

Accident Insurance Proposal Form 意外保險投保書

H999

Please complete this application form in **ENGLISH BLOCK LETTERS**. Tick "✓" the boxes as appropriate.
 請以英文正楷填寫此申請表。在適當的方格內"✓"。

Details of proposer 投保人資料			
Surname: 姓:		Given name: 名:	
Gender 性別: M 男 <input type="checkbox"/> F 女 <input type="checkbox"/>	Date of birth (DD/MM/YYYY): 出生日期 (日/月/年):		<input type="checkbox"/> HKID no. 香港身份證號碼: <input type="checkbox"/> Passport no. 護照號碼:
Email: 電郵:		Contact no.: 聯絡電話:	
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			<input type="checkbox"/> HK 香港 <input type="checkbox"/> KLN 九龍 <input type="checkbox"/> NT 新界
Period of insurance: 保障期:	Commence on 本保單由	(D) (日)	(月) (年) 起生效, 為期一年

Insured person(s) details and annual premium^ (HK\$) 受保人資料及全年保費^ (港幣/元)						
	Name 姓名	Gender 性別	Date of birth 出生日期 (DD/MM/YY) (日/月/年)	HKID no./ passport no. 香港身份證號碼/ 護照號碼	Occupation/Duties 職業/職務	Plan 計劃
Insured person 受保人						<input type="checkbox"/> A <input type="checkbox"/> B
Spouse 配偶						<input type="checkbox"/> A <input type="checkbox"/> B
Child/ Elderly 小童/ 長者						<input type="checkbox"/> Child 小童 <input type="checkbox"/> Elderly 長者
						<input type="checkbox"/> Child 小童 <input type="checkbox"/> Elderly 長者
						<input type="checkbox"/> Child 小童 <input type="checkbox"/> Elderly 長者
Total annual premium^ 全年保費總額^						

For the designation of beneficiary, please complete the "Beneficiary Form" and submit it to the company.
 如需指明受益人, 請填寫有關之「受益人表格」並遞交予本公司。

Payment instruction and authorisation 付款說明及授權書

I shall arrange premium and levy payment[^] with
本人將安排保費及保費徵費[^]

Payment mode ☐ Visa ☐ MasterCard 萬事達
付款方式

Credit card account number (Accept credit card in Hong Kong currency only) Expiry date
信用卡賬戶號 (只接受港幣信用卡) 有效日期至

□□□□-□□□□-□□□□-□□□□

□□ MM (月) □□ YY (年)

Issuing bank

發卡銀行

HKID no.

香港身份證號碼

Name of cardholder

持卡人姓名

□□-□□□□□□□□ ()

I hereby authorise MSIG Insurance (Hong Kong) Limited to charge the total amount of the policy to my credit card account for this insurance.
本人謹此授權三井住友海上火災保險(香港)有限公司從本人信用卡賬戶中扣除本保險的總費用。

Cardholder's signature

持卡人簽署

(Signature should correspond to the specimen signature of the above credit card account.)

簽署必須與上述信用卡戶口式樣相同。)

Date

日期 (DD日/MM月/YYYY年)

[^] Important note: Collection of levy on insurance premium - The Insurance Authority (IA) has announced the collection of levy on insurance premium under the "Insurance Ordinance" with effect from 1st January 2018. As a result, all premium amounts shown in this proposal form are subject to levy.

[^] 重要事項：收取保費徵費之新規定-保險業監管局(保監局)已於《保險業條例》中公佈有關收取保費徵費的新規定，並於2018年1月1日正式生效。因此，本投保書上所列明的保費金額將附加保費徵費。

Declaration 聲明

I and on behalf of each insured person (if any), herein declared that I/We:

