



Application Form for
PRU*choice*
Small Office Xtra Insurance
保誠精選
「興業寶」辦公室保險計劃
申請表

For further information, please contact:

Prudential General Insurance Hong Kong Limited

(A member of Prudential plc group)

3/F, Berkshire House, 25 Westlands Road, Quarry Bay, Hong Kong

Tel: (852) 3656 8362 Fax: (852) 2164 8445

如有查詢，請致電或親臨本公司，地址如下：

保誠財險有限公司

(英國保誠集團成員)

香港鰂魚涌華蘭路25號栢克大廈3樓

電話：(852) 3656 8362 傳真：(852) 2164 8445

www.prudential.com.hk

GI3/APP0013B/P01 (05/14)

NAVIGATOR
Insurance Brokers Ltd.

Unit 8E, Golden Sun Centre, 223 Wing Lok St, Sheung Wan, Hong Kong
Tel : +852 2530 2530 | Fax : +852 2530 2535
Email : crew@navigator-insurance.com | www.navigator-insurance.com

Details of the Applicant/Company 申請人 / 投保公司資料

(Please complete in BLOCK LETTERS 請用英文正楷填寫)

Name of Company/Business 公司/機構名稱

Address of Insured Office 受保辦公室地址

Flat/Room 室 Floor 樓 Block 座

Building/Estate 大廈/屋苑

Street/Road & District Area 街道及地區

☐ HK 香港 ☐ KLN 九龍 ☐ NT 新界

Tel No. 電話號碼

Name of Contact Person 聯絡人姓名

Email Address 電子郵箱

Nature of Business 公司業務性質

Certificate of Incorporation/Business Registration Certificate/Other (please delete as appropriate)
公司註冊證書/商業登記證/其它 (請刪去不適用者)

Sum Insured (HK\$) 投保金額 (港幣\$)

Coverage 投保項目	Sum Insured 投保額	Premium 保費
		(For office use only) (由本公司填寫)
1. Office Contents 辦公室設備 (include office appliance equipment, computer system, record or document, sample or trade stock, work of art, personal effects belonging to employer or employees, tenant's decoration, landlord's fixture and fitting) (包括所有辦公室電器、器材、電腦系統、資料或紀錄、貨辦或存貨、藝術品、僱主及僱員的私人財物、自置的裝修及業主提供的裝置)		
2. Business Interruption 營業中斷保障		Free 免費
3. Money Protection 金錢損失保障		Free 免費
4. Personal Accident 個人意外保障		Free 免費
5. Public Liability 公眾責任保障		Free 免費

6. Employees' Compensation (Optional) 僱員補償保障 (自選項目)	Number of Employees 僱員人數	Total Annual Earnings (HK\$) 所有僱員的 總年薪(港幣)	Premium 保費
			(For office use only) (由本公司填寫)
Indoor Employees (such as office managers, administrative and clerical staff) 內勤僱員 (如辦公室經理，行政人員及一般文員)			
Outdoor Employees (Such as outdoor salesmen, private car drivers, messengers, merchandisers) 外勤僱員 (如戶外推銷員、私家車司機、信差、辦貨員)			
Manual Workers not involved in hazardous works (Such as goods vehicle drivers, deliverers, outdoor engineers) 從事體力勞動但非危險性工作的僱員 (如貨車司機、送貨員、外勤工程師)			
Others (Please specify) 其他 (請註明)			
Total 總數:			

The minimum premium per Policy is HK\$1,250. Employees' Compensation Insurance Levy is required if you effect the Section of Employees' Compensation.

