernon, TIN is mandatory.  ***********************************	I am not or not only the ROC tax resi		s) of tax residence (including	ng ROC) in English. If a TIN is unav	ailable please provide
R結園家(包令中華民国) Country of has residence (including ROC)    A	11 1				
		別碼為必填 Note: For Speci	ific U.S. person, TIN is ma	ndatory.	
Tax Identification Number    If no TIN available, please enter Reason A, B (with explanation) or C		稅務識別碼	無法提供 TIN :	者,請勾填原因 A、B(含原因)	)或 C 【註】
(Including ROC.)    A	•			·	
□ B 序目 reason: □ C □ C □ C □ B 序目 reason: □ C □ C □ C □ B 序目 reason: □ C □ C □ C □ C □ C □ C □ C □ C □ C □ C	(including ROC)	Tax identification (value)		prouse enter recuson 11, <u>B (with e</u>	or e
□ C					
A   B   F   F   F   F   F   F   F   F   F					
□ B · 原因 reason: □ C □ C □ C □ B · 原因 reason: □ C □ C □ C □ C □ B · 原因 reason: □ C □ C □ C □ C □ C □ C □ C □ C □ C □ C					
□ C □ A □ B · 原图 reason: □ C □ A □ B · 原图 reason: □ C □ A □ B · 原图 reason: □ C □ A □ B · 原图 reason: □ C □ A □ B · 原图 reason: □ C □ A □ B · 原图 reason: □ C □ C □ B · 原图 reason: □ C □ C □ B · 原图 reason: □ C □ C □ C □ C □ C □ C □ C □ C □ C □ C					
□ B · 原图 reason: □ C □ C □ B · 原图 reason: □ C □ C □ B · 原图 reason: □ C □ C □ B · 原图 reason: □ C □ C □ B · 原图 reason: □ C □ C □ A □ B · 原图 reason: □ C □ C □ B · 原图 reason: □ C □ C □ C □ C □ C □ C □ C □ C □ C □ C					
□ C □ B · 原图 reason: □ C □ B · 原图 reason: □ C □ C □ B · 原图 reason: □ C □ C □ B · 原图 reason: □ C □ C □ B · 原图 reason: □ C □ C □ B · 原图 reason: □ C □ C □ C □ C □ C □ C □ C □ C □ C □ C			□ A		
□ A			□ B,原因 reason:		
□ B , 原因 reason:□□ C □ C □ A 本人所屬的稅務國家並無發給稅務識別碼予業稅務長、□□ C □ The jurisdiction where I am the resident does not issue TINs to its residents.  B 本人無法取得稅務識別碼或類似編號。(差選填此項者, 請解釋無法取得稅務識別碼之原因) I am otherwise unable to obtain a TIN or equivalent number. (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason) C 本人無常提供稅務識別碼。(僅計對所填寫之稅積國家規定無需揭露稅務識別碼時,才能選集此項) No TIN is required. (Note. Only select this reason if the authorities of the jurisdiction entered below do not require the TIN to be disclosed)  ### Part II: Account Holder Information(不是或不僅是中華民國稅務居民請以英文填寫)  A. *姓名诗叫 Name (英文姓名請以護服/居留					
□ C					
□ A □ B □ B □ R □ B □ B □ B □ B □ B □ B □ B □ B □ B □ B					
□ B ,原图 reason:□□C □ C □ C □ C □ C □ C □ C □ C □ C □ C					
【注】A 本人所屬的稅務國家並無簽餘稅務識別碼予其稅務居民。 The jurisdiction where I am the resident does not issue TINs to its residents.  B 本人無法本得稅務識別碼或類似總號。《差選集止項者,請解釋無法取得稅務識別码之原因》 I am otherwise unable to obtain a TIN or equivalent number. (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)  C 本人無需提稅稅務識別码。《僅針對所填寫之稅籍國家規定無需揭露稅務識別码時,才能選填此項》 No TIN is required. (Note. Only select this reason if the authorities of the jurisdiction entered below do not require the TIN to be disclosed)  A. *姓名Full Name (英文姓名請以護照/居留證姓名為華 Please fill in the name in passport / resident certificate)  B. *身分證字號/統一經號 ID/Uniform ID Numbers  C. *居住地址(户籍地址) (誘勿留存郵政信箱或送達代 收地址)Current Residence Address (Do not use a P.O. box or an in-care-of address)  Do not use a P.O. box or an in-care-of address (Do not use a P.O. box or an in-care-of address)  (國家 Country)  (地址 Number, street, and room or suite no.)  (黃汝區 State/Province/Region)  □ 非上述情况,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  — (伊孜 YYYYYY)					
The jurisdiction where I am the resident does not issue TINs to its residents.  B 本人無法取得稅務識別碼或類似總號。《遊環此項者,請解釋無法取得稅務識別碼之原因》 I am otherwise unable to obtain a TIN or equivalent number. (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)  C 本人無意提供稅務識別場。(僅對對所填寫之稅籍國家規定無需揭露稅務識別碼時,才能選集此項) No TIN is required. (Note. Only select this reason if the authorities of the jurisdiction entered below do not require the TIN to be disclosed)  A. *姓名Füll Name (英文姓名請以護照/居留					
The jurisdiction where I am the resident does not issue TINs to its residents.  B 本人無法取得稅務識別碼或類似總號。《遊環此項者,請解釋無法取得稅務識別碼之原因》 I am otherwise unable to obtain a TIN or equivalent number. (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)  C 本人無意提供稅務識別場。(僅對對所填寫之稅籍國家規定無需揭露稅務識別碼時,才能選集此項) No TIN is required. (Note. Only select this reason if the authorities of the jurisdiction entered below do not require the TIN to be disclosed)  A. *姓名Füll Name (英文姓名請以護照/居留	【註】A本人所屬的稅務國家	並無發給稅務識別碼予其稅	務居民。		