- agree that MSIG Insurance (Hong Kong) Limited ("MSIG") reserves its right to reject my application, adjust the premium and amend the terms.
- understand that the policy is applicable only to the insured person(s) whose occupation falls under Class I/Clerical occupation or Class II/Non-manual work occupation.
- understand that the policy does not cover the insured person(s) at any time during the existence of the policy engaging in Occupation Class III/Slight Manual Work occupation (unless not involving the use of machinery or engine), Occupation Class IV/Manual Work occupation or any of the listed occupations under General Exceptions in the policy, and I/We am/are not engaging in any of such excluded occupations.
- warrant to inform MSIG in writing immediately in the event of any change in the employment, occupation, duties or pursuits of any insured person, or any other change which may increase the possibility of a claim under the policy and agreed MSIG reserves its right to adjust the premium as a result of any such changes.
- agree if the insured person's revised occupation falls within the excluded occupations listed under General Exceptions of the policy, then the cover for that insured person shall be cancelled as from the date of such change of occupation.
- do not have this Accident Insurance policy with MSIG currently.
- have never been declined for the application, refused renewal, required additional premium or imposed special terms and conditions of any life or accident insurance policies. (If not, please give full particulars in separate sheet.)
- have never been made a claim against any insurer in respect of any accidental bodily injury. (If not, please give full particulars in separate sheet.)
- am/are now in good health and not suffering from any physical impairment or physical disability or mental conditions. (If not, please give full particulars in separate sheet.)
- agree that in the event of the bodily injury results in death of the insured person(s), the benefits shall be paid to the estate of the insured person and understand I/We can submit the completed Beneficiary Form for the designation of Beneficiary.
- warrant that the information given is true and correct to the best of my/our knowledge.
- warrant that all information given in this proposal form are true and complete to the best of my knowledge and belief and have not withheld facts likely to influence assessment of this application.
- agree that this application, declaration and other information provided shall form the basis of the contract and agree to accept the terms, limitations, exclusions, conditions, clauses and warranties contained in the policy/policies and/or as modified or extended by any endorsements thereon.
- understand that the policy is only effective after my/our enrolment has been accepted by MSIG.

Declaration 聲明

本人並代表每名受保人（如適用）特此聲明，本人（等）：

- 同意三井住友海上火災保險（香港）有限公司（「三井住友保險」）保留其不受理本人（等）投保申請、調整保費及附加限制之權利。
- 明白本保單只適用於受保人所從事的職業屬於類別一/文職職業或類別二/非體力勞動職業。
- 明白本保單並不承保受保人在保單生效期間的任何時間，從事於職業類別三/輕微體力勞動職業（不需要操作機械之工作除外）、職業類別四/體力勞動職業、或於保單中一般不承保事項列出的任何一種職業及本人（等）非從事任何不承保的職業。
- 保證會在受保人的就業、職業、職責或職務變動，或獲悉其他可能提高保單索償風險的變化時立即以書面通知三井住友保險，並同意三井住友保險保留因上述變化而調整保費之權利。
- 同意如受保人所轉換的職業屬於保單一般不承保事項所列的不承保職業，此受保人的保險保障將於轉職當日取消。
- 現時並未持有三井住友保險的意外保險保障計劃。
- 在投保人壽或個人意外保單時從未被拒絕、不予再續保、加價或需附加特別條款。（如有，請另行詳述之。）
- 從未因任何意外身體受傷向保險公司申請賠償。（如有，請另行詳述之。）
- 現在身體健康，及並沒有任何身體傷殘或缺陷或精神不健全。（如有，請另行詳述之。）
- 同意倘若受保人因身體受傷而導到身亡，保障賠償將撥作受保人的遺產，並明白可透過提交已填妥之「受益人表格」來指定受益人。
- 保證所填報資料及對所載問題的回答，據本人（等）確信，均為正確無訛。
- 保證在本投保書內填報的資料，根據本人（等）確信，均為正確無訛並未隱瞞可能影響本投保申請評估的事實。
- 同意本投保書，聲明及所提供的其他資料作為合法基礎，並同意接受本保單所載及/或其任何修訂或擴充的條款、限制、不承保事項、條件、條文及保證。
- 明白申請書獲三井住友保險接納後，保單始正式生效

Declaration of broker commission (if applicable):

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

經紀佣金聲明（如適用）：

申請人明白、確知及同意，三井住友海上火災保險（香港）有限公司（「三井住友保險」）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三井住友保險確認他/她已獲該法人團體授權。申請人亦明白三井住友保險必須取得申請人以上的同意，才可以處理其保險申請。

Important note: Please refer to the Accident Insurance Policy (which will be issued to you upon acceptance of your proposal) for the applicable terms, conditions and exclusions.

