



EMPLOYEES' COMPENSATION INSURANCE PROPOSAL FORM
僱員賠償保險投保書

(Please complete this Form in BLOCK LETTERS and tick the appropriate box. 請以英文正楷填寫及在適當空格填上剔號)

PROPOSER INFORMATION 申請人資料	
Name of Proposer 申請人名稱 :	
Correspondence Address 通訊地址 :	
Place of Employment 工作地址 :	<input type="checkbox"/> Same as the above Correspondence Address 與上述通訊地址相同
Business Registration Number : 商業登記號碼	(Please provide a copy of valid Business Registration Document) (請提供有效的商業登記副本)
Business Nature 營業性質 :	
Year(s) of business established : 公司成立年期	_____ year(s) 年
Any Shift Duty 員工是否需要輪班 :	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Period of Insurance 保險期限 :	From 由 _____ for 12 months 開始投保一年

EMPLOYEES' DETAILS 僱員資料					
Please provide the following information [Please provide a copy of latest wage roll (e.g. latest MPF contribution records, financial statements, tax returns or other relevant documents), of employee(s)]: 請提供以下資料 [請提供僱員的最新收入的副本 (例如最新的強積金供款紀錄, 財務報表, 報稅表或其他有關文件)]:					
<u>Occupation of Employee(s) by Categories</u> 僱員工作類別	<u>Number of Employees</u> 僱員人數	<u>Estimated Total Annual Earnings*</u> (HKD) 估計全年收入* (港元)	<u>Temporarily working abroad</u> 須在海外工作 Y 是 / N 否	<u>Part Time 兼職</u> Y 是 / N 否	<u>Office use only</u>
	Total: 總額	Total: 總額			

*Earnings include salaries, commissions, bonuses, overtime, allowance, etc., in accordance with the Employees' Compensation Ordinance (Chapter 282).
根據僱員補償條例 (第 282 章), 收入包括薪金, 佣金, 獎金, 加班費, 津貼等。



OTHER IMPORTANT INFORMATION 其他重要資料

1.	Do you want the Geographical Area of the Policy to be extended to apply outside Hong Kong in respect of employees working temporarily abroad? 是否需要擴展保障僱員暫時在香港以外範圍工作之僱主責任? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 是 (please state Geographical Area 請列明地區範圍, 並於上欄“僱員工作類別”列明_____)
2.	Is there any family member included in the above employee list? 上述僱員是否包括與僱主同住之家屬? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 是 (Name of employee 僱員姓名_____)
3.	Does any work carried out by the employees involve 僱員進行的工作是否涉及: a) any work on ships, chemical works, off-shore structures, oil or gas refineries? 任何有關船舶, 化學工程, 海上建築, 石油和天然氣煉油廠的工作? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 是 (please state 請列明_____) b) work at a height above 9 metres or underground? 在9米以上或地下工作? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 是 (please state 請列明_____) c) use, handle, store or transport any hazardous substances such as toxic chemicals, explosive substances, gases, asbestos, radioactive substance? 使用, 處理, 儲存或運輸任何有毒物質, 如有毒化學品, 爆炸性物質, 氣體, 石棉, 放射性物質? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 是 (please state 請列明_____)
4.	Do you plan to increase the number of the employees substantially or add different occupations in a short period of time? 閣下打算在短時間內大幅增加僱員人數或增加不同工作類別嗎? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 是 (please state 請列明_____)
5.	a) Are you at present insured by another insurance company for Employee's Compensation Insurance? 閣下現在是否已投保對僱員之責任保險? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 是 (please state name of the company 請列明受保公司名稱_____) b) Had any such proposal or renewal ever been declined or withdrawn? 該投保或續保曾否被拒絕或撤回? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 是 (please state 請列明_____) c) Has an increased rate been required? 曾否被提高保率? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 是

CLAIMS AND RELATED DETAILS 索賠和相關記錄

1. Please provide the claim history for the past 3 years:
請提供過去3年的索賠記錄:
[Note: Employer shall make request on the previous insurers for providing written evidence of such records.]
[注意: 僱主須向先前投保的保險公司要求提供相關記錄的書面證明]

