

Domestic Helper

We cover Your liability as an employer and also offer extra benefits.

PLAN A – We cover Your liability as an employer under the Employees' Compensation Ordinance for bodily injury or disease sustained by Your domestic helper arising out and in the course of his/her employment with You up to HK\$ 100,000,000 any on event.

PLAN B – Besides Your liability at law as an employer as in PLAN A, we also offer extra benefits as below :

COVER	LIMITS
Clinical Expenses	HK\$ 3,000 in aggregate subject to - HK\$ 150 per visit per day for medical treatment - HK\$ 100 per visit per day for treatment by bonesetter or physiotherapist and HK\$ 500 in all
Surgical & Hospitalization	HK\$ 30,000 in aggregate subject to - HK\$ 300 per day for Room and Board. - HK\$ 10,000 per Surgical Operation
Loss of Services Cash Allowance	HK\$ 6,000 subject to HK\$ 200 per day
Dental Expenses	HK\$ 1,500
Personal Accident Benefits	HK\$ 100,000
Repatriation Expenses	HK\$ 20,000
Re-hiring Expenses	HK\$ 5,000
Loan Protection	HK\$ 5,000
Fidelity Guarantee	HK\$ 10,000 including HK\$ 3,000 for unauthorized IDD Charges

Important Notice

This is a brief description of insurance coverage only. Please refer to the policy document for details of insurance conditions and exceptions.

NAVIGATOR
Insurance Brokers Ltd.

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中國太平洋家居保險投保書 CPIC HOME INSURANCE PROPOSAL FORM

請用英文正楷填寫 Please complete in English using capital letters
投保人姓名 (先生 / 女士) Name of Proposer (Mr. / Ms.)

職業 Occupation _____

聯絡電話 Tel No. (手提電話 Mobile) _____

(公司 Office) _____ (住宅 Home) _____

電郵地址 E-Mail Address _____

受保物業地點 Location of property to be insured _____

通訊地址 (如與上述地址不同) Mailing Address (if different from the above) _____

保險期限 Period of Insurance

由 From _____ 至 to _____
(DD / MM / YYYY) (DD / MM / YYYY)

請回答以下問題 Please answer the following question

受保樓宇樓齡是否超過30年? Is the Insured's Building age over 30 years?	<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No
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如「是」。該樓宇過住有否進行任何裝修工程，請詳述之
If 「Yes」。Have the building been renovated, Please give full details

基本保障 BASIC PROTECTION

家居財物 Home Contents

居所建築面積 (以平方呎計算) Gross floor area of your Home (In square feet)	每年保費 Annual Premium	
	投保額港幣 500,000元 Sum Insured HK\$ 500,000	投保額港幣 1,000,000元 Sum Insured HK\$ 1,000,000
500以下 Less than 500	<input type="checkbox"/> 港幣 HK\$ 580	<input type="checkbox"/> 港幣 HK\$ 900
501 - 700	<input type="checkbox"/> 港幣 HK\$ 800	<input type="checkbox"/> 港幣 HK\$ 1,200
701 - 1,000	<input type="checkbox"/> 港幣 HK\$ 1,000	<input type="checkbox"/> 港幣 HK\$ 1,500
1,001 - 1,500	<input type="checkbox"/> 港幣 HK\$ 1,300	<input type="checkbox"/> 港幣 HK\$ 1,800
1,501 - 2,000	<input type="checkbox"/> 港幣 HK\$ 1,500	<input type="checkbox"/> 港幣 HK\$ 2,500
2,000 以上 Over 2,000	另議 Please refer	另議 Please refer

(請在適當方格內劃上 ✓ 號 Please ✓ in the appropriate box)

我們亦可為您提供超過港幣 1,000,000元投保額的家居財物保險，唯須支付額外保費。請與我們聯絡，另行提出申請。

We also cover Your Home Contents in excess of HK\$ 1,000,000 subject to an additional premium. Please contact Us and apply separately

個人責任保險 Personal Liability

保障額港幣 7,500,000元
Limit of Liability HK\$ 7,500,000

保費全免
Premium free of charge

選擇保障 **OPTIONAL PROTECTION**

樓宇結構 Buildings

投保額港幣 Sum Insured HK\$ _____
(投保額必須相等於重建費用總額)
(Sum Insured must represent the full rebuilding value)

保險費率 Premium Rate 0.05% 保費港幣 Premium HK\$ _____

按揭銀行或抵押公司名稱 Name of Mortgagee: _____

業主責任保險 Owner Liability

保費額港幣 7,500,000 附加保費 Additional Premium _____
Limit of Liability HK\$7,500,000
HK\$98

私人財物 Personal Possessions

物品 Item	投保額 Sum Insured
非指定物品 Unspecified Items (每件物品價值不得超過港幣 5,000 元 或非指定物品投保額百分之二十五, 兩者以較低為準) (For any item which is less than HK\$ 5,000 in value or 25% of sum insured on unspecified items whichever is the less)	港幣 HK\$ _____
指定物品 Specified Items (每件 物品價值超過港幣 5,000 元) (Per any item, which is over HK\$ 5,000 in value)	港幣 HK\$ _____

請列出指定物品 (並附上收據或價格證明)
Please list the Specified Items (receipt or evidence of value is required):

物品
Items
投保額 (港幣)
Sum Insured (HK\$)

如空位不足,請另外用紙填寫,並隨附於本文件上。本公司保留就高價物品採用
不同保費率、條款及細則的權利。
Please attach a separate sheet if the space is insufficient. We reserve the right
to apply different rate, terms and conditions for high-value items.

