

# Driver information update/ Motor insurance upgrade form 司機資料更改 / 汽車保險提升表格

For internal use only  
只供內部使用

Agent name  
代理人姓名： \_\_\_\_\_

Agent no.  
代理人編號： \_\_\_\_\_

Enquiry no. 查詢電話： +852 2903 9391

Please ✓ the appropriate box and \* delete where inappropriate. 請 ✓ 適用方格及於\*號刪去不適用者

Please use block letter if you fill in the form in English. 如用英文填寫資料，請使用正楷書寫。

Driver information update (Please fill in section1) 司機資料更改 (請填寫第一部分)

Motor insurance upgrade (Please fill in section 2) 汽車保障提升 (請填寫第二部分)

## 1. Driver information update 司機資料更改

Policy no.  
保單號碼

Effective date  
生效日期

Name of insured  
受保人姓名

	Driver 1 司機一	Driver 2 司機二	Driver 3 司機三	Driver 4 司機四	Driver 5 司機五
Full name of driver 司機全名					
HKID card/Passport no.* 香港身份證 / 護照號碼*					
Occupation 職業 (Full/Part-time 全職或兼職)					
Date of birth 出生日期 ( dd日 / mm月 / yy年 )					
Gender 性別	Male男 / Female女*	Male男 / Female女*	Male男 / Female女*	Male男 / Female女*	Male男 / Female女*
Relationship with applicant 與投保人關係					
Total no. of years driving (Hong Kong and elsewhere) 駕駛年數 ( 香港及外地 )	Years 年	Years 年	Years 年	Years 年	Years 年

## 1. Driver information update (continued) 司機資料更改 (續)

- Yes 是 No 否
1. Have you ever been refused any motor insurance renewal or cancelled the motor insurance in mid-term by an insurer?  
您 / 您們是否曾經被保險公司拒絕汽車保險續期或被取消汽車保險?
2. Have you ever suffered from defective vision (except wearing corrective lenses) or hearing, or any mental infirmity?  
您 / 您們是否曾患有視覺 (戴適當眼鏡除外)、聽覺或任何精神上的疾病?
3. How many driving offence points have you incurred or has your license been suspended in the last two years (offence points before taking the Driving Improvement Scheme)?  
您 / 您們是否在過往兩年內被記「違例駕駛記分」或被吊銷駕駛執照 (在接受駕駛改進計劃前之分數)?  
 0 points 分  1 – 7 points 分  8 – 10 points 分  More than 10 points 10 分以上  
 Suspended or Disqualified license 被停牌或被取消駕駛資格
4. How many motor car non-windscreen claims reported in the last three years?  
過往三年內曾提出多少次非擋風玻璃的私家車保險索償?  
 0 次  1 次  2 次  3 次  4 次  5 or above 次或以上

## 2. Motor Insurance upgrade 汽車保險提升

Upgrade option 提升選項

Coverage 保障範圍

Upgrade the third party property damage liability to 提升「第三者財產損毀的法律責任」賠償至

HKD 3,000,000 港元  HKD 5,000,000 港元  HKD 7,500,000 港元  HKD 10,000,000 港元

Loss of or damage to vehicle China extension (Guangdong Province and Macau) (Only applicable to existing customer whose vehicle has comprehensive cover)

中港跨境汽車損毀伸延保障 (廣東省及澳門) (只適用於現有客戶並已為其車輛購買綜合保障的人士)

