



redefining / standards

NAVIGATOR
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ART Insurance – Proposal 藝術品保險投保書

請以英文正楷填寫 Please fill in this form in English block letters

一般資料 General Information

受保人名稱

Name of Insured

職業

Profession

年齡

Age

聯絡地址

Correspondence address

聯絡資料

Contact Details

電話

Tel

電郵

Email

投保地址資料 Insured Locations Address

地址 Location 1

地址 Location 2

建築物資料 Building Detail

地址 Loc. 1

地址 Loc. 2

1. 使用性質 (自用/ 租賃/ 出租) Occupancy (owned / rent / let)

2. 建築物結構, 樓層及年份 Type of building and year built

3. 單位面積 Floor area of premises

4. 是否經常空置 (超過 60 日以上)?
Regularly left unoccupied (for over 60days) Y/N

保安防護 Protection and Security

1. 處所是否安裝防盜, 防火警鈴設備?
Do you have burglary and/or fire alarm installed at the premises, central alarm or local alarm, please advise.

2. 處所是否有 24 小時警衛?
Do you have 24 hour security guard stationed at the premise building?

3. 您多久出遊一次? 平均出遊日數?
How often do you travel a year? What is the average duration?

4. 您是否僱用全職傭人並居於同一處所? 共幾人?
Do you have full time staff living at your premises? How many in total?

保險箱 Safe

您處所是否有保險箱? 如有, 請提供尺寸大小及型號?
Do you have a safe? (Y/N) If yes, please provide size and brand and model details.

建築物整修及內部裝潢 Major renovation or relocation

1. 在未來 12 個月內是否進行建築物整修及內部裝潢, 如有, 請提供日期及合約金額或預算?
Do you have plans for major renovation at any of the locations in next 12 months? If so, please advise the particulars and contract value.

2. 在未來 12 個月內是否會搬離現有處所, 如有請提供時間及地點?
Do you have plans for relocations of your home in next 12 months? If so, please advise the details.

移動 Movement

投保物在未來 12 個月內是否會用以展覽或搬離現有處所, 請提供時間及地點?
Do you have plan for off premises exhibition or removal to other location in next 12 months, if so, please advise the particulars and value.

損失經驗 Loss Experience		
您及家人有否損失經驗, 不論是否得到保險賠償? Have you or any member of your household ever sustained any loss or damage which may have been covered by this type of insurance if it had been in force?		
損失事由 (過去 5 年) Description of Loss (Past 5 years)	日期 Date of Loss	損失金額 Amount of Loss
聲明 Declaration 1. 本人聲明並同意在本人知悉範圍內確實及完整的提供資料以作為訂定此保險合約的根據, 並聲明決無不實說明或隱瞞。 若此要保書是由指定代理人填寫, 本人亦已查對所有資料俱以屬實。 I/We hereby declare that to the best of my/our knowledge and belief the particulars and answers given in respect of this proposal are true and complete and no material fact has been withheld or concealed. If the particulars and answers have been written by any person other than myself/ourselves that person shall be deemed to have been my/our agent for the purposes of writing the same. 2. 本人同意採取合理適當防護措施以確保保險財產的安全, 並了解以此聲明作為本人和安盛保險公司訂立本保險契約的依據。 I/We undertake to exercise all ordinary and reasonable precautions for the safety of the insured property. I/We agree that this declaration and the particulars and answers given shall be the basis of any incorporated in the contract between me/us and AXA General Insurance Hong Kong Limited.		
_____ 投保人簽署 / Proposer's Signature		_____ 日期 (日 / 月 / 年) / Date (dd/mm/yy)