每份保單之最低保費為港幣\$1,250。如閣下投保僱員補償保障，本公司將收取僱傭保險徵款。

Insurance Details 投保資料

1. Have you (or your Company) ever made a claim for any of the risks covered by this insurance programme during the past 3 years? If yes, please give full details. 閣下（或投保公司）在過往三年內，就本計劃的承保項目，是否曾向任何一間保險公司提出索償？若答案為“是”，請詳述。 _____ _____	Yes ☐ 是 No ☐ 否
2. Have there been any accidents happened to employees of you (or your company) during the last 3 years? If yes, please give full details. 閣下（或投保公司）的員工，在過往三年內，是否曾因工受傷？若答案為“是”，請詳述。 _____ _____	Yes ☐ 是 No ☐ 否
3. Does any employee of you (or your Company) be involved in manual work or hazardous work other than that incidental to the Nature of Business as stated in this Application Form? If yes, please give full details. 閣下（或投保公司）的員工，在所述公司業務性質範圍外，是否須從事其它體力勞動工作或危險性工作？若答案為“是”，請詳述。 _____ _____	Yes ☐ 是 No ☐ 否
4. Have any insurers declined to insure you (or your Company), refused to renew, imposed special terms on, required an increased rate for or cancelled your office insurance? If yes, please give full details. 閣下（或投保公司）在投保辦公室保險時，是否曾被其他保險公司取消保單，拒絕承保／續保，加上特別條款或增加保費？若答案為“是”，請詳述。 _____ _____	Yes ☐ 是 No ☐ 否

Period of Insurance 保單生效期

Day日 Month月 Year年
Policy to commence on / / for one year.
本 保 單 由 起生效為期一年。

Important Notes to Applicant 申請人須知

1. Disclosure - The applicant is requested to disclose any other facts known to the applicant which are likely to affect acceptance or assessment of the insurance cover the applicant is applying for. Should the applicant have any doubts about what should be disclosed, please feel free to contact us or your financial consultant/broker. The applicant is recommended to keep a record (including copies of letters) of any additional information given for the applicant's future reference. Failure to disclose may mean that the Policy will not provide with the cover the applicant require, or perhaps may invalidate the Policy altogether.

透露 - 申請人必須就申請表內所有問題作出確實回答，並就申請需要提供一切有關資料，如有懷疑請向本公司或有關理財顧問/經紀查詢。如作出不確實回答或提供不正確資料，會令本保單作廢及不能生效。請保留申請表副本（包括信件影印本）以作日後參照。

2. A specimen copy of the Policy and a copy of your completed Application Form will be supplied on request.

如有需要，本公司可提供保單原文及申請表副本以作參考。

3. All benefits and exclusions are only briefly outlined here. For further details, please refer to the Policy.

上述保障及不保範圍並未包括所有細節，詳情請參閱保單。

Declaration 聲明

I/We hereby declare and agree on behalf of my Company that:

本人 / 吾等現代表投保公司，聲明及同意：

1. the Insured Office as stated in this Application Form is solely occupied by me/my Company as an office and no processing and/or manufacturing of any kind is carried out within the Office.
投保之辦公室，只由本人 / 本公司佔有，及用作寫字樓用途，本人 / 本公司並無在辦公室內從事製造業或有關之工序。
2. the premises of the Insured Office is built of brick or concrete and roofed with concrete, and is in good state of repair.
本人/本公司投保之辦公室，乃由磚石或三合土所造成，其屋頂亦由三合土所建，投保之辦公室有進行經常性的維修。
3. the statements and particulars given in this application are, to the best of my/my Company's knowledge and belief, true and complete and that this application shall form the basis of the contract with Prudential General Insurance Hong Kong Limited.
就本人/本公司知悉範圍內，此申請表上填報的一切資料，均屬確實完整，本人/本公司並同意以此申請表作為本人/本公司與保誠財險有限公司之間所訂合約的根據。
4. the insurance will not be in force until the application has been accepted by Prudential General Insurance Hong Kong Limited and **the premium has been paid**, except to the extent of any official cover note which may be issued.

除持有保誠財險有限公司簽發的臨時保單外，保障需在保誠財險有限公司覆核、接納申請表及**已繳付保費**後才生效。

PERSONAL INFORMATION COLLECTION STATEMENT

收集個人資料聲明

Prudential General Insurance Hong Kong Limited (referred to as "the Company", "our", "we", or "us" in this Part entitled 'Personal Information Collection Statement') may collect certain personal information, including without limitation your name, identity card number (and copy of identity card), passport number, contact information, family history, health and medical information and financial information ("**Personal Information**") from you when you apply for insurance or financial products and services from us, or when you apply to make changes to your policy, or when you make a claim against a policy. We may also collect Personal Information about you from third parties such as other insurance companies or agents, government agencies, medical personnel, credit reporting agencies, courts or public records.