I am otherwise unable to obtain a TIN or equivalent number. (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)  C 本人無需提供稅務識別碼。(僅針對所填寫之稅籍國家規定無需揭露稅務識別碼時,才能選集此項) No TIN is required. (Note. Only select this reason if the authorities of the jurisdiction entered below do not require the TIN to be disclosed)  A. *姓名Fiull Name (英文姓名請以護服/居留證姓名為華 Please fill in the name in passport/resident certificate)  B. *身分證字號/統一證號 ID/Uniform ID Numbers  C.*居住地址(戶籍地址) (请为留存郵政信箱或送達代收地址)Current Residence Address (Do not use a P.O. box or an in-care-of address)  (Do not use a P.O. box or an in-care-of address)  (Do not use a P.O. box or an in-care-of address)  (Do not use a P.O. box or an in-care-of address)  (国家 Country) (地址 Number, street, and room or suite no.)  (海京 City or town)  (海京 State/Province/Region)  D. *出生日期 Date of Birth  □ 同本次申請相關文件之出生日期 Same as the date of birth in this related application form □ 非上述情況,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  — 生地門の本次申請相關文件之出生日期 Same as the date of birth in this related application form □ 非上述情況,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  — 生中,并上述情况,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  — 生中,并上述情况,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  — 生中,并上述情况,请填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  — 生中,并上述情况,请填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  — 生中,并上述情况,请填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  — 生中,在中心中,中心中的中心中的中心中的中心中的中心中心中的中心中的中心中的中心中的中心					
table if you have selected this reason) C 本人無需提供稅務識別碼。(僅對對所填寫之稅籍圖家規定無需揭露稅務識別碼時,才能選填此項) No TIN is required. (Note. Only select this reason if the authorities of the jurisdiction entered below do not require the TIN to be disclosed)  5.二部分: 帳戶持有人基本資料 Part II: Account Holder Information(不是或不僅是中華民國稅務居民請以英文填寫)  A. *姓名Full Name (英文姓名請以護照/居留 證姓名為準 Please fill in the name in passport / resident certificate) B. *身分聲字號/統一證號 ID/Uniform ID Numbers  C.*居住地址(戶籍地址) (詩勿留存郵政信箱或送達代 收地址)Current Residence Address (Do not use a P.O. box or an in-care-of address) (Do not use a P.O. box or an in-care-of address) (Do not use a P.O. box or an in-care-of address)  (國家 Country) (地址 Number, street, and room or suite no.)  [城市 City or town)  [(城市 City or town)  [中華民國稅籍之保戶中心的內理的 [中華民國稅籍之情]  [中華民國稅籍之保戶中心的內理的 [中華民國內理 [中華民國和 [中華民國內理 [	B 本人無法取得稅務識	別碼或類似編號。( <u>若選填</u>	此項者,請解釋無法耶	2得稅務識別碼之原因)	
C 本人無常提供稅務識別碼。(僅針對所填寫之稅藉圖家規定無需揭露稅務識別碼時,才能選填此項) No TIN is required. (Note. Only select this reason if the authorities of the jurisdiction entered below do not require the TIN to be disclosed)  第二部分:帳戶持有人基本資料 Part II: Account Holder Information(不是或不僅是中華民國稅務居民請以英文填寫)  A. *姓名Full Name (英文姓名請以護照/居留 嚴姓名為準 Please fill in the name in passport / resident certificate)  B. *身分證字號/統一證號 DD/Inform ID Numbers  C *居住地址(户籍地址) (請勿留存郵政信箱或送達代收地址)(請勿留存郵政信箱或送達代收地址以Current Residence Address (Do not use a P.O. box or an in-care-of address)  □ 同本次申請相關文件之戶籍地址 (此選項限本次已提供或載明戶籍地址且僅具中華民國稅籍之帳戶持有人) Same as the address in this related application form (Only applicable for ROC residents that are opening new account.)  □ 非上述情况,請填寫以下欄位: Please fill in the following fields if the above situation is not applicable.  (图家 Country) (地址 Number, street, and room or suite no.)  (报市 City or town)  □ 「行政區 State/Province/Region)  D. *出生日期 Date of Birth  □ 同本次申請相關文件之出生日期 Same as the date of birth in this related application form  □ 非上述情况,請填寫以下欄位: Please fill in the following fields if the above situation is not applicable.  — 年(YYY/YYYY) 月(MM) 日(DD)  E. 出生地 Place of Birth  *國家Country: 城市City:			number. (Please explain	n why you are unable to obtain a	TIN in the below
No TIN is required. (Note. Only select this reason if the authorities of the jurisdiction entered below do not require the TIN to be disclosed)    A. * 姓名 Full Name			抗国产口产与西田南心	· 加州四年 上处照法 11 - 三\	
to be disclosed)  \$ = \$\pi \pi \pi \pi \pi \pi \pi \pi \pi \pi					require the TIN
