

Application Form for

PRUchoice

Home Insurance

保誠精選「家居寶」家居保險計劃

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

www.prudential.com.hk



GI3/APP0001B/P01 (09/14)

Tel: +852 2530 2530 | Fax: +852 2530 2535

Email: crew@navigator-insurance.com | www.navigator-insurance.com

Details of Applicant 申請人資料 (Please complete in BLOCK LETTERS 請用英文正楷填寫) Name of Applicant 申請人姓名

Name of Applicant 申請人姓名									
Surname 姓	Given Name 名			Passport No 碼/護照號碼		Gende 性別	r 🔲 Fema	lo #	☐ Male 男
Date of Birth	(dd/mm/yy)	Marital Status	对 [] 显弧	响/ 吱克尔 加斯		土力リ	reilia	ie 🗴	□ IVIAIE 为
出生日期	(日/月/年)	婚姻狀況							
Occupation 職業		Home Tel No. 住宅電話號碼		ile No. 電話號碼		Email Address 電子郵箱			
Correspondence Address 通訊	,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 香泡	₩ D KLN	力.龍	
Address of insured Premises (i	if different from the	above)受保物業地	址(如與上述不同))					
Flat/Room	Floor		Block		Building/Estate				
室 Street/Road & District Area 街道及地區	樓		座		大廈/屋苑	HK 香泡	₩ NKLN	力 能	
Age of Building 樓齡							<u> </u>	2086	
Is the Insured Premises solely 受保住所是否只由您、您的家/	occupied by you, y 人或以下所列的同位	/our family member E朋友自住及佔有?	(s), or your friend(s	s) as declar	red below?		Yes	 是	No 否
If you have friend(s) cohabited 若您與您的朋友同住,請列明及					r/passport numbe	er.			
Period of Insurance 保	:單生效日期	Policy commend 本保單由	es on:				(dd/mm/yy) (日/月/年)	for one 起生效	e year. (,為期一年。
Basic Cover 標準保障 * Premises of gross floor area exce 本公司對建築面積超逾2,500平方9 We also accept applications for de 我們亦接受村屋投保,惟需符合有	呎或實用面積超逾2,00 etached village house	0平方呎的住所作特別原 s that are falling within	處理。 our acceptable criteri					consulta	ants for details.
1. Please "✓" to select eithe 請選擇以建築面積或實用面						lect the plan acco f選擇投保計劃並在			he premises.
					Harmony Plan	小康之家	Premier	Plan 卓	爾之家
Gross Floor Area (s			Area (sq.ft.)						
建築面積 (平方明	•		漬 (平方呎)			ial Premium (HK\$)每年保費 (港		20
500 or below 500或	,以下		ow 400或以下			550	<u>L</u>	83	
501 - 600 601 - 700			- 480 - 560			750 850		1,02	
701 - 800			- 640			950		1,32	
801 - 900			- 720			050		1,32	
901 - 1,000			- 800		1,1		<u></u>	1,59	
1,001 - 1,100			- 880		1,2		<u></u>	1,68	
1,101 - 1,200			- 960			350		1,77	
1,201 - 1,300			- 1,040					1,86	
1,301 - 1,400			- 1,120					1,94	
1,401 - 1,500			- 1,200					2,02	
1,501 - 2,000			- 1,600					2,34	
2,001 - 2,500			- 2,000		-			2,70	
Optional Cover 自選保 Please"√" the optional cover re 1. PERSONAL EFFECTS EXT Applicable to valuable perso	equired and comple FRA 額外個人財物	呆 障	. ,				Yes ;	-	☐ No 否
Full description of the specifi 請列明各項指定個人財物詳f			aluation certificates				Sum Insu 投保額 (河		K\$)
2. BUILDING STRUCTURE 模 (Premium Rate:0.07% on the s structure only.) (保率: 如與標準	sum Insured as ind							insure	☐ No 否 building
Name of Premises Owner (if 受保物業業主姓名 (如與申請			nsured (HK\$) 〔(港幣)		Mortgagee 可以財務公司名稱				
	,								

