Technology Product Liability Insurance

Application Form 申請表

CHUBB

Important Notices 重要提示

Before continuing, you will first need to provide us with the following:
填表前，請提供以下檔的影本作為本申請表的附件：

- Annual Report and Product Brochures must accompany Application
  請隨附公司年報和投保產品目錄
- Other documents required to be provided are indicated below
  本申請書指定需提供的其他檔
- Please add additional sheets where there is insufficient space to fully answer any question
  如提供的空間無法完整回答問題，請另附紙張回答

A. General Information 一般資訊

1. Name of Applicant (include all companies to be insured) :
   投保公司全名（包括所有被保險公司）:

2. Mailing Address and Principal Locations 郵寄地址和主要地址:

3. Web-site Address 網址:

4. Applicant is 投保人是:

☐Individual 個人	☐Partnership 合夥人	☐ Corporation 公司
☐ Joint Venture 合資	☐Other 其他 :	

5. Business of Applicant is 投保人的業務是:

☐ Manufacturer 製造商	☐Distributor 分銷商
☐Importer 進口商	☐Other 其他:

6.(a) How long has Applicant been in business ? 投保人從事該行業的年數 ?	
(b) Does Applicant have a subsidiary, affiliate or representative in the USA? 投保人在美國是否有子公司、成員公司、或代表處？	☐ Yes 是☐ No 否

If YES, please give name(s) and address(es) 如有，請提供名稱和地址:

B. Insurance Details 投保資訊

1. Policy period desired: 要求的保險期限：	From 由:
	To 至:

2. (a)U.S.A. / Canada Products 美國/加拿大的產品

List all products manufactured, sold or distributed by Applicant in or exported to U.S.A./Canada and sales by product for the last 5 years as well as estimated sales for the upcoming year (attach product brochures or other printed material describing products):

請告知過去五年及預估未來年度，貴公司外銷美加地區的各項產品銷售額 (若由產品目錄，請附上):

Products	2025 (USD) Est. Sales	2024	2023	2022	2021

(Note: Please indicate products manufactured in U.S.A/Canada by placing an "M" next to Product category).
(注意：如產品是在美國/加拿大製造，請標注「M」在該產品邊上)。

(b) Europe/ Australia Products 歐洲/澳大利亞的產品

List all products manufactured, sold or distributed by Applicant in or exported to Europe/ Australia and sales by product for the last 5 years as well as estimated sales for the upcoming year (attach product brochures or other printed material describing products):

請告知過去五年及預估未來年度，貴公司外銷歐洲/澳大利亞地區的各項產品銷售額(若由產品目錄，請附上):

Products	2025 (USD) Est. Sales	2024	2023	2022	2021

(Note: Please indicate products manufactured in Europe/ Australia by placing an "M" next to Product category).
(注意：如產品是在美國/加拿大製造，請標注「M」在該產品邊上)。

(c) (i) Rest of the World Sales of Products (excluding U.S.A./Canada/ Europe/Australia)

其餘地區的產品（不包括美國/加拿大/歐洲/澳大利亞）

List all products manufactured, sold or distributed by Applicant in or exported to Rest of the World (excluding U.S.A./Canada/ Europe/Australia) and sales by product for the last 5 years as well as estimated sales for the upcoming year (attach product brochures or other printed material describing products):

請告知過去五年及預估未來年度，外銷其餘地區（不包括美國/加拿大/歐洲/澳大利亞）的各項產品銷售額(若有產品目錄，請附上):

Products	2025 (USD) Est. Sales	2024	2023	2022	2021

(ii) Please indicate approximate sales splits by country 請根據不同國家提供估計銷售金額:

7. Does Applicant require insurance for all products listed above? 投保人是否需要為上述所有產品保險？	☐ Yes 是☐ No 否
If NO, please advise specific products requiring insurance 如否，請告知需要保險的產品:	
8. (a) Does Applicant enter into any hold harmless or other similar contractual agreement with any vendor(s)? 投保人是否與經銷商（們）訂立損害免責協定或類似契約協定？	☐ Yes 是☐ No 否
If YES, please provide details 如是，請詳細說明 ：	
(b) Does Applicant require any vendors to be added to the insurance as additional insureds? 投保人是否需要將任何經銷商被列為被保險人？	☐ Yes 是☐ No 否
If YES, please list vendor(s) and address(es) 如是，請列出經銷商（們）名稱和地址: (Please attach copy of relevant contracts 請附上相關的合同副件)	
9. (a) Do others manufacture or supply any of Applicant's products, or any part of Applicant's products? 投保人的產品或部件是否有其他人生產或提供？	☐ Yes 是☐ No 否
If YES, please provide details 如是，請詳細說明 ：	
(b) Does Applicant have a written contract with the manufacturers / supplier? 投保人是否和生產商/供應商訂有書面合同？	☐ Yes 是☐ No 否
If YES, does the contract contain a hold harmless agreement in Applicant's favour? 如果是，合同中是否有對投保人有利的免責條款？	☐ Yes 是☐ No 否
If YES, please attach copy of agreement and relevant contracts. 如果是，請提供免責條款的附件及相關的合同副件。	
(c)Does the supplier have its own product liability insurance? 投保人供應商是否有自己的產品責任保險？	☐ Yes 是☐ No 否
(i) What are the limits? 保單責任限額?	
(ii) Is Applicant named as an Additional Insured under that insurance? 投保人是否作為附加被保險人列明在保單中？	☐ Yes 是☐ No 否
(iii) Please provide a Certificate of Insurance evidencing the insurance that is in place. 請提供有效的保險憑證。	
10. List any product that has been discontinued or recalled in the last 5 years and give reasons: 請列明在過去 5 年中停止生產或被回收的產品名稱:	

11.	Have any new products been introduced in the last 3 years? 在過去 3 年中是否有新的產品推向市場？	
	In U.S.A./Canada 在美國/加拿大	☐ Yes 是☐ No 否
	In Europe / Australia 在歐洲/澳大利亞	☐ Yes 是☐ No 否
	Outside U.S.A./Canada/ Europe / Australia 除美國/加拿大/歐洲/澳大利亞之外的其他地方	☐ Yes 是☐ No 否
	If YES, list products and date of introduction 如果是，請列明產品和推出市場的時間:	

12.	Are any new products proposed for introduction during the coming year? 是否有新的產品準備在明年推向市場？	
	In U.S.A./Canada 在美國/加拿大	☐ Yes 是☐ No 否
	In Europe / Australia 在歐洲/澳大利亞	☐ Yes 是☐ No 否
	Outside U.S.A./Canada/ Europe / Australia 除美國/加拿大/歐洲/澳大利亞之外的其他地方	☐ Yes 是☐ No 否
	If YES, please list products 如果是，請列明產品:	

13.	(a) Are any products sold as components for other products? 投保人的產品有沒有被作為其他產品的零部件銷售？	☐ Yes 是☐ No 否
	If YES, please indicate end product and likely use 如果是，請列明終端產品和用途:	
	(b) Are any products sold as components for or use on or with any aircraft, missiles, spacecraft or watercraft? 投保人的產品有沒有被作為飛機，導彈，航天器或水面船隻產品的零部件銷售?	☐ Yes 是☐ No 否
	If YES, give details 如果是，請提供詳細情況:	

14.	Are all products designed by Applicant? 投保人是否設計所有的產品？	☐ Yes 是☐ No 否
	If NO, please state who designs the product 如果不是，請說明產品是由誰設計的:	

15.	Has Applicant at any time violated the U.S. Consumer Product Safety Act or any other Acts or laws relevant to its products? 投保人是否有違反美國"消費者產品安全法案"或其他與其產品相關的法律的紀錄	☐ Yes 是☐ No 否
	If YES, please list violations 如果是，請列明:	

16. What warnings, instruction manuals and labels are included with the products?
投保人的產品中包括哪些警示，使用說明或標貼？

17. (a) Who performs repair/warranty work on the products?
投保人的產品由誰進行維護/保質工作？

(b) What work do they perform?
其工作範圍是什麼？

18. (a) Does Applicant have a written products liability loss control program in effect? 投保人是否有書面的產品責任風險控制計畫？	☐ Yes 是☐ No 否
(b) Describe Applicant's quality assurance and quality control procedures? 請描述投保人的品質保證和質量控制程式？	
(c) Do Applicant's clients perform any QC work on the products? 投保人的客戶是否對產品實施 QC 工作？	☐ Yes 是☐ No 否
If YES, please describe 如果是，請說明:	
(d) Does Applicant have a written product recall plan ? 投保人是否有書面的產品回收計畫？	☐ Yes 是☐ No 否
(e) Is each product subject to and do they conform with applicable national safety standards? 每個產品是否都基於或符合有關的國家安全標準	☐ Yes 是☐ No 否
(f) Does an independent laboratory test your products? 投保人的產品是否由獨立的實驗室來測試？	☐ Yes 是☐ No 否
If YES, please describe the name of the lab and what test is being performed: 如果是，請說明實驗室的名稱和測試的內容:	
(g) Are the products UL listed? 產品是否有 UL 認證？	☐ Yes 是☐ No 否
(h) Do they have CE compliance if electrically powered? 如果是電器產品是否有 CE 認證？	☐ Yes 是☐ No 否