### A. * 姓名 Full Name (英文姓名詩以護照/居留 證姓名為華 Please fill in the name in passport resident certificate)  B. * 身分證字號/統一證號 ID/Uniform ID Numbers  C.* 居住地址(戸籍地址) (前勿留存郵政信箱或送達代 收地址)Current Residence Address (Do not use a P.O. box or an in-care-of address)    日本		vote. Only select this leason i	i the authornies of the je	insulction entered below do not	require the TTN
A. *姓名Full Name (英文姓名請以護照/居留 證姓名為準 Please fill in the name in passport / resident certificate) B. *身分證字號/統一證號 ID/Uniform ID Numbers C.*居住地址/育地址 (請勿留存郵政信箱或送達代 收地址)Current Residence Address (Do not use a P.O. box or an in-care-of address)  □ 同本次申請相關文件之戶籍地址 (此選項限本次已提供或載明戶籍地址且僅具中 華民國稅籍之帳戶持有人) Same as the address in this related application form (Only applicable for ROC residents that are opening new account.) □ 非上述情况,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.    (國家 Country)		EL Part II · Account Hold	or Information(太耳』	R. 不供且由兹日园和政日日结	心 故力描写)
(英文姓名請以護照/居留 證姓名為準 Please fill in the name in passport / resident certificate)  B. *身分證字號 / 統一證號 BD/Uniform ID Numbers  C.*居住地址(戶籍地址) (請勿留存郵政信箱或送達代 牧地址) Current Residence Address (Do not use a P.O. box or an in-care-of address)  (國家 Country)  (地址 Number, street, and room or suite no.)  (國家 Country)  (地址 Number, street, and room or suite no.)  (超家 Country)  D.*出生日期 Date of Birth  「同本次申請相關文件之月籍地址(此選項限本次已提供或載明戶籍地址且僅具中華民國稅籍之帳戶持有人)Same as the address in this related application form (Only applicable for ROC residents that are opening new account.)  (国家 Country)  (地址 Number, street, and room or suite no.)  (活亦 City or town)  「行政區 State/Province/Region)  D.*出生日期 Date of Birth  「同本次申請相關文件之出生日期 Same as the date of birth in this related application form  「非上述情況,請填寫以下欄位: Please fill in the following fields if the above situation is not applicable.  年(YYY/YYYY)  月(MM)  日(DD)  E. 出生地 Place of Birth  *國家Country:			ci miormation(///æs	(八) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	<u>大人</u> 供何)
<b>避妊名為準</b> Please fill in the name in passport / resident certificate) B.*身分證字就/統一證就 D/Uniform ID Numbers C.*居住地址(户籍地址) (請勿留存郵政信箱或送達代收地址)Current Residence Address (Do not use a P.O. box or an in-care-of address) (Do not use a P.O. box or an in-care-of address) (国家 Country) (地址 Number, street, and room or suite no.) (現市 City or town) (行政區 State/Province/Region) D.*出生日期 Date of Birth 「同本次申請相關文件之出生日期 Same as the address fill in the following fields if the above situation is not applicable. (行政區 State/Province/Region) D.*出生日期 Date of Birth 「同本次申請相關文件之出生日期 Same as the date of birth in this related application form 非上述情況,請填寫以下欄位: Please fill in the following fields if the above situation is not applicable. 年(YYY/YYYY) 月(MM) B(DD) *國家Country: 域市City: 斯山城市City: 域市City: 「月(MM) 」日(DD)					
in passport / resident certificate )  B. *身分證字號/統一證號 ID/Uniform ID Numbers  C.*居住地址(户籍地址) (請勿留存郵政信箱或送達代 收地址)Current Residence Address (Do not use a P.O. box or an in-care-of address)  □ 本文申請相關文件之戶籍地址(此選項限本次已提供或裁明戶籍地址且僅具中 華民國稅籍之帳戶持有人)Same as the address in this related application form (Only applicable for ROC residents that are opening new account.)  □ 非上述情況,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.    (國家 Country)					
B.*身分證字號/統一證號 ID/Uniform ID Numbers  C.*居住地址(戶籍地址) (請勿留存郵政信箱或送達代 收地址):Current Residence Address (Do not use a P.O. box or an in-care-of address)  「國家 Country」  「地址 Number,street,and room or suite no.)  「(城市 City or town)  「行政區 State/Province/Region)  D.*出生日期 Date of Birth  「同本次申請相關文件之戶籍地址(此選項限本次已提供或載明戶籍地址且僅具中 華民國稅籍之帳戶持有人)Same as the address in this related application form (Only applicable for ROC residents that are opening new account.)  「(地址 Number,street,and room or suite no.)  「行政區 State/Province/Region)  D.*出生日期 Date of Birth  「同本次申請相關文件之出生日期 Same as the date of birth in this related application form  「非上述情況,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  年(YYY/YYYY) 月(MM) 日(DD)  *國家Country: 城市City:	• •				
D/Uniform ID Numbers					