注意事項：有關條款細則及不承保範圍，請參閱「意外保險」保單（於接納您的投保書後奉上）。

Appendix: Notice to customers relating to The Personal Data (Privacy) Ordinance ("the Ordinance")

MSIG Insurance (Hong Kong) Limited ("MSIG", "we" or "us") would ask that you take the time to read this privacy policy carefully. In case of discrepancies between the English and Chinese versions of this statement, the English version shall prevail.

Privacy Policy

MSIG takes your privacy very seriously. To ensure your personal information is secure, we communicate and enforce our privacy and security guidelines according to the relevant laws and regulations. MSIG takes precautions to safeguard your personal information against loss, theft, and misuse, as well as against unauthorised access, disclosure, alteration, and destruction. Furthermore, we will not sell your personal information to anyone without your consent. MSIG imposes very strict sanction control and only authorised staff on a need-to-know basis are given access to or will handle your personal data, and we provide regular training to our staff to keep them abreast of any new developments in privacy laws and regulations.

We will only retain your personal data in our business records for as long as it is necessary for business and tax purposes as permitted by the laws. We will require our agents, contractors or third parties who provides administrative or other services on our behalf to protect personal data they may receive in a manner consistent with this policy. We do not allow them to use such information for any other purposes. If you have any questions or inquiries regarding our Privacy Policy, please feel free to contact us.

We may amend this Privacy Policy at any time and for any reason. The updated version will be available by following the 'Privacy Policy' link on our website homepage at msig.com.hk. You should check the Privacy Policy regularly for changes.

Personal Information Collection Statement

Personal information is data that can be used to uniquely identify or contact a single person. As our customer, it is necessary from time to time for you to supply us with your personal data in relation to the general insurance services and products ("the Product") that we provide to you and in order for us to deliver and improve customer service. This includes but not limited to the personal data contained in the proposal form or in any documents in relation to the Product or any claim made under the Product.

If you do not provide us with your personal data, we may not be able to provide the Product you need or process your request.

We may use your personal data for:-

- processing and evaluating your insurance application and any variation or renewal of the Product;
- administration of the services and facilities in relation to the Product provided to you;
- conducting identity and/or credit checks;
- invoicing, processing payment instructions and collecting premiums and outstanding amounts from you;
- assessing and processing claims in relation to the Product;
- conducting statistical or actuarial research and/or analysis by us;
- automated decision-making processes, including profiling, for risk assessment and claims management;
- other ancillary purposes which are directly related to the above purposes;
- conducting matching procedures (as defined under the Ordinance);
- complying with applicable laws, regulations or any industry codes or guidelines; and
- detecting, investigating and preventing fraud and/or other illegal activity (whether or not relating to the Product issued in respect of this application).

In connection with any of the above purposes, the personal data that we have collected might be disclosed or transferred to the following persons and/or entities (who may be located within or outside of Hong Kong, or may process or store your personal data outside of Hong Kong):

- third party agents, contractors, service providers and advisors (including but not limited to debt collection agencies, credit reference bureaus or call centers) who provide administrative, communications, computer, data processing and storage, payment, security, information technology, marketing or other services which assist us to carry out the above purposes (including medical service providers, emergency assistance

- service providers, telemarketers, mailing houses, IT service providers and data processors);
- loss adjudicators, claims investigators and medical advisors;
- reinsurers and reinsurance brokers;
- your insurance intermediary;
- our legal and professional advisors;
- our related companies as defined in the Companies Ordinance;
- the Hong Kong Federation of Insurers (or any similar insurance industry association or federation);
- the Insurance Complaints Bureau and similar industry bodies; and
- government agencies and authorities as required or permitted by law;
- the police and fraud investigation or prevention organizations;
- databases or registers (and their operators) used by the insurance industry to analyse and check information provided against existing information; and
- in the event that we transfer all or a substantial part of our business to another company, the transferee of that business, who may then use your personal data to continue carrying out that business.