投保人須知 Important Notes to Proposer

- 閣下必須在其知悉範圍內提供所有有關會影響保險公司於接納或釐定此保單條文的資料, 如對應透露的資料有任何疑問, 請即向本公司或閣下的保單代理/經紀查詢。我們建議閣下將有關的資料作記錄(包括信件副本), 以備日後作參考之用。為確保閣下之利益, 閣下應如實呈報所有資料, 否則此保單將可能無法提供閣下所需保障, 甚至可能導致此保單無效。
Any other facts known to you which are likely to affect acceptance or assessment of the insurance cover you are requesting must be disclosed. Should you have any doubt about what you should disclose, do not hesitate to ask us or your insurance agent/broker. We recommend you keep a record (including copies of letters) for your future reference of any additional information given. Providing correct answers and making sure we are informed is for your own protection, as failure to disclose such information may mean that your insurance will not provide you with the cover you require and may even invalidate the insurance altogether.
- 收集個人資料聲明
閣下提供的資料, 為本公司提供業務所需, 並可能使用於下列目的:
 - 任何與保險或財務服務有關的產品或服務, 或該等產品或服務的任何更改、變更、取消或續期;
 - 任何索償、或該等索償的調查或分析; 及
 - 行使代位權
 及有可能移轉予
 - 任何有關公司, 或任何其他從事與保險或再保險業務有關的公司, 或與保險業務有關的中介人或索償或調查或其他服務提供者, 以達到任何上述或有關目的;
 - 現存或不時成立的任何保險公司協會或聯會或類同組織(「聯會」), 以達到任何上述或有關目的, 或以便「聯會」執行其監管職能, 或其他其基於保險業或任何「聯會」會員的利益不時在合理要求下 賦予「聯會」的職能; 及
 - 或透過「聯會」移轉予任何「聯會」的會員, 以達到任何上述或有關目的。
 此外, 在此授權安盛保險有限公司由「聯會」從保險業內收集的資料中查閱及 / 或核對閣下任何資料。
 閣下有權查閱及要求更正由安盛保險有限公司持有有關閣下的個人資料, 如有需要, 可向本公司的個人資料(私隱)條例監察主任提出。
 Personal Information Collection Statement
 The information you provide to us is collected to enable us to carry on insurance business and may be used for the purpose of
 - any insurance or financial related product or service or any alteration, variations, cancellation or renewal of such product or service;
 - any claim or investigation or analysis of such claim; and
 - exercising any right of subrogation
 and may be transferred to
 - any related company or any other company carrying on insurance or reinsurance related business or an intermediary or a claims or investigation; or other service provider providing services relevant to insurance business for any other the above or related purposes;
 - any association, federation or similar organization of insurance companies ("Federation") that exists or is formed from time to time for any of the above or related purposes or to enable the Federation to carry out its regulatory functions or such other functions that may be assigned to the Federation from time to time and are reasonably required in the interest of the insurance industry or any member(s) of the Federation; and
 - any members of the "Federation" by the "Federation" for any of the above or related purposes.
 Moreover, AXA General Insurance Hong Kong Limited is hereby authorized to obtain access to and/or to verify any of your data with the information collected by the Federation from the insurance industry. You have the right to obtain access to and to request correction of any personal information concerning yourself held by our Company. Requests for such access can be made to our Personal Data (Privacy) Ordinance Compliance Officer.
- 本公司致力發展及改良產品的質素, 務求滿足閣下個人保險上的需要。作為本公司寶貴客戶, 我們會時刻為閣下提供新產品及服務的最新消息。倘若閣下日後不希望收到此等資料, 請來信通知本公司。
Our Company is committed to developing products to meet your personal insurance requirements. As you are valued customer of our Company we will keep you informed of new products and services and services as they become available. If you do not want to receive this information either now or in the future, please write and tell us.
- 此保單所提供的保障, 必須在本公司確定接納投保後, 及收受保費後, 才正式生效。
The liability of the Company does not commence until this proposal has been accepted by the Company and the premium is paid.

「註: 本中文簡譯, 概以英文為準」

[illegible][illegible]

在投保地址中不列明項目 Unspecified property to be insured by Location

藝術品種類 Category of fine art	平均值 Average value	投保額 Limit per location

註 Remarks

每件超過 HK\$400,000 必須在保單生效前附上有關證明, 如收據、評估單當中含有作者, 名目, 尺寸 及 年份。

For the article limit over HK\$400,000, copy of invoices or appraisal included Name of Artist, Title, Date, Measurement, Material to be provided upon the quote is accepted.

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.

安盛保險有限公司 AXA General Insurance Hong Kong Limited

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