C.*居住地址(户籍地址) (請勿留存郵政信箱或送達代收地址)Current Residence Address (Do not use a P.O. box or an in-care-of address)  □ 同本次申請相關文件之户籍地址(此選項限本次已提供或載明戶籍地址且僅具中華民國稅籍之帳戶持有人)Same as the address in this related application form (Only applicable for ROC residents that are opening new account.) □ 非上述情況,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  □ 同本次申請相關文件之出生日期 Same as the date of birth in this related application form □ 非上述情況,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable. □ 年(YYY/YYYY) 月 (MM) 日(DD)  *國家Country: 城市City: □ 城市City: □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □					
(請勿留存郵政信箱或送達代收地址)Current Residence Address (Do not use a P.O. box or an in-care-of address)    本民國稅籍之帳戶持有人					
收地址)Current Residence Address (Do not use a P.O. box or an in-care-of address)  ROC residents that are opening new account.    非上述情況,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.    「一方文區 State/Province/Region     「一方文區 State/Province/Region     「一方文區 State/Province/Region     「一方文區 State fill in the following fields if the above situation is not applicable.    「一方文區 State/Province/Region     「一方文區 State fill in the following fields if the above situation form     「非上述情況,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.    年(YYY/YYYY)					
(Do not use a P.O. box or an in-care-of address)    本上述情況,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.    (國家 Country)					
□ 非上述情況,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  (國家 Country) (地址 Number, street, and room or suite no.)  (城市 City or town)  (行政區 State/Province/Region)  □ 同本次申請相關文件之出生日期 Same as the date of birth in this related application form □ 非上述情況,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  ———————————————————————————————————					
(國家 Country) (地址 Number, street, and room or suite no.)  (城市 City or town)  (行政區 State/Province/Region)  D.*出生日期 Date of Birth □ 同本次申請相關文件之出生日期 Same as the date of birth in this related application form □非上述情况,請填寫以下欄位:Please fill in the following fields if the above situation is not applicable.  ———————————————————————————————————	·	□ 非上述情況,請填?	寫以下欄位:Please fill	in the following fields if the above situa	tion is not applicable.
(城市 City or town)    (城市 City or town)	uddiessy				
(城市 City or town)    (城市 City or town)		(FIS Country)	/1.la.1.1 Nassala au -404 au		
(行政區 State/Province/Region)  D.*出生日期 Date of Birth □ 同本次申請相關文件之出生日期 Same as the date of birth in this related application form □非上述情况,請填寫以下欄位: Please fill in the following fields if the above situation is not applicable.  ———————————————————————————————————		(國家 Country)	(1951) Number, sireet, a	nd room or suite no.)	
(行政區 State/Province/Region)  D.*出生日期 Date of Birth □ 同本次申請相關文件之出生日期 Same as the date of birth in this related application form □非上述情况,請填寫以下欄位: Please fill in the following fields if the above situation is not applicable.  ———————————————————————————————————					
D.*出生日期 Date of Birth  □ 同本次申請相關文件之出生日期 Same as the date of birth in this related application form □非上述情況,請填寫以下欄位: Please fill in the following fields if the above situation is not applicable.  □ 年(YYY/YYYY) 月(MM) 日(DD)  E. 出生地 Place of Birth  *國家Country:		(城市 City or town)			
D.*出生日期 Date of Birth  □ 同本次申請相關文件之出生日期 Same as the date of birth in this related application form □非上述情況,請填寫以下欄位: Please fill in the following fields if the above situation is not applicable.  □ 年(YYY/YYYY) 月(MM) 日(DD)  E. 出生地 Place of Birth  *國家Country:					
D.*出生日期 Date of Birth  □ 同本次申請相關文件之出生日期 Same as the date of birth in this related application form □非上述情況,請填寫以下欄位: Please fill in the following fields if the above situation is not applicable.  □ 年(YYY/YYYY) 月(MM) 日(DD)  E. 出生地 Place of Birth  *國家Country:			(行政區 State/Provin	nce/Region)	
# 上述情况,請填寫以下欄位: Please fill in the following fields if the above situation is not applicable.  ### Place of Birth  ### Solution of the above situation is not applicable.  ###################################	D. *出生日期 Date of Birth				
applicable.         年(YYY/YYYY)       月(MM)       日(DD)         E. 出生地 Place of Birth       *國家Country:       城市City:					
年(YYY/YYYY)       月(MM)       日(DD)         E. 出生地 Place of Birth       *國家Country:       城市City:					addion 18 Hot
E. 出生地 Place of Birth  *國家Country: 城市City:		左八	**		רון (חווי)
*國家Country: 城市City:	To double the control	平()	111/1111)		ם (עע)
	L. 出生地 Place of Birth	*國家Country!		城市City:	