保誠財險有限公司（在題為「收集個人資料聲明」之本部份，簡稱「本公司」或「我們」）可能會於閣下向我們申請保險或金融產品及服務、申請更改保單或就保單提出索償時向閣下收集一些個人資料，包括但不限於閣下的姓名、身份證號碼（及身份證副本）、護照號碼、聯絡資料、家族歷史、健康和醫療資料，以及財務資料（以下簡稱「個人資料」）。我們還可能從第三方，如其他保險公司或代理、政府機構、醫務人員、信用報告機構、法院或公開記錄等，收集關於閣下的個人資料。

1. Purpose of Collection 收集資料之目的

We may use your Personal Information for the following purposes: (a) to process your application; (b) to administer and process insurance policies, insurance claims and medical, security and underwriting checks; (c) to process payment instructions; (d) to verify your eligibility for insurance, financial or wealth management products and services; (e) to design and provide you with insurance, financial and related services and products; (f) to communicate with you; (g) to provide you with promotional materials relating to insurance or financial services or related wealth management products of the Company, and those of other entities whose ultimate parent company is Prudential plc ("**companies within the Prudential Group**") or partnering financial institutions; (h) to perform a policy review or needs analysis; (i) to conduct research and statistical analysis; and (j) to meet disclosure requirements imposed by law or regulatory authorities.

我們可能會使用閣下的個人資料作下列用途：(a) 處理閣下的申請；(b) 管理和處理保單、保險索償、醫療、抵押和承保檢查；(c) 處理付款指示；(d) 核實閣下申請保險、金融或財富管理產品及服務的資格；(e) 設計及為閣下提供保險、金融及相關的服務和產品；(f) 與閣下進行通訊；(g) 為閣下提供關於本公司以及其他母公司為英國保誠集團的實體（「保誠集團內的公司」）或夥伴金融機構的保險或金融服務或相關的財富管理產品的推廣材料；(h) 進行保單審查或需求分析；(i) 進行研究和統計分析；及 (j) 符合法律或監管當局實施的披露要求。

2. Classes of Transferees 被資料轉交者的類別

We may disclose your Personal Information to third parties (within or outside Hong Kong) for the purposes outlined at Section 1 above, including without limitation the following third parties: (a) insurance agents; (b) re-insurance companies; (c) other companies within the Prudential Group; (d) claims investigation companies; (e) third party administrators; (f) third party service providers (including without limitation insurers, bankers, lawyers, accountants, and other third party service providers who provide administrative, telecommunications, computer, payment, printing, redemption or other services to us to enable us to operate our business); (g) industry associations and federations; (h) medical bill review companies; (i) professional advisors; (j) researchers; (k) credit reference agencies; (l) debt collection agencies; (m) partnering financial institutions; (n) regulators and government agencies; (o) law enforcement agencies; (p) the Courts.

為達到上述第一部分所列明之目的，我們可能會向第三方（在香港境內或境外）透露閣下的個人資料，包括但不限於以下第三方：(a) 保險代理；(b) 再保險公司；(c) 其他保誠集團內的公司；(d) 索償調查公司；(e) 第三方案理人；(f) 第三方服務供應商（包括但不限於保險公司、銀行、律師、會計師，以及其他提供行政、電訊、電腦、付款、印刷、贖回或其他服務以令我們的業務可以運作的第三方服務供應商）；(g) 行業協會及聯會；(h) 醫療帳單審查公司；(i) 專業顧問；(j) 研究人員；(k) 信貸資料服務機構；(l) 收賬代理；(m) 夥伴金融機構；(n) 監管機構及政府機構；(o) 執法機構；(p) 法院。

We may transfer your name, contact information and information about the products you have purchased (including the sales channel from which such products were purchased) to other companies within the Prudential Group, and other partnering financial institutions, for the purpose of providing you with promotional materials relating to those entities' insurance or financial services or related wealth management products. However, we will not disclose your Personal Information to any other third parties for direct marketing purposes without your consent.