(i) Are records kept in relation to the products? 投保人是否保留與產品相關的資料？	☐ Yes 是☐ No 否

If YES, please describe 如果是，請列舉:

Note: Any printed material relative to question 18 must be submitted.
注：請提供任何與第 19 個問題相關的書面材料。

19. (a) Has any insurer cancelled or refused to renew Applicants products liability coverage? 是否有其他保險公司取消或拒絕續保投保人的產品責任險保單？	☐ Yes 是☐ No 否

If YES, please furnish details 如果是，請說明原因:

(b) Who is current insurer? 現在承保公司名稱？	
(c) What are the limits? 保單責任限額？	
(e) What are the premium rates? 保險費率？	

20. Is Applicant aware of any product which, because of known defects or inherent hazards, is likely to cause bodily injury or property damage?
投保人是否知曉道其產品由於已知的缺陷或內在品質問題，可能會引起的人身意外傷害或財產損失？

21. What are the typical product failures, returns or customer complaints?
請告知典型的產品故障，回收或消費者投訴情況？

22. Loss Experience 損失記錄:

(a) Valuation Date 估價日期:

(b) Total incurred losses last 5 years 過去 5 年的損失紀錄

Year		Countries	
20		U.S.A./Canada 美國/加拿大	
20		Europe/ Australia 歐洲/澳大利亞	
20		Rest of World 其餘國家	
20			
20			

(c) Describe all losses over $5,000 (paid or reserved) :
請描述所有超過 5000 美元的損失（已賠付或處理中）:

(d) Has Applicant acquired any new entities within the last 5 years? 投保人在過去 5 年中有沒有並購新的企業 ?	☐ Yes 是☐ No 否
(e) Does Applicant have a legal department? 投保人是否有法律部 ?	☐ Yes 是☐ No 否
(f) (i)Limit of liability desired (Each occurrence/aggregate): 要求投保的責任限額（每一次事故/累計）:	
(ii) Deductible desired 免賠額	
(iii) Form of the Coverage (Occurrence/Claim Made) 保單格式（事故發生制/索賠發生制）	
(g) Loss control 防損:	
(i) May we contact Applicant to gather further information? 我們是否可以聯繫投保人來獲得進一步的資訊?	☐ Yes 是☐ No 否
(ii) Person to contact 聯繫人 :	
Title 職務 :	
Telephone No. of contact 聯絡電話 :	

C. Commission Disclosure

I/We undersigned, declare that to the best of my/our knowledge and belief the statements set forth herein are true and correct, and agree that these statements shall form the basis of and be incorporated into any contract of insurance which may be conducted between the Proposer and Chubb Insurance Hong Kong Limited.

Disclosure Statement:

The following disclosure statement is only applicable in situations where an insurance broker is used to purchase/place a policy.

The applicant understands, acknowledges and agrees that, as a result of the applicant purchasing and taking up the policy to be issued by Chubb Insurance Hong Kong Limited (Chubb), Chubb will pay the authorized insurance broker commission during the continuance of the policy including renewals, for arranging the said policy. Where the applicant is a body corporate, the authorized person who signs on behalf of the applicant further confirms to Chubb that he or she is authorized to do so.

The applicant further understands that the above agreement is necessary for Chubb to proceed with the application.

以下公開聲明僅適用於透過保險經紀購買／遞交保單的情況下使用。

申請人明白、確知及同意，安達保險香港有限公司 (安達) 會就申請人購買及接受其簽發的保單，於保單有效期內 (包括續保期) 向負責安排有關保單的獲授權保險經紀支付佣金。假如申請人為法人團體，代表申請人簽署的獲授權人員須向安達確認他／她已獲該法人團體授權。

申請人亦明白安達必須取得申請人以上的同意，才可以處理其保險申請。

D. Signature

Applicant's Signature: Date (DD/MM/YY):	Applicant Name: Position:

About Chubb in Hong Kong

Chubb is the world's largest publicly traded property and casualty insurer. With both general and life insurance operations, Chubb has been present in Hong Kong for more than 90 years via acquisitions by its predecessor companies. Its general insurance operation in Hong Kong (Chubb Insurance Hong Kong Limited) is a niche and specialist general insurer. The company's product offerings include Property, Casualty, Marine, as well as Accident & Health programs for large corporates, midsized commercial and small business customers. Over the years, it has established strong client relationships by offering responsive service, developing innovative products and providing market leadership built on financial strength.

More information can be found at www.chubb.com/hk.

Contact Us

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