# 聲明及簽署

### **Declarations and Signature**

本人知悉,本同意書所含資訊、相關帳戶持有人及任何應申報帳戶資訊,將可能提供美國或中華民國稅捐稽徵機關,經由政府間協定進 行稅務目的金融帳戶資訊交換,提供帳戶持有人為稅務居住者之國家/地區稅捐稽徵機關。

I acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be submitted to the tax authorities of USA or the ROC and exchanged with tax authorities of another country(ies)/jurisdiction(s) in which the Account Holder may be a tax resident pursuant to intergovernmental agreements to exchange financial account information for tax purposes.

本人同意 貴公司為遵循美國海外帳戶稅收遵從法案及金融機構執行共同申報及盡職審查作業辦法,得將因業務往來而取得之本人資訊 (如姓名、地址、稅務識別碼等),及本人與 貴公司往來的保單相關資訊 (如保單號碼、保單現金價值、解約金等),向美國或中華民國稅務機關申報。

I agree that China Life Insurance Company Limited may, in accordance with US FATCA in US and ROC CRS in ROC, report the information (such as name, address, tax identification number, etc.) collected from me and the controlling persons who are US persons or non-ROC residents when we have during business dealings, as well as the information concerning insurance policy (such as insurance policy number, insurance policy cash value, withdrawal, etc.), to the US or the ROC tax authorities.

本人瞭解本同意書除符合個人資料保護法及相關法令規定外,尚符合 貴公司隱私權聲明及客戶資料保密措施,具有書面同意 貴公司 蒐集、處理、利用及國際傳輸本人的資料之效果。

I acknowledge that this declaration complies with the Personal Data Protection Act and related laws and regulations, and China Life Insurance Company Limited's privacy statement and confidentiality measures for customer data, which constitute the written consent for China Life Insurance Company Limited to process, use and international transfer internationally the information of mine.

本人證明,與本同意書相關之所有帳戶,本人為帳戶持有人(或本人業經帳戶持有人授權簽署本同意書)。

I certify that I am the Account Holder (or I am authorized to sign for the Account Holder) of all the account(s) to which this form relates.

本人聲明,就本人所知所信,於本自我證明所為之陳述均為正確且完整。

I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.

本人承諾,如狀態變動致影響本同意書第一部分所述之個人稅務居住者身分,或所載資料不正確或不完整,本人會通知貴公司,並在狀態變動後30日內提供 貴公司一份經適當更新之自我證明表。

I undertake to advise China Life Insurance Company Limited 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 or incomplete, and to provide China Life Insurance Company Limited with a suitably updated self-certification form within 30 days of such change in circumstances

此致 中國人壽保險股份有限公司

To: China Life Insurance Company Limited

\*簽署日期 Date:

■ *本人已瞭解並審閱「遵循 FATCA 及金融機構執行共同申報及盡職審查作業辦法履行個人資料保護法告知事項」。
I have fully understood the abovementioned information and authorize the Company to use my data under the aforesaid situations.
*立同意書人簽名(章) Signature:
(請與要保書或本次申請相關文件一致) Please be consistent with the application for insurance and relevant application documents submitted with this Form.
法定代理人/監護人/輔助人簽名(章)Guardian/Assistant's signature:
(請與要保書或本次申請相關文件一致) Please be consistent with the application for insurance and relevant application documents submitted with this Form.
法定代理人/監護人/輔助人與立同意書人關係 Relationship with the account holder:



日(DD)

月(MM)

年(YYY/YYYY)

### 【附錄一】

### [Appendix I]

### 中國人壽保險股份有限公司

# 「遵循 FATCA 及金融機構執行共同申報及盡職審查作業辦法履行個人資料保護法告知事項(個人客戶)」

CHINA LIFE INSURANCE COMPANY LIMITED

Use of Personal Information for FATCA Compliance (Individual Client)

