

# 亞太家居保險投保書

## Asia-Pacific Home Insurance Application Form



香港分公司：香港干諾道中148號粵海投資大廈23樓  
Hong Kong Branch : 23/F, Guangdong Investment Tower, 148 Connaught Road Central, Hong Kong.

Tel : 2165 9200

### NOTE 備註：

1. 投保人請以英文正楷填寫及在適當方格內加“✓”號。任何答案如有更改，敬請在旁簽署。The Applicant has to complete the form in English BLOCK LETTERS and please put a “✓” in the box where appropriate. Any changes to be made should be signed by the Applicant.
2. 若不清楚此投保書需要透露的資料內容，請致電亞太財產保險熱線 (852) 2165 9229/2165 9231 查詢。讓保險公司了解實況，有助保障投保人及/或受保人的利益，若未能充份透露實情將會使投保人及/或受保人得不到所需求的保障，甚至使保單失效。If you have any doubt about the information required in this application form, please call Asia-Pacific Property & Casualty Insurance Hotline (852) 2165 9229/2165 9231 to enquire. In order to protect the Applicant's and/or Insured Person's rights, it is necessary for the Applicant to provide sufficient information to the insurance company. Failure to disclose any material fact may mean that the policy will not provide the Applicant and/or Insured Person with the coverage required, or may render the policy void or voidable.
3. 若此投保書所合的內容與保單條款有任何歧異，概以保單為準。In the event of any discrepancy or inconsistency between the information contained in this application form and the terms stated in any policy issued, the policy terms shall prevail.
4. 此保險計劃乃由亞太財產保險有限公司承保。This insurance plan is underwritten by Asia-Pacific Property & Casualty Insurance Co., Ltd.
- 5.

### 投保人資料 Details of the Applicant

姓名 (與香港身份證或商業登記名稱一致) Name of Policyholder (as on HKID or BR)		<input type="checkbox"/> 先生 Mr	<input type="checkbox"/> 女士 Ms
出生日期 (日/月/年) (如適用) Date of Birth (dd/mm/yy) (if applicable)	婚姻狀況 (如適用) Marital Status (If applicable)	<input type="checkbox"/> 單身 Single	<input type="checkbox"/> 已婚 Married
職業 (如適用) Occupation			
通訊地址 Correspondence Address			
聯絡電話 (住宅) Contact No. (Home)	聯絡電話 (手提) Contact No. (Mobile)	電子郵箱 Email:	

### 家居財物詳情 (基本保障) Home Contents (Basic Section)

投保家居地址 (如與上址不同) Address of home to be insured (if different from above address)	
建築總面積 (平方呎) Gross Floor Area (in square feet)	毛保費 (港幣): Gross Premium (HK\$)
樓宇年份 Age of building	
投保居所的用途 Home to be insured for	<input type="checkbox"/> 自住 Self-occupied <input type="checkbox"/> 出租 Rental <input type="checkbox"/> 租用 Tenant
* 閣下是否要求為家中任何一件價值超過 HK\$100,000 的家居財物進行單獨投保? * Do you require insurance for any single household item with a value exceeding HK\$100,000?	<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No
# 如果“是”，請詳細註明並列出其價值： # If “Yes”, please specify and list item(s) with their values:	
* 閣下是否要求為家中任何一件價值超過 HK\$15,000 的貴重財物進行單獨投保? * Do you require insurance for any single valuable item at home with a value exceeding HK\$15,000?	<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No
# 如果“是”，請詳細註明並列出其價值： # If “Yes”, please specify and list item(s) with their values:	
* 本公司或會收取適當的額外保費 An additional premium will be charged by us as appropriate # 若空位不敷應用，請另加紙張填寫 Should there be insufficient space, please continue on a separate sheet	

### 樓宇保險 (自選投保項) Buildings (Optional)

閣下是否要求樓宇保險？  
Do you require insurance for Building Section?  是 Yes  否 No  
毛保費 (港幣)：  
Gross Premium (HK\$):

閣下的財產是否被抵押？  
Is your property mortgaged?  是 Yes  否 No  
如果“是”，請列出承受抵押人或銀行的名稱：  
If “Yes”, please give the name of Mortgagee/Bank:

### 全球個人財物保險 (自選投保額) Worldwide Personal Effects Section (Optional)

閣下是否要求全球個人財物保險？  
Do you require insurance for Worldwide Personal Effects Section?  是 Yes  否 No