3. HOME APPLIANCE WARRANTY SERVICE EXTENSION 家庭電器延伸保障	☐ Yes 是	■ No 否
附加促患Additional Promium:		

Gross Floor Area (sq. ft.) 建築面積 (平方呎)	Saleable Area (sq. ft.) 實用面積 (平方呎)	Annual Premium (HK\$) 每年保費 (港幣\$)	First Year Discounted Premium (HK\$)* 首年優惠保費 (港幣\$)*
500 or below 500或以下	400 or below 400或以下	409	286.30
501 - 600	401 - 480	499	349.30
601 - 700	481 - 560	589	412.30
701 - 800	561 - 640	654	457.80
801 - 900	641 - 720	719	503.30
901 - 1,000	721 - 800	784	548.80
1,001 - 1,100	801 - 880	825	577.50
1,101 - 1,200	881 - 960	865	605.50
1,201 - 1,300	961 - 1,040	908	635.60
1,301 - 1,400	1,041 - 1,120	948	663.60
1,401 - 1,500	1,121 - 1,200	987	690.90
1,501 - 2,000	1,201 - 1,600	1,151	805.70
2 001 - 2 500	1 601 - 2 000	1.312	918.40

^{*}First Year Discounted Premium is valid until 31 December 2014 首年優惠保費有效期至2014年12月31日

Insurance Details 投保資料

	been declined, or had special terms and/or additional premiums imposed for any classes of insurance now applied? If yes, please give full details. 公司就現時申請的保險類別拒絕承保、續保、附加特別條款及/或加徵額外保費? 若答案為「是」,請列明詳情。
☐ Yes 是	□ No 否
	suffered a loss for any of the risks proposed to be covered by this insurance at this or other premises occupied by you in the past three years? If yes, details. 過去三年內,閣下現時投保的住所或其他由閣下佔有的住所,曾否就有關此保險計劃列明的保障範圍蒙受損失?若答案為「是」,請列明詳情。
Yes 是	□ No 否

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。
- 4. The application form must be signed by a person who has attained age 18 or above. 申請表必須由年滿18歲或以上的申請人簽署。

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.

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.

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.

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) 第三方管理人;(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。

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。 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

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。

Payment	Method 1	付款方法
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ayment method (1980)/2		
□ By Cheque 以支票繳付 (Please make the cheque payable to "Prudential General Insurance Hong Kor	ong Limited"請註明支票抬頭人為『保誠財險有限公司』)	
定的信用卡戶口內扣除保費。)	approval and premium will be collected from the designated credit card account	. 保單於核保後將每年自動續保及從指
Credit Card Account Details 信用卡戶口資料		
Applicable to premium payment by credit card only. 只供選擇以信用卡繳付保費	費之客戶填寫。	
☐ VISA VISA Card VISA 卡 ☐ Master Ca	ard 萬事達卡	
Credit Card Number 信用卡號碼		m/yy) 引/年)
	our designated credit card account for all payment(s) and recurring payment(s) of this policy inc 吾等指定的信用卡戶口內,扣除有關本保單的所有及首期保費,包括因其後背書所需的保費以及每	
		Date 日期

Declaration 聲明

I/We hereby declare and agree that 本人/吾等現聲明及同意

- the premises is of residential nature which is solely occupied by me and my family members/cohabitants (as declared), is under my/our control and is not left unoccupied for more than forty-five (45) days consecutively. For the protection of this insurance (except specially declared), the premises is also built of brick, stone and concrete and roofed with concrete, and is in good state of repair. 住所乃屬住宅性質,並全由本人/吾等及家人/同居人士(已申報者)所佔有,及每年不會連續空置超過四十五天下始告生效;另外,(除另有申報外)保險所保障的住所牆身是採用磚、石及三合土作為建築材料,屋頂則採用三合土建成,並有經常維修,適宜居住。
- no part of the premises is below ground floor level. 住所絕無任何部份低於地面。
- the premises is not a sub-divided flat. 住所並不屬於分租單位。
- the statements and particulars given in this application are, to the best of my/our 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/吾等知悉範圍內,此申請表上填報的一切資料,均屬確實完整,本人/吾等並同意以此申請表作為本人/吾等與保誠財險有限公司之間所訂合約的根據。
- the insurance will not be in force until the application has been accepted by the Company and the premium has been paid, except to the extent of any official cover note which may be issued.除持有貴公司簽發的臨時保單外,保障需在貴公司覆核、接納申請表及已繳付保費後才生效。

Signature of Applicant	Name in BLOCK LETTERS	Date
申請人簽署 X	姓名(請用英文正楷填寫)	Date 日期

Note: The minimum retained premium for every period of insurance is HK\$400 per policy. 請注意:每份保單保障期之最低付款額為港幣\$400。

For Office Use Only 本公司專用	
Financial Consultant's Name (Please complete in BLOCK LETTERS)	Financial Consultant's Division and Code
理財顧問名稱 (請用正楷填寫)	理財顧問組別及編號
Mobile Number	Office Location ES1 / FTW / PT
流動電話號碼	辦公室地點 PT2 / CRB / CC / EWT / F

