



亞洲保險有限公司

ASIA INSURANCE

A Member of Asia Financial Group

投保書

PROPOSAL



Sun Flower Insurance Brokers Limited
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汽車保險
Motor Vehicle Insurance

請以英文正楷填寫，並在適當的空格內填上 0 號 Please complete the form in block capitals and tick 0 the appropriate boxes

投保項目 OPERATIVE INSURANCE COVER REQUIRED		第三者責任保險 Third Party Legal Liabilities 綜合保險 Comprehensive	
擬否附加保障至“中國廣東省”境內(只限投保車輛之損毀或損失)? Is insurance cover (damage to the Motor Vehicle only) required for driving in Guangdong Province?		是 Yes	否 No
投保期間 Period of Insurance	由 From		至 To

投保人資料 PARTICULARS OF PROPOSER			
投保人姓名 Full Name of the Proposer		Surname 姓 Given Name 名 Mr 先生 Ms 女士	
投保人服務行業 Proposer's Business		職位 Position	
住址 Home Address			
		住宅電話 Home Tel.	
辦公地址 Business Address			
		日間聯絡電話 Daytime Tel.	
如屬分期付款, 請註明貸款公司名稱 Hire Purchase Owner (if any)			

汽車投保之資料 PARTICULARS OF MOTOR VEHICLE TO BE INSURED					
車輛登記號碼 Registration Mark	車輛製造商/型號 Vehicle Make/Model	車身類型 Type of Body	製造年份 Year of Manufacture	座位乘客限額(司機除外) Seating Capacity (excl. Driver)	汽缸容量 (c.c.) Cylinder Capacity (c.c.)
車輛總重 Gross Vehicle Weight	車身底盤號碼 Chassis Number	引擎號碼 Engine Number	投保汽車通常停泊處 Usual parking places of the Motor Vehicle		
變速系統(波箱) Type of Transmission			車門數量 No. of Door		
自動(自動波) 手動(棍波) 兼具自動及手動性能(半自動波) Automatic Manuel Automatic & Manuel			雙門 三門揭背 四門 五門揭背 六門		
汽車連配件之現時估價 (綜合保險之投保額) Estimated Value of the Motor Vehicle including Accessories (Sum Insured)					
請列明任何超過五千元之非原廠安裝配件 Please declare non factory-fitted accessories with value over HKD5,000			防盜系統 (型號 / 價格) Anti-Theft Alarm System (Model / Value)		

經常駕駛投保汽車人士之資料 PARTICULARS OF DRIVERS WHO WILL REGULARLY DRIVE THE MOTOR VEHICLE					
駕駛人姓名 Full Name of Driver	是否提名為保單 指定駕駛人 Nominated as Named Driver?	年齡 Age	與投保人關係 Relationship with proposer	職業 Occupation	持續駕駛年資 Number of years has Driver been regularly driving
投保人 Proposer	是 否 Yes No			同上 as above	
	是 否 Yes No				
	是 否 Yes No				

投保汽車之用途 USE OF THE MOTOR VEHICLE	
私家用途 For social domestic and pleasure purposes 商業用途 For business professional use or for use by employees	經營車行用途 In connection with the Motor Trade 租賃或收費載客 For hire or reward

請從下列問題選出正確答案 PLEASE ANSWER ALL THE FOLLOWING QUESTIONS		
(1)	上述投保之汽車曾否經過任何改裝或裝置非原裝標準機件? Has the Motor Vehicle been modified in any way from manufacturers' standard specification?	是 否 Yes No
(2)	在過往三年內，閣下或任何有可能駕駛此汽車人士曾否涉及交通意外? Have you or any person who to your knowledge may drive the Motor Vehicle been involved in any traffic accident during the last 3 years?	是 否 Yes No
(3)	在過往三年內，閣下或任何有可能駕駛此汽車人士曾否被判超速駕駛、不小心駕駛、危險駕駛、或在酒精影響下駕駛? Have you or any person who to your knowledge may drive the Motor Vehicle been convicted of any of the following driving offences during the last 3 years : speeding, careless driving, dangerous driving, or driving whilst under the influence of alcohol?	是 否 Yes No
(4)	在汽車保險方面，閣下或任何有可能駕駛此汽車人士，曾否被任何保險公司拒絕受保、拒絕續保、取消未到期之保險、或附加特別之強制條款於保單內? In respect of Motor Insurance, have you or has any person who to your knowledge may drive the Motor Vehicle been declined such application, or been refused renewal, or been terminated such insurance, or been imposed special terms on your/his/her policy by any insurance company?	是 否 Yes No
(5)	閣下或任何有可能駕駛此汽車人士，有否視覺不靈或任何身體部份殘缺或神智不正常? Do you or does any person who to your knowledge may drive the Motor Vehicle suffer from defective vision or hearing or from any physical or mental infirmity?	是 否 Yes No
以上第 (1) 至 (5) 項問題中，若有答案“是”者，請詳加說明 If the answer to any of the above questions (1) to (5) is “yes”, please give details		

