

Shop Insurance Proposal Form 店舖綜合保障計劃投保書

(For Macau only 只適用於澳門)

M709

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			
Name of company/business entity: 公司/機構名稱：		Description of business : 業務性質：	
Name of contact person : Surname: 聯絡人姓名： 姓：		Given name: 名：	
Gender: 性別： M 男 <input type="checkbox"/> F 女 <input type="checkbox"/>	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"/> Macau 澳門 <input type="checkbox"/> Taipa 氹仔 <input type="checkbox"/> Coloane 路環			
Address of insured premises (If different from the above) 投保樓宇地址（如與上述不同）： 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"/> Macau 澳門 <input type="checkbox"/> Taipa 氹仔 <input type="checkbox"/> Coloane 路環			
How long have you been established at these premises 閣下佔用該樓宇 years 年			
Period of insurance: (Please note that the cover is not in force until the application has been accepted by the company) 保障期：（請注意，保險必須待至本公司接受申請後方始生效）			
Commence on 本保單由	(D) (日)	(M) (月)	(Y) for one year (年) 起生效，為期一年

Standard cover 標準保障

Comprising: Contents and Stock, Business Interruption, Money and Public Liability insurance.

包括：店舖內設備及存貨、業務干擾、金錢損失保險及公眾責任。

Contents and stock 店舖內設備及存貨

1. What is the replacement cost as new of your shop contents?

貴店內所有設備之全新更換價值為：

HK\$港幣 _____ 元

2. What is the actual replacement cost of stock?

存貨實際更換價值：

HK\$港幣 _____ 元

Please list below any machine, computer or item of equipment included in the sum insured above where the value exceeds HK\$150,000:

請列出投保金額內任何價值逾港幣150,000元之機器、電腦或器材：

Description 說明	Value (HK\$) 價值（港幣/元）
1.	
2.	
3.	
4.	
5.	

Optional extensions 自選額外保障

Stock in transit 貨物運輸

Do you wish to extend your cover to more than HK\$50,000? If 'yes', please advise maximum value of any one consignment:

☐ Yes 是 ☐ No 否

您是否擬擴大保障至逾港幣50,000元？如「是」，請註明任何一次托運最高之貨物總值：

• 1st free cover 免費保障 HK\$港幣50,000 元

• Balance 額外保障 HK\$港幣 _____ 元

• Total value 總投保額 HK\$港幣 _____ 元

Loss of gross profit 毛利損失

Do you require cover for loss of Gross Profit? If 'yes', please state:

☐ Yes 是 ☐ No 否

您是否擬保障毛利損失？如「是」，請註明：

1. Your estimated gross profit for the next 12 months 您估計未來12個月可得之毛利： HK\$港幣 _____ 元

2. Maximum indemnity period required 所需最長補償期間： ☐ 12 ☐ 18 ☐ 24 Months 個月

3. Sum insured required 所需投保金額： HK\$港幣 _____ 元

Note: If your maximum indemnity period is more than 12 months, your gross profit figure should be proportionately increased, e.g. 18 months indemnity will equal at least 1.5 times the annual gross profit.

註：您的最長補償期間如超過12個月，毛利額應按比例增加，例如18個月之投保額最少應為每年毛利額的1.5倍。

Personal accident 人身意外

Do you wish to arrange Personal Accident Insurance? If 'yes', please complete the following:
您是否選擇安排個人意外保險？如「是」，請填妥以下資料：

☐ Yes 是 ☐ No 否

Persons to be insured 受保人	Duties 職責	Date of birth 出生日期	No. of units required 所需賠償單位數量

Is each person to be insured, to your best knowledge and belief, in good health and free from physical and mental defect?

☐ Yes 是 ☐ No 否

根據您所知及相信，是否每位受保人均健康良好，並無任何生理或心理缺陷？

If 'no', please give details 如「否」，請詳述：

Glass 玻璃

Do you wish to insure against accidental breakage of glass? If 'yes', please give details:
您是否需要保障玻璃意外破損？如「是」，請註明：

☐ Yes 是 ☐ No 否

1. Description of glass 玻璃類型：_____

2. Replacement cost 更換價值：HK\$港幣 _____ 元

Commercial package bundle 商業綜合保險組合

I would like to purchase the following product 本人欲投保以下產品：

☐ Employees' compensation
僱員賠償

Employees' compensation 僱員賠償

If you wish to arrange Employees' Compensation Insurance, please provide the following information.
如您選擇安排僱員賠償保險，請提供以下資料。