中國人壽保險股份有限公司(下簡稱「本公司」)因參與遵循美國海外帳戶稅收遵從法案(Foreign Account Tax Compliance Act,下簡稱「FATCA 法案」),與美國財政部國稅局(下簡稱「美國國稅局」)簽訂外國金融機構協議(FFI Agreement,下簡稱「協議」),另亦須遵循金融機構執行共同申報及盡職審查作業辦法,而負辦識美國及非中華民國帳戶之義務,為符合個人資料保護法下個人資料之合理使用,本公司茲請求 台端協力遵循 FATCA 法案及協議與金融機構執行共同

申報及盡職審查作業辦法及相關規定,依個人資料保護法第8條第1項之規定,特告知下列事項: In compliance with the US Foreign Account Tax Compliance Act (hereinafter referred to as "FATCA") and Regulations Governing the Implementation of the Common Standard on Reporting and Due Diligence for Financial Institutions, CHINA LIFE INSURANCE COMPANY LIMITED (hereinafter referred to as the "Company") has entered into Foreign Financial Institution agreement (FFI agreement, hereinafter referred to as the "Agreement") with the United States Internal Revenue Service (IRS) and hence has the obligation to identify US and other non-ROC accounts. In order to comply with the proper use of personal information in accordance with the Personal Information Protection Act for accounts you establish and transactions you proceed with the Company, the Company hereby requests your cooperation with the compliance of FATCA and Regulations Governing the Implementation of the Common Standard on Reporting and Due Diligence for Financial Institutions and the relevant provisions under the Agreement, with notice in accordance with Article 8 Section 1 of the Personal Information Protection Act as follows:

- -、個人資料蒐集之目的及類別
   (1)目的:(一)○○一人身保險(二)一八一 其他經營合於營業登記項目或組織章程所定之業務(三)○五九 金融服務業依法令規定及金融監理需要,所為之蒐集處理及利用(四)○九五 財稅行政
- (2) 類別:姓名、出生地及出生日期、國籍、戶籍地址、住址及電話號碼、稅務識別碼等,詳如本同意書及本次申請文
- 1. Purpose and Type of Collection, Processing and Use of Personal Information
  - (1) Purpose: (1) 001 Life and Health Insurance (2) 181 Other business operation in accordance with the business registration project or organization Prospectus (3) 059 Financial service industry's collection and processing information in accordance with laws and needs for financial supervision (4) 095 Fiscal & tax administrative
  - (2) Type: name, place of birth, date of birth, nationality, domicile address, residence address, telephone number, tax identifying number (TIN) shall be collected. Please refer to the other part of the document.

- 二、個人資料利用之期間及方式 (1) 期間:本保險契約之有效期間及遵循FATCA法案及協議與金融機構執行共同申報及盡職審查作業辦法之必要年限 內與應為保存之期限
  - (2) 方式:合於法令規定之利用方式。
- 2. The Period and Method of Using Personal Information
  - (1) Period: The effective period of the Agreement and the retention period as prescribed in FATCA and Regulations Governing the Implementation of the Common Standard on Reporting and Due Diligence for Financial Institutions
  - Method: In accordance with the provisions of the law

- 三、個人資料利用之對象及地區: (1)對象:本公司、為履行金融機構執行共同申報及盡職審查作業辦法而傳輸之對象、美國政府(美國稅務居民適用)及 我國權責主管機關
  - (2) 地區:上述對象所在地區
- 3. Target and Area for the Use of Personal Information
  - (1) Target: The Company, the party in which personal information is transferred to for the implementation of Regulations Governing the Implementation of the Common Standard on Reporting and Due Diligence for Financial Institutions, U.S. government (applicable to U.S. tax residents) and the competent authority of Taiwan
  - (2) Area: The area in which the abovementioned target is located

四、個人資料之權利行使及其方式 台端就本公司所蒐集、處理及利用之個人資料,得隨時以書面方式向本公司請求查詢、閱覽、製給複製本、補充或更正、停止蒐集處理及利用或刪除。

4. Exercise of the Rights Regarding Personal Information

With regard to the personal information collected, processed and used by the Company, you may request in writing to search, review, make duplications, supplement or correct the personal information or to discontinue the collection, processing, and use of the personal information, or request to delete the personal information.

### 五、不提供對其權益之影響

台端若拒絕提供本公司為遵循 FATCA 法案及協議與金融機構執行共同申報及盡職審查作業辦法所需之個人資料、或嗣後撤回、撤銷同意,本公司將無法繼續提供 台端於本公司所有屬FATCA法案及協議與金融機構執行共同申報及盡職審 查作業辦法規範金融商品之任何服務,並將對於台端於本公司下所開立之帳戶進行停止交易及服務、結清、結算、提前 終止契約或關閉帳戶。

5. The Effect of Refusal to Provide Personal Information

In the event that you refuse to provide the personal information as required for the compliance of FATCA and the Agreement and Regulations Governing the Implementation of the Common Standard on Reporting and Due Diligence for Financial Institutions, or withdraw or revoke your consent thereof, the Company will be unable to provide any further services related to financial products regulated under FATCA and Regulations Governing the Implementation of the Common Standard on Reporting and Due Diligence for Financial Institutions to you and shall cease all transactions and services of your accounts with the Company or settle, liquidate or close your accounts, or effect early termination of the agreement(s) related to the accounts.