現正享有“無賠款記錄折扣”(NCD)之汽車保險資料 – 請出示證明文件 DETAILS OF PRESENT MOTOR INSURANCE “NO CLAIM DISCOUNT” (NCD) – Please supply documentary evidence				
車輛登記號碼 Registration Mark of Motor Vehicle	NCD 折扣 NCD (%)	保險公司名稱 Name of Insurer	有效保單編號 Present Policy Number	是否將 NCD 折扣轉移到此投保汽車? Transfer the NCD to the Motor Vehicle proposed here?
				是 否 Yes No

聲明 DECLARATION

本人/本公司擬向亞洲保險有限公司「亞洲保險」投保上述汽車並謹此聲明如下：

I/We desire to insure with Asia Insurance Company Limited (“the Company”) in respect of the Motor Vehicle as detailed herein and hereby declare that :

- 投保汽車性能良好;
the Motor Vehicle is in good condition;
- 投保汽車將不會給予非持有有效駕駛執照或已被吊銷駕駛執照之人士駕駛;
the Motor Vehicle will not be driven by any person who to my/our knowledge does not hold a full valid driving licence or has been disqualified from holding such driving licence;
- 此投保書內所述各項資料全屬無誤，本人/本公司並無隱瞞事實或虛構;
the particulars given in this Proposal Form are true and nothing materially affecting the insurance risk has been concealed by me/us;
- 此投保書內所述各項資料或答題如非投保人親筆作答，填寫此表格者只視為本人/本公司之代理人論，其內容皆屬本人授意代答;
if any particulars or answers in this Proposal Form are not in my/our hand-writing, the person or persons filling in such particulars and answers shall be deemed to be my/our agent for that purposes;
- 本人/本公司同意此投保書及聲明將作為本人/本公司與亞洲保險訂立契約之根據;
I/We hereby agree that this Proposal and Declaration shall be incorporated in and taken as the basis of the proposed contract between me/us and the Company; and
- 本人/本公司同意接受亞洲保險所發給慣用之汽車保險單。
I/We agree to accept a policy in the Company's usual insurance policy form for this class of insurance.

投保人簽署 Proposer's Signature

日期 Date

特許代理 Authorized Agent

- 重要提示 : IMPORTANT NOTICES**
- 投保人填寫此投保書時，務必如實作答，並告知亞洲保險所有和投保風險有關的重要資料。任何虛報或隱瞞事實，會導致保單失效。對資料應否透露若有任何疑問，請即查詢本公司或閣下的保險代理/經紀。
Failure to supply true answers to this Proposal Form or inform the Company of all material information about your insurance proposal may render the insurance policy invalid. If you have any doubt about what you should disclose, do not hesitate to check with the Company or your insurance agent/broker.
 - 投保人請出示投保車輛登記證明。
Please attach copy of valid Vehicle Registration Document of the Motor Vehicle.
 - 未經填妥之投保書會延誤閣下之申請。
Incompletion of Proposal Form will delay your application.
 - 投保須經批核，方可生效。
The Motor Insurance will not be effective unless the Proposal has been formally accepted by the Company.
 - 本公司有權運用、保存或透露閣下之個人資料予任何人仕或機構，用以審核此申請，或提供有關服務。若需查閱或更正個人資料，請聯絡本公司的資料保護主任。
Any personal information collected by the Company may be used, stored or disclosed to any individual or organization to evaluate this application, or provide subsequent services. Requests for personal data access or correction may be addressed to Data Protection Officer of the Company.