Accident Year 意外年份	Paid Claim(s) (including partial claim payment) 已支付的索賠 (包括部分已支付的索賠)		Outstanding Claim(s) 未支付的索賠		Total for the Year 全年總計	
	No. of Case 意外次數	Amount (HK\$) 金額(港元)	No. of Case 意外次數	Amount (HK\$) 金額(港元)	No. of Case 意外次數	Amount (HK\$) 金額(港元)



2. Details of any Claim with amount over HK\$50,000. 任何索賠的金額超過港元 50,000 的個案詳情

<u>Date of Accident</u> 意外發生日期	<u>Brief Details of each accident</u> (including cause of loss, degree of injury, number of days of sick leave, current status, etc.) 每宗事故的簡要描述 (包括意外原因, 受傷程度, 病假天數, 現狀等)	<u>Claim Amount (HK\$)</u> 索賠金額(港元)	
		<u>Paid</u> 已支付的索賠	<u>Outstanding</u> 未支付的索賠

DECLARATION 聲明

I/We, being the undersigned, desire to effect an insurance as above stated in terms of the Policy to be issued by Asia Insurance Co., Ltd. ("the Company"). I/We warrant the above estimated total annual earnings made by me/us or on my/our behalf are true and complete for all employees within the scope of the Employees' Compensation Ordinance (Chapter 282). Under declaration of the Estimated Total Annual Earnings may invalidate the insurance. I/We agree to keep a proper salaries and wages record and to render at the end of each period of insurance a statement in the form required by the Company of all salaries and wages actually paid and to pay premium on any salaries and 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, mis-represented or mis-stated any material fact, and I/we agree that this proposal form shall be the basis of the contract between me/us and the Company.

本人/本公司作為下列之簽署人, 願意向亞洲保險有限公司(“貴公司”)根據上述資料投保。本人/本公司保證上述根據“僱員補償條例(第 282 章)”所申報的估計的僱員全年收入均屬真確及完整。如少報全年總收入, 可能導致保單失效。本人/本公司同意妥善保存薪金及工資記錄, 並在保險期限屆滿時依照貴公司所要求的報表格式申報實際之所有薪金及工資, 並支付因超過上述估計的薪金及工資而須加收之保費。本人/本公司在此聲明, 本人/本公司已經閱讀及核實在此投保書內所填報的所有陳述和詳情均屬真確, 本人/本公司並無隱藏虛報或歪曲任何事實, 本人/本公司同意此投保書作為本人/本公司與貴公司訂立契約之基礎。

Authorized Signature (with Company Chop)

獲授權簽署連公司蓋章

Name 姓名 : _____

Position 職位 : _____

Date 日期 : _____

For office use only

Agent Code:



Personal Information Collection Statement ("PICS")

1. From time to time, it is necessary for you to supply Asia Insurance Company Limited (the "Company") with personal information and particulars in connection with our services and products. Failure to provide the necessary information and particulars may result in the Company being unable to provide or continue to provide these services and products to you.
2. The Company may also generate and compile additional personal data using the information and particulars provided by you. All personal data collected, generated and compiled by the Company about you from time to time is collectively referred to in this PICS as "Your Personal Data".
3. "Your Personal Data" will also include personal data relating to your beneficiaries, dependents, authorised representatives and other individuals in relation to which you have provided information. If you provide personal data on behalf of any person you confirm that you are either their parent or guardian or you have obtained that person's consent to provide that personal data for use by the Company for the purposes set out in this PICS.
4. As detailed in this PICS, Your Personal Data may also be processed by the Company's subsidiaries, holding companies, associated or affiliated companies and companies controlled by or under common control with the Company (collectively, "the Group").

