

MOTOR VEHICLE INSURANCE PROPOSAL FORM 汽車投保書

Operative Insurance Cover Required 投保項目：
☐ Comprehensive 綜合保險
☐ Third Party Legal Liabilities 第三者責任保險

Is insurance cover (damage to the Motor Vehicle only) required for driving in Guangdong Province?
 擬否附加保障至“中國廣東省”境內（只限投保車輛之損毀或損失）？
☐ Yes 是 ☐ No 否

Period of Insurance 投保期間： From 由 _____ To 至 _____

Particulars of Proposer 投保人資料：

Insured/Proposer/Company Name 投保人： Mr/Mrs/Miss 先生 / 太太 / 小姐 _____

Job / Business Nature 詳細業務性質： _____ Occupation 職業： _____ e-mail Address 電郵地址： _____

Residential Address 住址： _____

Home Tel 住宅電話： _____ Daytime Tel 日間聯絡電話： _____ Mobile Phone No 手提電話： _____

Name of Employer 受職公司名稱和地址： _____

Hire Purchase Owner (if any) 如屬分期付款，請註明貸款公司名稱： _____

Particulars of Motor Vehicle to be Insured 投保汽車之資料：

Registration Mark 車輛登記號碼	Vehicle Make 車輛製造商	Vehicle Model 車輛型號	Type of Body 車身類型	Year of Manufacture 製造年份	Seating Capacity (excl. Driver) 座位乘客限額 (司機除外)
Cylinder Capacity (c.c.) 汽缸容量(c.c.)	Gross Vehicle Weight 車輛總重	Engine Number 引擎號碼	Chassis Number 車身底盤號碼		
Has the Motor Vehicle been modified in any way from manufacturers' standard specifications ? 上述投保之汽車曾否經過任何改裝或裝置非原裝標準機件？			☐ Yes 是 ☐ No 否		If Yes Please give details:
Estimated Value of the Motor Vehicle including Accessories (Sum Insured) 汽車連配件之現時估價 (綜合保險之投保額)			Anti-Theft Alarm System (Model / Value) 防盜警報系統 (型號/價格)		

Particulars of Drivers who will regularly drive the motor vehicle 經常駕駛投保汽車人士的資料：

Full Name of Driver 駕駛人姓名	Nominated as Named Driver ? 是否提名為保單指定駕駛人	Age 年齡	Relationship with Proposer 與投保人關係	Occupation 職業	HKID Card Number 身份證號碼	Number of years has Driver been regularly driving 持續駕駛年資
Proposer 投保人	☐ 是 Yes ☐ No 否					
	☐ 是 Yes ☐ No 否					
	☐ 是 Yes ☐ No 否					

USE OF THE MOTOR VEHICLE – Please “✓” more than one if applicable 投保汽車之用途 – 請在適當方格內加上“✓”號

☐ For social domestic and pleasure purposes 私家用途
 ☐ In connection with the Motor Trade 經營車行用途

☐ For business professional use or for use by employees 商業用途
 ☐ For hire or reward 租賃或收費載客

駕駛經驗 Driving experience

If your answer is “Yes”, please provide full details in the space provided.
若「是」者，請指出及詳細列明事件細節及日期。

State whether you and/or any person who to your knowledge will drive the vehicle 請在下列說明閣下及其他駕駛人詳情		是 Yes	否 No
1.	1.1 Have had any accidents, losses or claims in the past 3 years or are there any police enquiries or prosecutions pending? 於過往三年間曾否發生意外、失竊或索償事項或現時是否被警方傳召或起訴？ 1.2 Have been disqualified from driving ? 曾否被停牌？	☐	☐
2.	Have had any traffic offence leading to deduction of driving offence points during the past 2 years or speeding records? (if "yes", state number of demerit points in total during the past 2 years _____ 於過往兩年內，曾否因任何交通違例而被扣分，或曾否有任何超速駕駛紀錄？ 請列出過往兩年內被累積扣的分數_____	☐	☐
3.	Have suffered/ been suffering any heart disease, epilepsy or suffer from defective vision or hearing or from any physical or mental infirmity? 曾否患心臟病、癲癇、或患有視力或聽覺上的缺陷或身體或精神上的毛病？	☐	☐
4.	In respect of Motor Insurance, have you or has any person who to your knowledge may drive the Motor Vehicle been declined such application, or been refused renewal or been terminated such insurance, or been imposed special terms on your/his/her policy by any insurance company? 在汽車保險方面，閣下或任何有可能駕駛此汽車人士，曾否被任何保險公司拒絕受保、拒絕續保、取消未到期之保險、或附加特別之強制條款於保單內？	☐	☐
5.	Have made any motor claims against other insurance companies in the past 3 years? 過往三年內曾否向其他保險公司提出汽車保險索償？	☐	☐

If the answer to any of the above questions (1) to (5) is “Yes”, please give details 以上第（1）至（5）項問題中，若有答案“是”者，請詳加說明。

