



SUN FLOWER INSURANCE BROKERS LTD.

Room 1105-08, 11/F., Hing Yip Commercial Centre, 272-284 Des Voeux Road Central, Hong Kong
Tel: 25211881 Fax: 25211919 www.sunflowerVIP.com www.sunflowerMPF.com

新華保險顧問有限公司

香港德輔道中 272-284 號興業商業中心 11 樓 05-08 室
電話: 25211881 傳真: 25211919 License No. FB1387

餐飲業保險報價申請表 RESTAURANT INSURANCE REQUEST FORM

請以英文正楷填寫此表格及在適當方格內加 ✓ Please complete the table in English block letter and tick if applicable.

- 商舖綜合保險 Shop Package
 財物全險 Property-All-Risks
 火險及附加險 Fire & Allied Perils
 公眾責任保險 Public Liability
 金錢保險 Money
 其他 Others :

保戶名稱 Name of Insured

經營模式 Business

(請說明) Please classify :

中式酒家/中式菜館/火鍋店/西式餐廳/高級日式餐廳/日式餐廳/迴旋壽司/韓式料理/酒吧/台式料理/法式餐廳/沙律及三文治店/茶餐廳/茶水檔/小吃魚蛋店/工廠飯堂/酒店自助餐廳

餐廳地址 Restaurant Location

Any foods manufacturing factory in another location : 在別處作食物製造工場? 有 無

保險期 Period of Insurance (日 D /月 M /年 Y)

由 From : 至 To :

保障範圍 Cover		投保額 Sum Insured (HK\$)	辦公室專用 For Office Use Only	
			保費率 Rate	保費 Premium
1.	營業裝置及設備 Contents			
	1.1 櫥窗、玻璃門及框架 Show windows, glass door and frames -	➤		
	1.2 有沒有任何霓虹燈招牌或廣告牌 Any Advertising Signs? Please specify sizes and materials of signs/Photos for ref. ()呎 x ()呎 x ()呎	➤		
	1.3 任何一件器材價值超過HK\$75,000 Any one item of equipment exceeding HK\$75,000.00 -			
2.	商品存貨 Stock in Trade			
3.	樓宇結構 Fabric of Building			
4.	金錢損失保險 Loss of Money Insurance			
	4.1 在營業時間運往返銀行或辦公室途中 In transit to and from Bank (Business Hours) -	➤		
	4.2 在營業時間置於辦公室內 In Premises (Business Hours) -	➤		
	4.3 在營業時間後置於上鎖夾萬或保險庫內 Secured in the locked safe / strong room in the Premises (After Business Hours) -	➤		
	4.4 在營業時間後置於辦公室內或收銀機或上鎖抽屜內 In Premises & secured in the cash register or locked drawer (After Business Hours)	➤		
5.	公眾責任保險 Public Liability Insurance			
	餐廳總面積 Gross floor area			
	餐廳座位數目 No. of Seats			
	餐廳營業時間 Business Hours			
6.	其他 Other: 餐廳成立年份 Established			
			<input type="checkbox"/> 最低保費 Min.	

防盜系統 Anti-theft Device (*請遞交防盜系統圖解作核保用途 Please attach Alarm Plan for underwriting purpose):

- 自動通報撥號警報器 Auto Dialer Alarm
 商品電子防盜系統 Electronic Article Surveillance
 捲閘 Roller Shutter
 直線警衛監控警報器 Direct-link Monitoring Alarm
 通道管理系統 Access Control System
 柵欄 Grille / Other 其他 :

防火系統 Fire Protection

- 花灑系統 Fully Sprinklered?
 煙霧探測器 Fire Alarm Smoke Detector?
 滅火桶 Extinguisher?

Building Construction / Occupancy Information: 工業樓宇/商業樓宇/商住樓宇/獨立屋/村屋; 樓齡: ____年 Please attached with Photos 請連同相片



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7.	僱員賠償保險 Employees' Compensation Insurance *請註明外出工作、海外公幹、體力勞動、操作機器或駕駛車輛/單車，類別等職務需要 Please specify "Outdoor", "Overseas", "Manual Work", "Type of Machine or Vehicle / bicycle" if applicable					
項目 Item	僱員人數及工作類別 No. & Description of Employee	備註* Remark	全年總收入 (HK\$) Annual Total Earnings	條款 Warranty	保費率 Rate	保費 Premium
1.						
2.						
3.						
Provide Employer's MPF contribution list 強積金供款記錄			總計Total	<input type="checkbox"/> 最低保費 Min.		
賠償記錄 Claims History		過往三年的索償詳情: Details Claim experience for the past 3 years <input type="checkbox"/> 有Yes <input type="checkbox"/> 否No			勞保徵費Levy 10.8%	
附加文件 Supplementary Document -				總保費Total Premium		
請提供閣下最新的續保通知書或保險單副本作核保用途 Please provide copy of latest renewal term & notice or policy schedule for underwriting purpose.				佣金 Comm. %		
				淨保費Net Premium		

1. Estimated Annual Turnover 預計全年營業額
2. In the last 24 months, has the company been found in violation of the occupational safety and health ordinance (Cap 509) 在過往 24 個月內,公司是否被發現違反職業安全及健康條例(Cap 509)
3. Are there foreseeable material changes to the company's business in the next 12 months 未來 12 個月公司業務是否有可預見的重大變化

備註 Remark : Subject to minimum calculation of the premium base on annual earning HK\$68,520 per employee
以每位僱員年薪 HK\$ 68,520 港元為基礎計算最低保費

強積金 MPF	
Does the policyholder already have a Mandatory Provident Fund (MPF) plan? 投保人是否已有強積金計劃?	<input type="checkbox"/> 有 Yes <input type="checkbox"/> 否 No
Does the policyholder need to arrange an MPF plan? 投保人是否需要安排強積金計劃?	<input type="checkbox"/> 有 Yes <input type="checkbox"/> 否 No
Please select trustee if the answer is "Yes": 如果答案是“是”，請選擇受託人：	
<input type="checkbox"/> AIA Company (Trustee) Limited 友邦(信託)有限公司	
<input type="checkbox"/> BCT Financial Limited 銀聯信託有限公司	
<input type="checkbox"/> HSBC Provident Fund Trustee (Hong Kong) Ltd	
<input type="checkbox"/> Manulife Provident Funds Trust Company Limited 宏利公積金信託有限公司	
<input type="checkbox"/> Sun Life Trustee Company Limited 永明信託有限公司	

附加文件 Supplementary Document - 請提供閣下最新的續保通知書或保險單副本作核保用途
Please provide copy of latest renewal notice or policy schedule for underwriting purpose

請留下聯絡人資料 Please leave your contact information	
聯絡人 Contact Person	: <input type="text"/>
聯絡電話 Telephone No.	: <input type="text"/>
電郵地址 Email Address	: <input type="text"/>