

富邦人壽保險股份有限公司
法定代理人同意書
Agreement from Legal Representative

立同意書人_____係未成年人_____ (身分證字號: _____, 以下稱未成年人)之法定代理人, 因無法於本次續保(原保單號碼: _____)之相關文件親自簽署, 特立此書同意未成年人向 貴公司辦理續保事宜。On behalf of the legal representative of insured under 20 years old who is unable to sign personally for the policy renewal (name: _____, ID number: _____), I (name: _____) declare my statement as follows to complete the renewal process for the insured with the original policy (policy number: _____) to the insurance company.

立同意書人簽名確認無誤, 且對於未成年人向 貴公司申請續保相關事項, 依法負授權人責任。I confirm my authorized signature and will be responsible for the application of policy renewal to the insurance company as a legal representative according to the related laws.

此致 富邦人壽保險股份有限公司 Attention Fubon Life Insurance Co., Ltd.

簽 名 處 Signature	中華民國文件證明專用 R.O.C. Document Authentication
立同意書人: (簽章) Signature of Applicant 身分證字號: ID Number 與未成年人之關係: Relationship of Legal Representative & Applicant 住址 Address:	中華民國文件專用貼紙
立同意書人: (簽章) Signature of Applicant 身分證字號: ID Number 與未成年人之關係: Relationship of Legal Representative & Applicant 住址 Address:	
公 證 人 簽 名: Signature of Notary Public	

註: 若法定代理人在中華民國境內者, 則免公證人簽名及文件證明專用章。Note: If the legal representative is within the territory of the ROC, the signature of notary public and the seal of document authentication are not required.

中 華 民 國 年 月 日 (Date: Year/Month/Day)