Transfer of Personal Data

5. Your Personal Data will be kept confidential, but to facilitate the purposes set out in paragraph 7 below, the Company may transfer, disclose, grant access to or share Your Personal Data with the following:
 - (i) other members of the Group;
 - (ii) any person or company carrying on insurance-related and/or reinsurance-related business which is engaged by the Company in connection with the Company's business;
 - (iii) any physicians, hospitals, clinics, medical practitioners, laboratories, technicians, loss adjustors, risk intelligence providers, claims investigators, legal advisors and/or other professional advisors engaged in connection with the Company's business;
 - (iv) any agent, contractor or service provider providing administrative, distribution, credit reference, debt collection, telecommunications, computer, call centre, data processing, payment processing, printing, redemption or other services in connection with the Company's business; and/or
 - (v) any official, regulator, ministry, law enforcement agent or other person (whether within or outside Hong Kong) to whom the Company or another member of the Group is under an obligation or otherwise required or expected to make disclosures under the requirements of any law, rules, regulations, codes of practice or guidelines (whether applicable in or outside Hong Kong).
6. Your Personal Data may be transferred or disclosed to any assignee, transferee, participant or sub-participant of all or any substantial part of the Company's business.

Purpose for Collecting Personal Data

7. The purposes for which Your Personal Data may be used are as follows:
 - (i) providing our services and products to you, including administering, maintaining, managing and operating such services and products;
 - (ii) processing, assessing and determining any applications or requests made by you in connection with our services or products and maintaining your account with the Company;
 - (iii) processing payment instructions;
 - (iv) developing insurance and other financial services and products;
 - (v) developing and maintaining credit and risk related models;
 - (vi) determining any indebtedness owing to or from you, and collecting and recovering any amount owing from you or any person who has provided any security or other undertakings for your liabilities;
 - (vii) exercising any rights that the Company may have in connection with our services and/or products;
 - (viii) carrying out and/or verifying any eligibility, credit, physical, medical, security, underwriting and/or identity checks in connection with our services and products;

- (ix) any purposes in connection with any claims made by or against or otherwise involving you in respect of any of our services or products, including, making, defending, investigating, analyzing, processing, assessing, determining, responding to, resolving or settling such claims;
- (x) performing policy reviews and needs analysis (whether or not on a regular basis);
- (xi) meeting disclosure obligations and other requirements imposed by or for the purposes of any laws, rules, regulations, codes of practice or guidelines (whether applicable in or outside Hong Kong) binding on the Company or any other member of the Group, including making disclosure to any legal, regulatory, governmental, tax, law enforcement or other authorities (including for compliance with sanctions laws, the prevention or detection of money laundering, terrorist financing or other unlawful activities) or to any self-regulatory or industry bodies such as federations or associations of insurers;
- (xii) for statistical or actuarial research undertaken by the Company or any member of the Group; and
- (xiii) fulfilling any other purposes directly related to (i) to (xii) above.

8. To facilitate the purposes set out in paragraph 7, the Company may transfer, disclose, grant access to or share Your Personal Data with the parties set out in paragraph 5 and you acknowledge that those parties may be based outside Hong Kong and that Your Personal Data may be transferred to places where there may not be in place data protection laws which are substantially similar to, or serve the same purposes as, the Personal Data (Privacy) Ordinance.

Data Access and Correction Right

9. Under the Personal Data (Privacy) Ordinance you have the right to request access to Your Personal Data held by the Company and request correction of any of Your Personal Data which is incorrect and the Company has the right to charge you a reasonable fee for processing and complying with your data access request.
10. Requests for access to or correction of Your Personal Data should be made in writing to the Corporate Data Protection Officer of the Company at the address below. For any questions, please do not hesitate to call our Customer Service Hotline on 3606 9933.

Corporate Data Protection Officer
Asia Insurance Company Limited,
8/F, 118 Connaught Road West,
Sheung Wan, Hong Kong

11. In case of any discrepancies between the English and Chinese versions of this PICS, the English version shall apply and prevail.
12. The Company reserves the right, at any time effective upon notice to you, to add to, change, update or modify this PICS.