本告知事項所稱美國或應申報國帳戶,係指由一個或多個特定美國人或應申報國居民持有之任何金融帳戶。

The U.S. or non-Taiwanese accounts referred herein shall mean any financial account held by one or several specified United States persons, or by foreign entities owned by the United States or other non-Taiwan and/or United States or non-Taiwan person.

台端已充分詳讀前揭告知事項,瞭解此一告知事項符合個人資料保護法及相關法規之要求。

You have read carefully and fully understand all that is stated above and understand that this notice is in accordance with the Personal Information Protection Act and the relevant laws and regulations

## 【附錄二】填表說明

### [Appendix II] Instruction

- 1. 金融機構執行共同申報及盡職審查作業辦法(下稱本辦法)規定,金融機構應蒐集及申報有關帳戶持有人稅務居住者身分之特定資訊。本辦法係依稅捐稽徵法第5條之1第6項訂定,其內容參考經濟合作暨發展組織發布之共同申報及盡職審查準則(下稱共同申報準則)。
  - Under the Regulations Governing the Implementation of the Common Standard on Reporting and Due Diligence for Financial Institutions ("Regulations"), Financial Institutions ("FIs") are required to collect and report certain information about the Account Holder's tax residency status. The Regulations are enacted pursuant to Paragraph 6, Article 5-1 of the Tax Collection Act and are drafted in reference to the Common Standard on Reporting and Due Diligence for Financial Account Information (CRS) developed by the Organization for Economic Cooperation and Development (OECD).
- 2. 金融機構依本辦法規定取得帳戶持有人之自我證明文件,以辨識帳戶持有人為稅務居住者之國家/地區。金融機構依法可能將本同意書及該帳戶其他資訊提供中華民國稅捐稽徵機關,經由政府間協定進行稅務目的金融帳戶資訊交換,提供他方國家/地區稅捐稽徵機關。
  - Under the Regulations, FIs obtain a self-certification form from the Account Holder to determine the country(ies)/jurisdiction(s) in which the Account Holder is a tax resident. The FIs may be legally obliged to submit the information in this form and other financial information with respect to the account to the tax authorities of the Republic of China (Taiwan) ("ROC") and they may exchange this information with tax authorities of another country(ies)/jurisdiction(s) pursuant to intergovernmental agreements to exchange financial account information for tax purposes.
- 3. 根據美國外國帳戶稅務遵從法(「FATCA」)及臺灣金融機構執行共同申報及盡職調查作業辦法之規定,中國人壽應收集及申報有關帳戶持有人稅籍與特定相關資料。每個稅籍國家均按其本身的規則釐定稅籍的定義。一般來說,個人稅籍係為個人居住的國家。若干特別情況可能會導致個人成為其他國家的居民,或同時成為超過一個國家的居民(多重居住地)。若個人為美國公民或具有美國稅務居民身分,亦需將美國稅籍身分於此聲明書中列示。相關稅籍詳情,請諮詢您的稅務顧問或瀏覽下列有關FATCA或CRS網頁的資料 https://www.irs.gov/或http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/
  - Regulations based on the Foreign Account Tax Compliance Act ("FATCA") and Taiwan Common Reporting and Due Diligence rules to collect and report an account holder's tax residence and certain information. Each jurisdiction has its own rules for defining tax residence. In general, you will find that tax residence is the country in which you live. Special circumstances may cause you to be resident elsewhere or resident in more than one country at the same time (dual residency). If you are a U.S. citizen or tax resident under U.S. law, you should indicate that you are a U.S. tax resident on this form. For more information on tax residence, please consult your tax adviser or the information for FATCA and CRS at https://www.irs.gov/ or http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/.
- 4. 若您(或帳戶持有人)的稅籍非屬臺灣,中國人壽在法律上有責任把此聲明書內的資料及有關金融帳戶之其他金融資訊,申報予美國國稅局或臺灣稅務機關,除具有美國公民或美國稅籍居民身分外,臺灣稅務機關會將該資訊交換予與本國簽訂跨國協定之其他稅籍國家。If your (or the account holder's) tax residence is located outside Taiwan, CHINA LIFE INSURANCE COMPANY LIMITED may be legally obliged to pass on the information in this form and other financial information with respect to your financial accounts to the IRS or Taiwan tax authority. Except U.S citizen or U.S tax resident, Taiwan tax authority may exchange this information with tax authorities of jurisdictions pursuant to intergovernmental agreements to exchange financial account information.

相關名詞解釋請詳附錄三。

Please refer to the Appendix III for definitions.

除依據FATCA之規定或立同意書人之稅籍出現變動外,此聲明書屬永久有效。

Except the rule of FATCA or a change in circumstances relating to information of account holder's tax status, this form will remain valid.