\* 閣下是否要求為閣下的任何一件價值超過 HK\$5,000 的個人財物進行單獨投保？  
\* Do you require insurance for any single valuable item with a value exceeding HK\$5,000?  是 Yes  否 No

# 如果“是”，請詳細註明並列出其價值  
(注意：請附上證明如收據、估價或相片等)：  
# If “Yes”, please specify and list item(s) with their values  
(Important: Please attach proof such as receipt, valuation or picture):

\* 本公司或會收取適當的額外保費  
An additional premium will be charged by us as appropriate  
# 若空位不敷應用，請另加紙張填寫  
Should there be insufficient space, please continue on a separate sheet

### 家居僱傭保險 (自選投保項) Domestic Helper (Optional)

閣下是否需要家居僱傭保險？  
Do you require insurance for Domestic Helper Section?  是 Yes  否 No  
如果“是”，請註明閣下的家居傭工的總人數：  
If “Yes”, please advise the total number of helper: \_\_\_\_\_  
毛保費 (港幣)：  
Gross Premium (HK\$): \_\_\_\_\_

### 生效日期 Policy Effective Date

日 Date                      月 Month                      年 Year                      一年 for one year

### 請回答以下問題 Please answer the following questions

1. 閣下所投保的家居保險曾否被保險公司拒絕受保或增加條款 (增加保費)？  
Have you ever been refused and/or required special terms (or additional premiums) for any of the insurance sections now proposed?  是 Yes  否 No
2. 閣下所投保的家居保險在過去三年內，曾否向保險公司索償過？  
Did you suffer in the past three years any loss for any of the risks proposed to be covered by this insurance?  是 Yes  否 No
3. 閣下之居所建築年份是否超過 30 年？  
Has your home been built for over 30 years?  是 Yes  否 No
4. 閣下之居所是否屬於低層樓宇，如村屋，平房等？  
Is your home built in a low-rise building, e.g. village house?  是 Yes  否 No
5. 閣下之居所不是由磚塊、石頭或者混凝土建成？  
Is your home not built and roofed with bricks, stone or concrete?  是 Yes  否 No

如果以上問題中有任何回答為是，請註明詳情 (若空位不敷應用，請另加紙張填寫)：  
If you answer “Yes” to any of the above questions, please give details (Please continue on a separate piece of paper if the space is insufficient):

## 選擇拒絕在直接促銷中使用個人資料 Opt-out from Use of Personal Data in Direct Marketing

亞太財產保險有限公司(「本公司」)可能會使用您的個人資料作直接促銷，但在未經您同意的情況下，本公司不能就此目的使用您的個人資料。若您不希望本公司在直接促銷中使用您的個人資料，請在下列空格內劃上「✓」號。

我不同意使用我的個人資料作直接促銷用途

以上代表您目前就是否希望接受本公司直接促銷的聯繫或資訊的選擇，並取代您在本申請前可能曾給予本公司的任何選擇。

請注意，您以上的選擇將適用於列在本公司的「收集個人資料聲明」第三段(「該聲明」)內作直接促銷的產品、服務、及/或標的。請同時參閱該聲明以知悉可能用作直接促銷的個人資料種類。

Asia-Pacific Property & Casualty Insurance Co., Ltd. (the "Company") may use your personal data for direct marketing but the Company cannot use your personal data for such purpose without your consent. Please tick "✓" in the box below if you do not wish the Company to use your personal data for direct marketing.

I do not agree to the use of my personal data for direct marketing purposes

**The above represents your present choice of whether or not to receive direct marketing contact or information from the Company. This shall replace any choice you may have given to the Company prior to this application.**

Please note that your above choice shall apply to the direct marketing of the products, services and/or subjects as set out in paragraph 3 of the Company's Personal Information Collection Statement (the "Statement"). Please also refer to the Statement for the kinds of personal data which may be used for direct marketing.