個人資料收集聲明

- 閣下需要不時向亞洲保險有限公司（「本公司」）就本公司的服務及產品提供個人資料及詳情。如未能提供所需資料及詳情，可能會導致本公司無法向閣下提供或繼續提供有關服務及產品。
- 本公司亦可以利用閣下提供的資料及詳情製作及匯編額外的個人資料。本公司不時收集、製作及匯編的所有個人資料，以下統稱為「閣下的個人資料」。
- 「閣下的個人資料」亦包括由閣下提供有關閣下的受益人、受養人、獲授權代表及其他人士的資料。如閣下代表他人提供個人資料，閣下確認閣下乃是他們的父母或監護人或閣下已取得有關人士之同意提供有關人士之個人資料予本公司作本聲明之用途。
- 如本聲明所述，閣下的個人資料亦可能被本公司的附屬公司、控股公司、聯營或聯屬公司或本公司控制的公司或與本公司受共同控制的公司（統稱「本集團」）處理。
- 為達成上文第 7 段所列出的目的，本公司可能將閣下的個人資料轉移、披露，讓其查閱或與上文第 5 段所列的各方共同使用及閣下知悉有關一方可能設在香港以外的地方及閣下的個人資料可能被轉往的地方未必設有與《個人資料（私隱）條例》大致相同或用作同一用途的資料保護法。

查閱及改正資料權利

- 根據《個人資料（私隱）條例》，閣下有權要求查閱本公司所持有閣下的個人資料，並要求改正閣下的不正確個人資料及本公司有權就處理及進行閣下的查閱資料要求而收取合理費用。
- 查閱或改正閣下的個人資料要求，應以書面形式向本公司的資料保護主任提出並將函件郵寄至以下地址。如有任何疑問，敬請致電本公司之客戶服務熱線 3606 9933。

香港上環干諾道西一百一十八號八樓
亞洲保險有限公司
資料保護主任

個人資料的轉移

- 閣下的個人資料將被保密但為達成下文第 7 段列出的用途，本公司可能將閣下的個人資料轉移、披露，讓其查閱或與以下各方共同使用：
 - 本集團的其他成員；
 - 任何因本公司業務而聘用之經營保險相關及／或再保險相關業務之人士或公司；
 - 任何因本公司業務而聘用的治療師、醫院、診所、醫生、化驗所、技師、損失理算人、風險情報供應商、索賠調查人、法律顧問及其他專業顧問；
 - 任何向本公司之業務提供行政、分銷、信貸資料庫、債務追討、電訊、電腦、熱線中心、資料處理、付款處理、印刷、贖回或其他服務的代理人、承包商或服務供應商；及／或
 - 任何本公司或本集團的其他成員負責任或需要或預期要根據任何法律、規則、規例、實務守則或指引（不論在香港境內或境外適用）作出披露的官員、規管者、部門、執法代理或其他人士（不論在香港境內或境外）。
- 閣下的個人資料可能被轉移或披露予任何承讓人、受讓人、本公司業務的任何實質部分的參與人或次參與人。

- 中英文版本如有差異，將以英文版本為準。
- 本公司保留隨時增補、更改、更新及修訂本聲明之權利，任何更改將於發出通知時起生效。

個人資料收集目的

- 閣下的個人資料可能用於以下用途：
 - 向閣下提供本公司的服務及產品包括管理、維持、處理及運作有關服務及產品；
 - 處理、評估及決定閣下就本公司的服務或產品而提出的任何申請或要求，以及維持閣下在本公司的賬戶；
 - 處理付款指示；
 - 發展保險及其他金融服務及產品；
 - 發展及維持本公司信貸及風險之相關模型；
 - 釐訂任何欠付閣下或閣下所欠的負債，及向閣下或任何為閣下的債務提供擔保或其他承諾的人士收取及追討欠款；
 - 行使與本公司的服務及／或產品有關的任何權利；
 - 就本公司之服務及產品作出資格、信貸、身體、醫療、擔保、承保及／或身份核証；
 - 用於任何因本公司的產品或服務而由閣下提出或本公司對閣下提出的申索，包括作出、抗辯、調查、分析、處理、評核、決定、回應、解決或和解有關申索；
 - 進行保單審閱及需求分析（不論是否定期進行）；
 - 本公司或本集團的其他成員根據任何法律、規則、規例、實務守則或指引（不論在香港境內或境外適用）要求而須作出披露，包括向任何法定機構、監管機構、政府機構、稅務機構、執法機構或其他機構（包括為遵守制裁法、避免或偵查洗錢、恐怖分子資金籌集或其他不法活動）或向任何獨立監管或行業團體（如保險業聯會或協會等）作出披露；
 - 作本公司或本集團的任何成員的統計或精算研究；及
 - 履行與上文第(i)至(xii)段直接有關的其他用途。