若帳戶持有人為獨資資本主,請填寫「FATCA及CRS客戶自我聲明書暨個人資料同意書(個人專用)」;若為聯名帳戶持有人,請每位聯名帳戶持有人分別填寫一份聲明書。

Please fill in the FATCA and CRS Individual Self-Certification & Personal information Form if the account holder is a sole trader or a sole proprietor, for joint or multiple account holders, complete a separate form for each individual account holder.

若帳戶持有人為未達法定年齡之未成年人,需由法定代理人完成此聲明書。

A legal guardian should complete the form on behalf of an account holder who is a minor.

中國人壽作為一家金融機構,依法不得提供稅務或法律意見。As a financial institution, we are not allowed to give tax advice.

若您對此聲明書內容或所屬稅籍定義具有疑問,請聯絡您的稅務顧問或參照當地稅務機關發布之相關資訊。

If you have any questions then please contact your tax advisor or refer to related information published by domestic tax authority.



## 【附錄三】名詞解釋

### [Appendix III] Definitions

# 注意:以下名詞解釋係協助您填寫此聲明書使用。若您對於下述名詞定義上有疑問,請與您的稅務顧問聯繫。

Note: The following selected definitions are provided to assist you with the completion of this form. If you have any questions about these definitions or require further detail, please contact your tax adviser.

# 1. 帳戶持有人 Account Holder

「帳戶持有人」指由具現金價值保險契約或年金保險契約之帳戶持有人,為有權使用現金價值或變更受益人之人,如無有權使用 現金價值或變更受益人之人,為該契約之要保人及受益人。具現金價值保險契約或年金保險契約到期時,帳戶持有人為有權依該 契約領取給付之人。

The term "Account Holder" means in the case of a Cash Value Insurance Contract or an Annuity Contract, the Account Holder is any person entitled to access the Cash Value or change the beneficiary of the contract. If no person can access the Cash Value or change the beneficiary, the Account Holder is any person named as the owner in the contract and any person with a vested entitlement to payment under the terms of the contract. Upon the maturity of a Cash Value Insurance Contract or an Annuity Contract, each person entitled to receive a payment under the contract is treated as an Account Holder.

### 2. 稅務識別碼(包括具有同等功能的辨識編號) TIN (including "functional equivalent")

「稅務識別碼」係指外國基於執行稅法之目的,辨識個人或實體之編號或具相當功能之辨識碼。稅務識別碼是稅籍國家向個人或 法人分配獨有的字母與數字組合,用於識別個人或法人的身分,以便實施該稅籍國家的稅務法律。有關可接受的稅務編號的更多 詳細資訊刊載於經濟合作與發展組織的自動交換資料網站。

某些稅籍國家不發出稅務編號。但是,這些稅籍國家通常使用具有等同辨識功能的其他完整號碼(「具有等同功能的辨識號碼」)。 此類號碼的例子包括,就個人而言,社會安全號碼/保險號碼、公民/個人身份/服務代碼/號碼,以及居民登記號碼。

The term "TIN" means a taxpayer identifying number issued by the authorities which can identify individuals or entities.

A TIN is a unique combination of letters or numbers assigned by a jurisdiction to an individual or an Entity and used to identify the individual or Entity for the purposes of administering the tax laws of such jurisdiction. Further details of acceptable TINs can be found at the OECD automatic exchange of information portal.

Some jurisdictions do not issue a TIN. However, these jurisdictions often utilize some other high integrity number with an equivalent level of identification (a "functional equivalent"). Examples of that type of number include, for individuals, a social security/insurance number, citizen/personal identification/service code/number, and resident registration number.

如帳戶持有人為中華民國稅務居住者,填列稅務識別碼如下:

- 1. 具身分證字號者為身分證字號(10碼,由內政部戶政司編配)。
- 具統一證號者為統一證號(10碼,由內政部移民署編配)。
- 3. 個人無身分證字號或統一證號者,以現行稅務識別碼(大陸地區人民為9+西元出生年後2碼及出生月日4碼;其 餘情形為西元出生年月日8碼+護照顯示英文姓名前2字母2碼)方式編配。

If the Account Holder is a tax resident of the ROC, his or her Tax Identification Number (TIN) is as follows:

- 1. National ID Card Number (a 10-digit code issued by the Department of Household Registration, Ministry of the Interior)
- 2. Uniform ID Number (a 10-digit code issued by the National Immigration Agency, Ministry of the Interior)
- 3. The current Taxpayer Code Number for those who have neither National ID Card Number nor Uniform ID Number is assigned as follows: Mainland China citizens are coded as 9+yy+mm+dd (for example born on October 25, 1985, the code would be 9851025); for other foreigners, yyyy+mm+dd + the first two letters of his or her English name in order printed on his or her passport. (for example, the code for David Caruso born on October 25, 1985, would be 19851025DA)