Employer's Details 僱主資料

Name of employer in full 僱主全名 (if different from Name of Proposer above 如與上述投保人姓名不同)

Business registration no. 商業登記證號碼：
(Please provide a copy of valid business registration document 請提供有效之商業登記文件之副本)

Place of employment 僱用工作地點 (if different from correspondence address above 如與上述通訊地址不同)
Flat/Room 室 Floor 樓 Block 座

Building/Estate
大廈/屋苑

Street/Road & district area
街道及地區

☐ Macau 澳門 ☐ Taipa 氹仔 ☐ Coloane 路環

Details of employer's business activities/profession 僱主之業務/行業資料

1. Please provide a general description of the employer's business activities/profession.
請詳細說明僱主之業務活動/職業。

2. How long has the business been established 業務成立年期? _____ Year(s) 年

3. Does any of the work carry out by the employers involve:
僱主所從事的工作是否涉及：

a) any work on ships, chemical works, off-shore structures, oil or gas refineries?
任何於船舶、化學廠、離岸建築物、石油或天然氣精煉廠進行的工作?
If 'yes', please give nature of work and no. of employee(s) involved.
如「是」，請說明有關工作性質和所涉及的員工人數。

☐ Yes 是 ☐ No 否

b) any work outside Macau?
任何在澳門以外的地方工作?
If 'yes', please give nature of work and no. of employee(s) involved.
如「是」，請說明有關工作性質和所涉及的員工人數。

☐ Yes 是 ☐ No 否

c) work at a height above 10 metres or underground?
在高度10米以上或於地底進行的工作?
If 'yes', please give nature of work and no. of employee(s) involved.
如「是」，請說明有關工作性質和所涉及的員工人數。

☐ Yes 是 ☐ No 否

d) use, handle, store or transport any hazardous substances such as toxic chemicals, explosive substances, gases, asbestos, radioactive substance
使用、處理、貯存或運送任何危險物質，如有毒化學品、爆炸性物質、氣體、石棉、放射性物質?
If 'yes', please give nature of work and no. of employee(s) involved.
如「是」，請說明有關工作性質和所涉及的員工人數。

☐ Yes 是 ☐ No 否

4. Does the employer 僱主是否有

a) hire any self-employed persons for their business?
為其業務聘用任何自僱人士?

☐ Yes 是 ☐ No 否

b) hire any contractor for their business?
為其業務聘用任何承判商?

☐ Yes 是 ☐ No 否

c) hire any part-time employees?
聘用任何兼職員工?

☐ Yes 是 ☐ No 否

d) plan to increase the no. of the employees substantially or add different occupations in a short period of time?
計劃在短時間內大幅增聘員工或增設不同職務?

☐ Yes 是 ☐ No 否

Employee's details 僱員資料

Occupation of employee(s) by categories 僱員職務類別	Number of employees 僱員人數	Estimated total annual earnings* 估計全年總收入*	For office use only 只供內部使用			
			Classification no.	Warranty	Rate percent	Premium
Occupation of employee(s) by categories 僱員職務類別	Number of part time employees 兼職僱員人數	Estimated total annual earnings* 估計全年總收入*				
Total 總計：						

* "Earnings" shall include:

1. any salary and wages paid in cash to the employee by the employer;
2. the value of any food, fuel or quarters supplied to the employee by the employer if as a result of an accident or occupational disease the employee is deprived of such food, fuel or quarters, but the amount of privilege or benefit cannot exceed 50% of the wages;
3. any overtime payments or other special remuneration for work done, whether by way of bonus, allowance or otherwise;
4. tips, if the employment be of such a nature that the habitual receiving thereof is open and customary and is recognised by the employer.

"Earnings" shall not include:

1. remuneration for intermittent overtime;
2. casual payments of a non-recurrent nature;
3. the value of a traveling allowance;
4. the value of a traveling quarters;
5. contribution paid by the employer of an employee towards any pension or provident fund;
6. sum paid to an employee to cover any special expenses incurred by him by the nature of his employment.