## 聲明 Declaration

本人/我們，謹此聲明並同意：

1. 於此申請表格內所提供的資料及細節均是準確無誤，真實及為事實之全部，並且是盡本人/我們所知及所信而作答的。本人/我們並沒有隱瞞任何重要資料及同意此申請表格之內容及聲明將成為此項保險合約之承保根據。本人/我們在此確認，如未能提供真實及準確無誤之資料或通知亞太財產保險有限公司(「貴公司」)任何有關此保險申請之重要資料，將可能導致貴公司不能接受或處理此保險申請或令本保單失效。
2. 一概保障必須在本申請獲接納後並已將應付保費繳交予貴公司後始可生效。
3. 根據本人/我們所知及確信，上述受保單位於過往3年內從未因火警或其他原因引致任何損失。
4. 本人/我們未曾於投保同類型家居保險時被拒絕接納申請/續保，或被增加附帶條款。
5. 除非本人/我們預先發出取消保單的書面通知，否則此保單將於每年保障屆滿日自動續保，並於貴公司收妥保費生效(保單自動續保只適用於直接投保的客戶)。
6. 本人/我們明白及確認貴公司會就本人/我們購買及接受貴公司簽發的保單及其後續保該保單，向負責安排有關保單的獲授權保險經紀(如有)支付佣金。本人/我們若在此代表法人團體簽署，即同時確認本人/我們已獲該法人團體授權。本人/我們亦明白貴公司必須取得上述的同意，才可以處理有關保險申請事宜。
7. 本人/我們確認已閱讀及明白隨本表格附上有關貴公司的收集個人資料聲明。

**I/WE, HEREBY DECLARE AND AGREE THAT :**

1. The information and particulars provided on this application form are accurate, true and complete and are given to the best of my/our knowledge and belief. I/We have not withheld any material information and accept that this application and declaration shall form the basis of the contract between Mlanan Property And Casualty Insurance Company Limited (the "Company") and me/us. I/We hereby acknowledge that failure to supply true and accurate answers to this application or inform the Company of all material information about my/our application may render the Company unable to accept or process this application or the insurance policy void.
2. The insurance coverage applied for shall only take effect when this application has been accepted by and the required premium has been paid to the Company.
3. To the best of my/our knowledge, the insured premises has never suffered any fire damage or other loss in the past two years.
4. I/We have never had any new application/renewal declined, nor have special terms and conditions been imposed on such application or renewal for household insurance.
5. This policy will be automatically renewed on an annual basis upon expiry and will come into effect upon successful premium collection unless prior written instruction for cancellation of policy is given by me/us. (Auto-renewal of policy applies only to those policyholders whose application is made directly with the Company.)
6. I/We understand and acknowledge that the Company shall pay the authorized insurance broker (if any) a commission for arranging the insurance policy, as a result of purchasing and taking up the policy issued by the Company as well as renewing the said policy thereafter. If I/We sign herein on behalf of a body corporate, I/We further confirm that I/We am/are authorized to do so. I/We further understand that the above agreement is necessary for the Company to proceed with the application.
- 7.. I/We confirm having read and understood the Company's Personal Information Collection Statement as accompanied with this form.

此外，本人授權「亞太財產保險有限公司」可向現存或不時成立的任何保險公司協會或聯會或類同組織從保險業內收集的資料中查閱及/或核對本人及/或受保人任何資料。本人明白本人有權查閱及要求更正由「亞太財產保險有限公司」持有有關本人及/或受保人的個人資料。若有此需要可寫信並寄至香港干諾道中148號粵海投資大廈23樓室向本公司提出。

Moreover, "Asia-Pacific Property & Casualty Insurance Co., Ltd." is hereby authorized to obtain access to and/or to verify any data provided by me and/or the insured person(s) with the information collected by any association, federation or similar organization of insurance companies from the insurance industry. I understand that I have the right to obtain access to and to request correction of any personal information concerning myself and/or the insured person(s) held by the "Asia-Pacific Property & Casualty Insurance Co., Ltd.". Requests for such access can be made in writing to our Data Protection Officer, 23/F, Guangdong Investment Tower, 148 Connaught Road Central, Hong Kong

申請人簽署 Signature of Applicant

(若保單持有人為商業實體或公司，請加蓋公司印章)

(with company chop if the Policyholder is a business entity / company)

申請日期 Date of Application

本投保書在未被司意受保前，「亞太財產保險有限公司」不負任何責任。The "Asia-Pacific Property & Casualty Insurance Co., Ltd." has no liability whatsoever before the application for insurance in this Application Form is accepted.

**保險公司專用 For Office use only**

保單編號 Policy No.	經辦人 Handled By	覆核人 Checked By	日期 Date
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