## 3. Declaration 聲明

1. I/We declare that the drivers declared above have not been refused or discontinued of motor insurance by Zurich Insurance Company Ltd ("the Company") or by any other insurance companies.  
本人 / 我們謹聲明以上申報之駕駛者不曾被蘇黎世保險有限公司 (「貴公司」) 或其他保險公司拒絕提供汽車保險。
2. I/We agree that the above information and declaration shall be the basis of the contract between me/us and the Company and shall be deemed to be incorporated in the renewal notice as for the renewal thereof which may be agreed, subject to the terms and conditions of the policy issued by the Company. If any answer has been written by any other person, such person shall for that purpose be deemed to be my/our agent and not the agents of the Company.  
本人 / 我們謹承認以上資料為本人 / 我們與 貴公司作為此保險契約續約之根據，並願意接受保單上所刊載一切條款。若以上資料有經由他人代寫均屬已經本人認可及授權。
3. I/We declare that I/we have full and complete authority from the regular drivers of this policy to disclose any personal information being requested in this form for all purposes of this policy.  
本人 / 我們謹聲明本人 / 我們可全權代表此保單之主要駕駛者，透露此表格要求的個人資料，以用於此保單的所有用途。
4. I/We understand that I/we shall refer to the Policy for details of the insurance coverage, exclusion clauses and terms and conditions.  
本人 / 我們明白所有保障範圍、不承保事項、條款及細則概以此保險計劃保單為準。
5. I/We understand I/we must complete and provide all information requested in this form, failing which the Company cannot process my/our application for the Policy.  
本人 / 我們明白本人 / 我們必須完成及提供此表格之所有資料，貴公司將不會受理本人 / 我們資料不全之保單申請。
6. I/We hereby authorize any company within the Zurich Insurance Group which is in possession of my/our personal information to release part or all of the information to the Company or its agents.  
本人 / 我們特此授權蘇黎世保險集團中任何持有本人 / 我們個人資料的公司提供部分或全部資料予 貴公司或其代理人。

#### 4. Notice to customers relating to the Personal Data (Privacy) Ordinance (“Ordinance”) 有關個人資料 ( 私隱 ) 條例 ( 「私隱條例」 ) 的客戶通知

The personal information of customers (including policyholders, insured persons, beneficiaries, premium payors, trustees, policy assignees and claimants) collected or held by **Zurich Insurance Company Ltd (“Company”)** from time to time, which also includes data collected or generated in the ordinary course of the Company’s business and the continuation of relationship with the customer (such as claim information and medical history received from third parties), may be used by the Company and/or a company within its group (“**Zurich Insurance Group**”) for the purposes **necessary** in providing services to the customers (otherwise the Company is unable to provide services to customers who fail to provide the required information). 由蘇黎世保險有限公司 ( 「本公司」 ) 不時收集或持有的客戶 ( 包括保單持有人、受保人、受益人、保費付款人、信託人、保單受讓人及索償人 ) 個人資料，其中亦包括在公司日常業務過程中以及就持續與客戶的關係而收集或產生的資料 ( 例如從第三方收到的索償資料和病歷 )，均可供本公司及 / 或其所屬集團 ( 「蘇黎世保險集團」 ) 內的公司使用作為向客戶提供服務而必須的用途 ( 否則本公司將無法為未能提供所需資料的客戶提供服務 )。

Please read carefully the details of the Company’s privacy policy which is made available on our website at [www.zurich.com.hk/pics](http://www.zurich.com.hk/pics) or by scanning the QR code. You may also contact our Customer Care Center at 2968 2288 or insurance intermediaries for enquires. 本公司之私隱政策詳載於[www.zurich.com.hk/pics](http://www.zurich.com.hk/pics)或可透過掃描QR碼細閱。您亦可致電2968 2288與我們的客戶服務中心聯絡又或向保險中介人查詢。



#### Consent for marketing purposes - Voluntary: 就市場推廣用途之同意 – 自願性：

Certain personal information of policyholders and insured persons collected or held by the Company (which also includes data collected or generated in the ordinary course of the Company’s business and the continuation of relationship with the customer), in particular, names, contact information, age, gender, identity document reference, marital status, financial background, demographic data, transaction pattern and behavior, policy information, claim information, and medical history may be used by the Company, **only upon having such policyholders’ or insured persons’ consent or indication of no objection**, for providing marketing materials and conducting direct marketing activities in relation to insurance and/or financial products and services of the Zurich Insurance Group and/or other financial services providers, and/or other related services of business partners, with whom the Company maintains business referral or other arrangements (such as reward, loyalty, co-branding or privileges programs and related services and products, services and products offered by the Company’s business or co-branding partners, donations or contributions for charitable and/or non-profit making purposes). For the avoidance of doubt, the latest instruction (for example, consent or indication of no objection, or request for opt-out) received from a customer shall override any previous instruction given to the Company in this regard in relation to all personal information of the customer collected or held by the Company from time to time.