*「收入」應包括：

1. 現金支付給僱員的任何薪金及工資；
2. 僱主提供給僱員的膳食、燃料或住宿之價值，而該等優惠或福利可能因僱員遭受意外或職業疾病而被剝奪的，但其價值決不能超過該僱員之實際工資的百分之五十；
3. 超時「加班」或其他特別的報酬包括花紅、津貼或其他形式之報酬；
4. 在何公開的、習慣性的及被僱主認可之經常收取到之工作小帳。

「收入」不包括：

1. 間歇性加班的報酬；
2. 非經常性的偶然報；
3. 旅遊津貼；
4. 旅遊住宿費；
5. 僱主為僱員的任何退休計劃或其他準備金作出之供款；
6. 因工作性質而付予僱員作為特別費用之金額。

Extension cover required 附加保障

Please tick the appropriate box 請選擇適當空格

1. Risk during travel to work

上下班往返途中的保障

☐ Yes 是 ☐ No 否

2. To and from during typhoon no.8 or above extension

懸掛8號或以上颱風期間上下班的保障

☐ Yes 是 ☐ No 否

Declaration 聲明

I/We, the undersigned, desire to effect an insurance as above stated in terms of the Policy to be issued by the Company. I/We agree to keep a proper Wages Record and to render at the end of each period of insurance a statement in the form required by the Company of all Wages actually paid and to pay premium on any wages paid in excess of the amount estimated above. I/We hereby declare that all the above statements and particulars which I/We have read over and checked are true, that I/We have not suppressed, misrepresented or mis-stated any material fact that I/We have fairly estimated my/our total wages and salaries expenditure and I/We agree that this declaration shall be the basis of the contract between me/us and the Company.

本人（等）下列具名人願向三井住友海上火災保險（香港）有限公司（「MSIG」）依據上述之保險條款投保，本人（等）同意設一正確之薪金及工資記錄表冊並於保險期屆時遵照MSIG所需之表格式並報實際支出之薪金及工資並繳付超過以上所估計之薪金及工資數額之保險費用。本人（等）茲聲明本人（等）已閱讀及審核上列之一切表格及細則均屬正確，本人（等）並無隱藏，虛報或歪曲任何事實，本人（等）所估計之薪金及工資乃是公平者，本人（等）同意本項聲明是作為本人（等）與MSIG訂立契約之基礎。

Authorized Signature (with company chop)
獲授權簽署（連公司圖章）

Name 姓名： _____

Position 職位： _____

Date 日期： _____ (DD日/MM月/YYYY年) _____

Insurance information 投保資料

Have you or any principals in the business :

您或貴公司主要成員曾否：

1. Ever been refused insurance, renewal, increased premium rate or had any special terms or conditions by any insurer? ☐ Yes 是 ☐ No 否

被拒絕投保、續保、被任何保險公司提高保費率附加任何特別條款或條件？

If 'yes', please give details 如「是」，請提供詳情：

2. Ever been convicted of or is any prosecution pending for any offence involving dishonesty of any kind (e.g. involving fire, fraud, theft etc)? ☐ Yes 是 ☐ No 否

曾被判罪名成立或正等待由任何不誠實行為所引致的起訴之審判（例如涉及火警、詐騙、盜竊等）？

If 'yes', please give details 如「是」，請提供詳情：

3. Have an interest which has been declared bankrupt, been the subject of bankruptcy proceedings or made any arrangement with creditors? ☐ Yes 是 ☐ No 否

擁有任何曾宣佈破產、正進行破產程序或與債權人協議任何安排的權益？

If 'yes', please give details 如「是」，請提供詳情：

4. Are you insured at present or have you ever proposed for insurance which provides similar coverage? ☐ Yes 是 ☐ No 否

您現時是否已投保或曾否申請投保提供類似保障之保險？

If 'yes', please give details 如「是」，請提供詳情：

Please answer question 5 for Employees' Compensation application.

如申請投保僱員賠償，請作答問題5。

5. Is the employer's at present insured, or has the employer ever proposed for an insurance in respect of employer's liability to its employees? ☐ Yes 是 ☐ No 否

僱主目前是否已投保或曾投保對僱員之責任保險？

If 'yes', please state the name of insurance company.

如「是」，請列出保險公司名稱。

Claims and related details 索償及相關資料

(Please note items 2&3 only applicable to Employees' Compensation section. 請注意項目2及3只適用於僱員補償部分。)

1. During the last three years, have you or any principal in the business sustained any loss, whether insured or otherwise, in connection with any of the covers for which Insurance has been requested? ☐ Yes 是 ☐ No 否
過去3年，您或貴公司主要成員曾否蒙受任何與現申請投保之保障有關之損失（不論已投保與否）？
If 'yes', please give details. For Employees' Compensation specific, please complete items 2&3 below.
如「是」，請詳述，並填寫以下項目2&3有關僱員賠償部分）