私人財物總投保額
Total Sum Insured for Personal Possessions 港幣
HK\$ _____

保費率
Rate 1.5% 保費港幣
Premium HK\$ _____

家庭僱傭 Domestic Helper

	每名家庭僱傭的每年保費 Annual Premium Per Domestic Helper
<input type="checkbox"/> 計劃甲 Plan A	港幣 HK\$400.00
<input type="checkbox"/> 計劃乙 Plan B	港幣 HK\$700.00

家庭僱傭姓名 Name of Domestic Helper

性別 Sex _____ 國籍 Nationality _____

Date of Birth 出生日期 _____ d 日 _____ m 月 _____ yy 年

身份證 / 護照號碼 ID / Passport No. _____
(請在適當方格內劃上 號 Please in the appropriate box)

所有投保項目總保費
Total premium for all sections 港幣
HK\$ _____

付款方式 Payment Method

支票 By cheque 抬頭: 中國太平洋保險 (香港) 有限公司
Payable to: China Pacific Insurance Co., (HK) Ltd.

信用卡 By credit card: * VISA / MASTER

持卡人姓名 Name of Cardholder: _____

信用卡號碼 Card No.

到期日 (月 / 年) Expiry Date (mm / yyyy)

本人謹此授權中國太平洋保險 (香港) 有限公司, 在本人的 VISAMASTER* 信用卡
卡戶口中, 扣除港幣 _____ 元, 作為此投保書內的投保人購買家
居保險之費用。

I hereby authorize China Pacific Insurance Co.,(HK) Ltd. to debit my VISA /
MASTER* credit card account in the amount of HK\$ _____ for
the purpose of effecting Home Insurance for the proposer stated in this
proposal form.

* 刪去不適用者 * Delete as appropriate

持卡人簽署
Signature of Cardholder: _____

日期
Date: _____

保險記錄 Insurance History

- 您或與您長期同住的家人是否曾於申請家居保險時被拒絕
投保?
Have You or any of Your family members permanently
residing with You ever been refused Home Insurance?
 是 Yes
 否 No
- 在過去三年內,您或與您長期同住的家人,是否有過此保
險計劃列明的保費範圍內損失(不論有否獲得賠償)?
Have You or any of Your family members permanently
residing with You sustained any loss, whether insured or
otherwise, for any of the risk proposed to be covered by
this insurance during the last three years?
 是 Yes
 否 No

如您已選擇「家庭僱傭」保單項目,請回答以下問題:
Please answer the following question if You have chosen domestic Helper under
the optional protection:

3. 有否發現您的家庭僱傭可能因某些情況而需接受醫生治
療或手術?
Are You aware of any condition for which Your Domestic
Helper may require medical or surgical treatment?
 是 Yes
 否 No

如上述任何一題的答案為「是」,請註明詳情。
If the answer is Yes to any of the above, please give details.

聲明 Declaration

本人謹此聲明,根據本人所知及所信,上述所有資料均屬真實且為事實之全部,而
所有能影響該項申請評估的事實因素均已呈報。

I declare that the information given above is true and complete to the best of my
knowledge and believe that all the material facts affecting the assessment of this
application has been disclosed.

本人明白本投保書在中國太平洋保險 (香港) 有限公司接納後,保單始正式生效。本人亦
向意此投保書及聲明將作為本人與中國太平洋保險 (香港) 有限公司之間的合約基礎。

I understand that proposal will not become effective until it has been accepted by
China Pacific Insurance Co.,(HK) Ltd. and agree that this proposal and declaration
should be the basis of the contract between me and China Pacific Insurance Co.,(HK)
Ltd.

本人明白中國太平洋保險 (香港) 有限公司收集的所有有關本人個人資料是用作投保、索
償調查或數據研究或轉交其他人士或機構作核實或再保險之用。本人有權查核及
要求更改有關本人的資料。

I understand that all the personal information collected by China Pacific Insurance
Co.,(HK) Ltd. for the purpose of underwriting, claim investigation or statistical
research or being transferred to such person(s) or organization(s) for the purpose of
data verification or reinsurance. I have the right to obtain access to and to request
correction of my information.

投保人簽署
Signature of Proposer _____ 日期
Date: _____