我們可能將閣下的姓名、聯絡資料和閣下已購買的產品資料（包括購買該等產品的銷售渠道），轉交其他保誠集團內的公司及其他夥伴金融機構，以向閣下提供有關這些實體的保險、金融服務或相關的財富管理產品的有關推廣材料。然而，我們不會未經閣下的同意，向任何其他第三方透露閣下的個人資料作直接促銷用途。

We may transfer your Personal Information in connection with a transaction with another company which affects the control, governance, structure and/or management of all or a substantial part of our business, or if required to satisfy applicable legal or regulatory requirements.

在有關影響到我們全部或重大部分業務的控制權、治理、結構和/或管理的交易時，或在必須符合適用的法律或監管要求下，我們可能會轉交閣下的個人資料。

3. Consequence of failing to provide Personal Information
未能提供個人資料的影響

Unless otherwise specified by us, it is mandatory for you to provide the Personal Information requested by us. In the event that any such Personal Information is not provided, we may be unable to provide you with the services or carry out the activities outlined at Section 1 above.

除非我們另有規定，否則閣下必須提供我們所要求的個人資料。若未能提供任何此等個人資料，我們可能無法為閣下提供服務或進行上述第一部分所列出的活動。

4. Access and Correction Rights 查閱和更正的權利

Under the Personal Data (Privacy) Ordinance (the "Ordinance"), you have the right to request access to and correction of any Personal Information that you provide to us. You may make such a request by writing to our Data Protection Officer at 3/F, Berkshire House, 25 Westlands Road, Quarry Bay, Hong Kong. In accordance with the Ordinance, we have the right to charge a reasonable fee for the processing of any Personal Information access or correction request.

根據《個人資料（私隱）條例》（「條例」），閣下有權要求查閱及更正任何閣下提供給我們的個人資料。閣下如欲查閱或更正個人資料，請向我們的資料保護主任作出書面要求，地址是香港鰂魚涌華蘭路25號栢克大廈3樓。根據條例的規定，我們有權就處理查閱及更正任何個人資料的要求，收取合理的費用。

Opting-out Marketing Communications or Materials 拒絕接受促銷信息或資料

We intend to send you marketing communications or materials (as set out in the above Personal Information Collection Statement), but we cannot do so without your consent. In the event that you do not wish to receive such marketing communications or materials, please let us know by ticking the opt-out box below, and returning the form to us in person or at 3/F, Berkshire House, 25 Westlands Road, Quarry Bay, Hong Kong.

我們有意向閣下發送（載於上述收集個人資料聲明的）促銷信息或資料，但未經閣下的同意，我們不能這樣做。假若閣下不希望收到該等促銷信息或資料，請在以下拒絕接受方格內劃上「✓」號以讓我們知道閣下的意向，並親身交回本表格或送交本表格至香港鰂魚涌華蘭路25號栢克大廈3樓。

☐ Opt-out box 拒絕接受方格 (Applicable to individual only 只適用於個人客戶)

The Applicant/ Policyholder/ Insured Person hereby confirm understanding of and agreement to the contents in this Part entitled 'Personal Information Collection Statement'.

申請人/ 保單持有人/ 受保人特此確認明白並同意在題為「收集個人資料聲明」之本部份中的內容。

Authorized Signature 授權簽署

My Company Chop 投保公司印鑑

Name 姓名：_____

Date 日期：_____



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Financial Consultant's Name 理財顧問名稱 (Please complete in BLOCK LETTERS 請用正楷填寫)

Financial Consultant's Division and Code 理財顧問組別及編號

Mobile Number 流動電話號碼

Office Location 辦公室地點
ES1/FTW/PT/PT2/CC/CRB/EWT _____/F
Account Executive's Name to provide Quotation 提供報價之業務主任名稱