6	For Comprehensive Insurance cover, please answer the following question: 如屬綜合保險投保項目，請回答下列問題： 6.2 Where is the Motor Vehicle parked at night? 投保汽車夜間停泊處 6.3 Other than the above-mentioned venues, please specify. 除以上地點外，請詳細說明夜間停泊處	Secured Car Park 有人看守停車場 ☐	Roadside Meter 路邊咪錶 ☐	Open Area 空地 ☐

DETAILS OF PRESENT MOTOR INSURANCE “NO CLAIM DISCOUNT” (NCD) – Please supply documentary evidence：現正享有“無賠款記錄折扣”(NCD) 之汽車保險資料—請出示證明文件：				
Registration Mark of Motor Vehicle 車輛登記號碼	NCD (%) NCD 折扣	Name of Insurer 保險公司名稱	Present Policy Number 有效保單編號	Transfer the NCD to the Motor Vehicle proposed here?是否將 NCD 折扣轉移到此投保汽車？

DECLARATION 聲明
I/We desire to insure with China Ping An Insurance (Hong Kong) Co. Ltd. (“the Company”) in respect of the Motor Vehicle as detailed herein and hereby declare that:
本人/本公司擬向中國平安保險（香港）有限公司投保上述汽車並謹此聲明如下：
(1) Save the Hire Purchase Owner (if any) mentioned above, I am/ this company is the sole owner of the Motor Vehicle, and no other party has any right or interest in the Motor Vehicle;
除上述貸款公司（如有）之外，本人/本公司是該車輛的唯一擁有者，並無第三者擁有該車輛的任何權益；
(2) The Motor Vehicle will not be driven by any person who to my/our knowledge does not hold a full valid driving license or has been disqualified from holding such driving license within the last 3 years;
投保汽車將不會給予非持有效駕駛執照或在過去三年內曾停牌人士駕駛
(3) The particulars given in this Proposal Form are true and I/we have not failed to disclose any matters which may materially affect this insurance;
本人/本公司已參閱並確認此投保書內所述各項資料全屬無誤，也並無隱瞞重要並影響保單保障之事實
(4) All particulars or answers in this Proposal Form whether or not written by my/our own hand are to the best of my/our knowledge and belief complete and true;
此投保書內所述各項資料或答案，不論是否本人/本公司親手填寫，就本人/本公司所知所信，均為事實全部並確實無訛；
(5) I/We hereby agree that this Proposal and Declaration shall be incorporated in and taken as the basis of the proposed contract between me/us and the Company; and
本人/本公司同意此投保書及聲明將作為本人/本公司與中國平安保險（香港）有限公司訂立契約之根據；

(6) I/We agree to accept a policy in the Company’s usual insurance policy form for this class of insurance.
本人/本公司同意接受中國平安保險（香港）有限公司所發給常用之汽車保險單。
(7) I/We acknowledge and confirm that I/we have read and understood the Personal Information Collection Statement (“PICS”). I/We confirm that I/we have been advised to read carefully the PICS, and I/We have read it carefully its effect and impact in respect of my/our personal data collected or held by the Company (whether contained in this application or otherwise). Based on the foregoing, I/we hereby give my/our acknowledgement and agree to the use and transfer of my/our personal data by China Ping An Insurance (Hong Kong) Co., Ltd in accordance with the PICS.
本人/我們確認本人/我們已閱讀並明白收集個人資料的聲明（“該聲明”）。本人/我們確認本人/我們已被通知本人/我們須詳細閱讀該聲明，而本人/我們已詳細閱讀該聲明對貴公司所收集或持有之本人/我們的個人資料的影響（不論是否此表格所載或從其他途徑所取得）。根據以上所述，本人/我們特此確認並同意中國平安保險(香港)有限公司根據該聲明使用及轉移本人/我們的資料。
(8) ☐ (Please Tick) For the purpose of direct marketing in accordance with s.(4) Use of Personal Data in Direct Marketing in the Personal Information Collection Statement (“PICS”), I/we do not give consent with the use and provision of my/our personal data for the purpose of direct marketing and do not wish to receive any promotional and direct marketing materials sent by China Ping An Insurance (Hong Kong) Co., Ltd.
☐ (請在方格內加上剔號) 根據在個人資料的聲明（“該聲明”）內第 4 條在直接促銷中使用個人資料，本人/我們不同意本人/我們的個人資料作直接促銷用途並不願意接收任何中國平安保險(香港)有限公司所發出的推廣及直接促銷的材料。

Proposer’s Signature 投保人簽署	Date 日期：	Authorized Agent 特許代理
(1) Failure to make or supply true and accurate declaration and information (whether material) in this Proposal Form or inform the Company of all relevant information about your insurance proposal may render the insurance policy invalid. 投保人填寫此投保書時，務必填寫並提供真實及準確的聲明及資料（不論內容關鍵與否），並告知本公司所有與投保風險相關的資料，否則該保單無效。 重要提示：(2) Please attach copy of (a) Vehicle Registration Document; (b) Owner’s ID Card and Driving Licence; (c) Named Drivers’ ID Card and Driving Licence. 投保人請出示有關文件副本：(a) 車輛登記證；(b) 車主身分證及駕駛執照；(c) 指定駕駛人之身分證及駕駛執照。		