2. Please provide the claim history for the past 3 years 請提供過去三年之索償記錄：
(Note: Employer shall make request on the previous insurers for providing written evidence of such records.)
(註：僱主需向曾投保的保險公司索取書面形式的索償記錄。)

Year of accident 意外發生年份	Paid claim(s) (including partial claim payment) 已支付索償 (包括部分索償償付)		Outstanding claim(s) 未支付索償		Total of the year 全年總計	
	No. of case 賠案數目	Amount (HK\$) 金額（港幣）	No. of case 賠案數目	Amount (HK\$) 金額（港幣）	No. of case 賠案數目	Amount (HK\$) 金額（港幣）

3. Details of any claim with amount over HK\$50,000. 任何索償金額超過港幣50,000元的個案詳情。

Year of accident 意外發生年份	Brief details of each accident (including cause of loss, degree of injury, current status, etc.) 概述每宗意外的經過 (包括受傷原因、受傷程度、現況等等)	Claim amount (HK\$) 索償金額（港幣）		
		Paid 已支付	Outstanding 未支付	Variation date 修訂日期

Declaration 聲明

I/We, the undersigned, desire to effect the insurance specified herein and declared that I/We:

- agree that MSIG Insurance (Hong Kong) Limited reserves its right to reject my application.
- warrant that the information given and answers to questions herein are true and correct to the best of my/our knowledge.
- 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.

本人（等）（下列簽署人）特此聲明：

- 同意三井住友海上火災保險（香港）有限公司保留其不受理本人投保的權利。
- 保證所填報資料及對所載問題的回答，據本人確信，均為正確無訛。
- 並未隱瞞可能影響本投保書評估的事實。
- 同意本投保書、聲明及所提供的其他資料作為合約基礎，並同意接受本保單所載及/或其任何修訂。
- 修訂或擴充的條款、限制、不承保事項、條件、條文及保證。

Disclosure: Any facts known to you which are likely to affect acceptance or assessment of the risks proposed for insurance must be disclosed. Should you have any doubt about what you should disclose, please do not hesitate to tell us or your broker/insurance adviser. We recommend you keeping a record (including copies of letters) for your future reference, of any additional information given. Making sure we are informed is for your own protection, as failure to disclose may mean that your policy will not provide you with the cover you require, or perhaps may invalidate the policy altogether.

資料提供：投保人必須提供可能影響本公司接受或評估與本保險計劃的風險有關之所有事實。閣下倘對應提供甚麼資料存疑，請諮詢本公司或閣下的保險經紀/保險顧問。本公司建議閣下記存所有提供予本公司的額外資料之記錄（包括函件副本），以作參考。為保障閣下，請確保向本公司提供所有有關資料，否則本公司將無法為閣下提供所需保障，或甚至可能導致保單失效。

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

注意事項：有關係款細則及不承保範圍，請參閱「店舖綜合保險計劃」保單（於接納您的投保書後奉上）。

Appendix: Notice to customers relating to Law no. 8/2005 Personal Data Protection Act ("the Act")

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 or similar activities as defined under the relevant laws in Macau;
- 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 Macau, or may process or store your personal data outside of Macau):

- 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 that are part of our corporate group, including, without limitation, any parent company, subsidiary, affiliate, or any other entity under common ownership or control, as defined under the related laws in Macau;
- Macau Insurers' Association (or any similar insurance industry association or federation);
- 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 Avenida Da Praia Grande No. 693, Edif Tai Wah 13 Andar A&B, Macau.

Full name:

Contact number:

Macau ID 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 Act, 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 Avenida Da Praia Grande No. 693, Edif Tai Wah 13 Andar A&B, Macau.

If you have any enquiries or require assistance with this Personal Information Collection Statement, please call us at +853 2892 3329.

Authorised Signature (with Company Chop)

Name and position

Date _____ (DD/MM/YYYY)

附錄：關於第8/2005號法律《個人資料保護法》（「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（他們可能位於澳門境內或境外，或可能在澳門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；
- 我們企業集團內的相關公司，包括但不限於任何母公司、子公司、附屬公司或在澳門相關法律下被定義為共同所有或控制的任何其他實體；
- 澳門保險公會（或同類的保險行業協會或聯會）；
- 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：澳門南灣大馬路693號大華大廈13樓A-B座，資料保護主任收。
姓名：
聯絡電話：
澳門身份證號碼： （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及其主要用途；(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，請致函澳門南灣大馬路693號大華大廈13樓A-B座，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+853 2892 3329與我們聯絡。

投保人簽署 (連公司蓋章)

姓名及職位

日期 (日/月/年)