由本公司收集或持有的保單持有人及受保人的某些個人資料 ( 其中亦包括在本公司日常業務過程中以及就持續與客戶的關係收集或產生的資料 )，特別是姓名、聯絡資料、年齡、性別、身份證明文件資料、婚姻狀況、經濟背景、人口統計數據、交易模式和行為、保單資料、索償資料及醫療紀錄等，**於獲該保單持有人或受保人同意或作不反對指示後**，均可供本公司使用作為蘇黎世保險集團及 / 或與本公司維持業務引薦關係或其他安排之其他金融服務供應商的保險及 / 或金融產品及服務，及 / 或其他商業合作夥伴之相關服務，提供市場推廣資料及進行直接市場推廣活動。( 例如獎賞、忠誠獎勵、合作品牌或優惠計劃以及相關服務和產品，由本公司商業合作夥伴或合作品牌夥伴提供的服務和產品，出於慈善及 / 或非牟利目的的捐贈或捐款 )。為免生疑問，就本公司不時收集或持有的所有客戶個人資料，本公司將會以從客戶收到的最新指示 ( 例如同意或表示不反對的指示，或提出反對要求 )。

The Company may provide (and may receive money or property in return for providing) certain personal information, in particular, name, contact information, age, gender and policy information of a policyholder and an insured person, **only upon having such policyholder’s and insured person’s written consent**, to be used by the following parties, within or outside of Hong Kong, for their own and/or the Company’s **marketing purposes** set out above:

- (1) companies within the Zurich Insurance Group;
- (2) other banking/financial institutions, commercial or charitable organizations with whom the Company maintains business referral or other arrangements;
- (3) third party reward, loyalty, co-branding or privileges program providers;
- (4) third party marketing service providers and insurance intermediaries.

**於獲保單持有人及受保人書面同意後**，本公司方可就以下人士本身及 / 或就本公司的**市場推廣用途**，向以下於香港境內或境外的人士提供其某些個人資料 ( 並可能收到金錢或其他財產作為回報 )，特別是姓名、聯絡資料、年齡、性別、保單持有人及受保人的保單資料等，以供其使用：

- (1) 蘇黎世保險集團成員公司；
- (2) 與本公司維持業務引薦關係或其他安排的其他銀行 / 金融機構、商業或慈善組織；
- (3) 第三方獎賞、忠誠獎勵、合作品牌或優惠計劃提供者；
- (4) 第三方市場推廣相關服務供應商及保險中介人。

I/We understand that I/we can withdraw any consent provided for marketing purposes anytime by notice to the Company.

本人 / 我們明白可隨時通知 貴公司以撤回任何就市場推廣用途所給予之同意。

I/We do not agree to the use or transfer of my/our personal data for marketing purposes as set out above.

本人 / 我們不同意 貴公司使用或向第三方提供本人 / 我們的個人資料作上列市場推廣用途。

I/We confirm that all information provided by me/us in this form is true, correct and accurate. I/We further confirm my/our agreement to all sections in this form, including without limitation, the above Declaration and the Notice to customers relating to the Personal Data (Privacy) Ordinance.

本人 / 我們確認由本人 / 我們於此表格提供之所有資料均為事實正確無誤。本人 / 我們更確認同意本表格內之所有部分，包括但不限於上列之聲明及有關個人資料 ( 私隱 ) 條例的客戶通知。

Signature of applicant/policyholder

投保人簽署 / 保單持有人

Date 日期  
Day日 Month月 Year年

Zurich Insurance Company Ltd (a company incorporated in Switzerland with limited liability)  
25-26/F, One Island East, 18 Westlands Road, Island East, Hong Kong

蘇黎世保險有限公司 ( 於瑞士註冊成立之有限公司 )

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