In order to confirm the accuracy of your personal data, you agree to provide us with authorisation to access and to verify any of your personal data with the information collected by any federation of insurance companies from the insurance industry.

MSIG also intends to use your name, your address, your phone number and email address from time to time to provide marketing materials and conduct direct marketing (including but not limited to promotion, marketing and sales) of the Product.

If you do not wish MSIG to use your personal data for direct marketing as listed above, you should tick the box on the right and send us a copy of this Notice at the address listed below together with the required information which are necessary for us to process your opt-out request. You may also notify us by filling in the "Enquiry form – Opt-out from direct marketing activities" on our website at msig.com.hk. In your notification, you must supply the same required information as listed below.

To enable us to process your opt-out request, please provide us below information and send to: The Data Protection Officer at 9/F, 1111 King's Road, Taikoo Shing, Hong Kong.	
Full name:	
Contact number:	
HKID number:	(for identification purpose)
Policy/Certificate/Acknowledgement number (if you have one):	
Note: This instruction will override all previous instructions relating to direct marketing that have been given to MSIG.	

Under the Ordinance, you have the right to: (a) be informed of the kind of personal data held by us; (b) be informed of the main purposes for which personal data held by us are or are to be used; (c) request access to your personal data held by us; (d) request correction of your personal data held by us; and (e) ascertain our policies and practices in relation to personal data. If you wish to exercise these rights, please write to our Data Protection Officer at 9/F, 1111 King's Road, Taikoo Shing, Hong Kong.

If you have any enquiries or require assistance with this Personal Information Collection Statement, please call us at +852 3122 6922.

Proposer's signature

Date (DD/MM/YYYY)

附錄：關於《個人資料（私隱）條例》（「條例」）的客戶通知

三井住友海上火災保險（香港）有限公司（下稱「MSIG」、「我們」或「本公司」）請您仔細閱讀下列條款與條件。如此聲明的英文版本與中文版本內容有歧異，將以英文版本為準。

私隱政策

MSIG極為重視您的私隱。為了保障您的個人資料，我們以有關法例及規例為準則，向公司內部傳達並執行我們定立之私隱及保障指引。MSIG採取切實可行的預防措施以保障您的個人資料免遭受遺失、盜竊、誤用，以及在未經許可之情況下被取用、洩露、更改及破壞。此外，除非得到您的同意，我們均不會出售您的個人資料給任何人。MSIG嚴格執行認可管制，只容許獲授權之職員在必需要的情況下，取用或處理您的個人資料。此外，我們會向職員定期提供培訓，確保他們知悉任何有關私隱法律及規例的新發展。

我們只會在法律容許並必需用於業務及稅務用途之情況下，保留您的個人資料作為我們的業務記錄。我們會向以本公司之名義提供行政或其他服務之代理、承辦商或第三者，要求他們遵循本政策保護有可能收到的個人資料。本公司不會容許他們使用有關資料於任何其他目的。如您對我們的私隱政策有任何疑問，歡迎聯絡我們查詢。

我們可能不時修改此範本。修改後的範本可於本公司網頁 msig.com.hk 下載。您應定期查閱此範本所修改的內容。

個人資料收集聲明

個人資料是可以用作獨立識別或聯絡個別人士之數據。貴為我們的客戶，您須向我們不時供給與我們提供之一般保險服務及保單產品（下稱「保單產品」）相關的個人資料，讓我們可向您提供客戶服務及改善服務質素。當中包括但不限於您在申請表填寫或任何與保單有關之文件上或任何透過保單索償上所載之個人資料。

