



ZURICH

蘇黎世

To: Zurich Insurance Company
25-26/F., One Island East,
18 Wetlands Road, Island East,
Hong Kong

RE: CANCELLATION OF INSURANCE 保險取消通知

I want to cancel my insurance plan and understand that one month notice is required. The details are as follows:
本人欲取消貴公司之保險計劃，並明白需於一個月前預先通知。保單資料如下：

Policy no. : _____
保單號碼

Product : _____
保險計劃

Policyholder : _____ I.D. no.: _____ ()
投保人 身份証號碼

Cancellation Reason 取消原因:

1. Not satisfy with Insurance Co. Service 不滿保險公司的服務
2. Not satisfy with Bank service 不滿銀行的服務
3. No money 缺乏金錢
4. No need/use 不需要 / 沒有用
5. Emigrating to order country 移居離港
6. Family objection 家人反對
7. Buy another insurance policy 購買別的保險
8. Others : _____
其他 (Please specify) 請譚明

Thank you for your kind attention.

Signed : _____
(Policyholder) 投保人簽名

Dated : _____