如您未能向我們提供您的個人資料，我們可能無法提供您所需的產品或處理您的請求。

我們可能將您的個人資料用於以下用途：

- 處理和評估您的保險申請及任何 保單 產品的變更或續保；
- 管理與保單產品相關的服務和設施；
- 進行身份和/或信用審查；
- 發出賬單、處理付款指示及向您收取保費和未結清款項；
- 評估及處理與產品相關的索償；
- 進行統計或精算研究和/或分析；
- 風險評估和索償管理的自動化決策過程，包括分析；
- 與上述目的直接相關的其他輔助用途；
- 進行配對程序 或相關活動（如有關係例中所定義）；
- 遵守適用的法律、法規或任何行業守則或指引；及
- 偵測、調查和防止欺詐及/或其他非法活動（無論是否與本申請下所發出的保單產品有關）。

在以上任何目的下，我們收集的個人資料可能會被披露或轉移至以下人士和/或實體（他們可能位於香港境內或境外，或可能在香港境外處理或儲存您的個人資料）：

- 向我們提供行政、通訊、電腦、數據處理和儲存、支付、保安、資訊科技、營銷或其他協助我們實現上述目的的服務的第三方代理、承包商、服務供應商及顧問（包括但不限於追討欠款機構、信用調查局或呼叫中心，以及醫療服務供應商、緊急救援服務供應商、電話促銷商、郵寄及印刷服務商、資訊科技服務供應商及數據處理服務商）；
- 處理索賠個案的理賠師、理賠調查員及醫療顧問；

- 再保險公司及再保險經紀；
- 您的保險中介人；
- 我們的法律及專業顧問；
- 我們的關連公司（以《公司條例》內的定義為準）；
- 香港保險業聯會（或同類的保險行業協會或聯會）；
- 保險投訴局及同類的保險業機構；
- 法例要求或許可的政府機關；
- 警方及防止或調查欺詐的組織；
- 保險業就現有資料而對所提供的資料作出分析和檢查的數據庫或登記冊（及其運營者）；及
- 在我們將全部或大部分業務轉讓給其他公司時，該業務的受讓人可繼續使用您的個人資料來執行該業務。

為了確保您的個人資料之準確性，您同意授權本公司查閱並核實任何由保險業界內保險公司聯會所收集有關您的個人資料。

MSIG亦擬不時使用您的姓名、地址、電話號碼及電郵地址提供產品的市場推廣及直接促銷（包括但不限於推廣、營銷及銷售）。

如您不欲MSIG將您的個人資料用作直接促銷用途，您應於右列方格加上剔號並將此通告之副本連同您要求拒絕直接促銷活動所必須提供的資料（詳情如下）郵寄至下列地址。您亦可填妥本公司網頁 msig.com.hk 的「查詢表格—拒絕直銷活動」通知我們。在您的通知中，您必須於提供以下列出的相同所需資料。



為讓我們能夠處理您以上提出的拒絕直接促銷活動之請求，請提供以下資料並寄至：香港太古城英皇道1111號9樓，資料保護主任收。
姓名：
聯絡電話：
香港身份證號碼： （作識別之用）
保單號碼/證書編號/確認編號（如適用）：
附註：此拒絕直接促銷活動要求將會取代您先前給予MSIG一切關於直接促銷的指示。

根據條例，您有權：(a) 知悉我們所持有的個人資料種類；(b) 知悉我們所持有的個人資料的主要用途；(c) 查閱我們所持有的您的個人資料；(d) 更正我們所持有的您的個人資料；及 (e) 查詢我們有關個人資料的政策和實務。如您希望行使這些權利，請致函香港太古城英皇道1111號9樓，我們的資料保護主任收。

如您對此個人資料收集聲明有任何疑問或須協助，請致電 +852 3122 6922 與我們聯絡。

投保人簽署

日期 _____ (日/月/年)