

HelperCare Insurance

(1-Year or 2-Year Policy)

家傭全保

(一年或兩年保單)



服務熱線 Call our hotline: 3123 3123

HelperCare Insurance
家傭全保

Helpercare Insurance is a competitive and comprehensive package of benefits developed to meet the needs and obligations of individual employer as yourself. It offers many attractive benefits for you and your domestic helper as well as protection for his / her family in the event of his / her accidental death.

家傭全保是一份優越而全面的保險計劃，既保障作為僱主的你需負之法律責任，亦為你及你的家傭提供多項保障，包括如家傭因意外身亡而提供予其家屬之補償，令你安枕無憂！

PRODUCT HIGHLIGHTS 產品特點	
Covers your legal liability as employer plus extra benefits for you and your domestic helper 保障僱主所須負上之法律責任，並為你及你的家傭提供額外保障	✓
Change of domestic helper at no extra premium 轉換家傭時，不需支付額外保費	✓
No waiting period will be applied 所有保障不設等候期	✓
Prompt settlement of medical claims by autopay 採用自動轉賬方式繳付醫療費用賠償，方便快捷	✓
A premium discount if you opt for a 2-year period of insurance 投保兩年保單年期計劃，即可獲折扣優惠	✓

Coverage

Cover	Benefits	Max. Benefits
Section 1	Employer's Liability Indemnify the employer against liability at law including liability under the legislation in the event the domestic helper suffers injury or disease arising out of and in the course of his / her employment.	HK\$100,000,000 per event
Section 2	Hospital & Surgical, Clinical and Other Expenses Hospitalisation & Surgical Expenses Domestic helper is confined in a hospital for surgery or treatment of sickness or injury resulting from an accident. a) Room and Board Charges b) Surgical Operation Expenses Out-Patient (Clinical) Expenses Medical treatment from a clinic for sickness or injury resulting from an accident a) Out-Patient medical treatment received from registered medical practitioner b) Bonesetter treatment	HK\$30,000 per year HK\$350 per day HK\$15,000 per surgical operation HK\$4,000 per year HK\$200 per visit (max. one visit per day) HK\$500 per year HK\$100 per visit (max. one visit per day)
Section 3	Dental Expenses Oral surgery, treatment of abscesses, X-ray, extractions or fillings as a result of dental disease provided by a registered dentist.	HK\$2,000 per year 75% of actual expenses per claim
Section 4	Personal Accident In the event of an accident to your domestic helper during his / her rest days resulting in accidental death or permanent disablement occurring within 12 months from the date of such accident : a) Accidental death b) Total and permanent disablement from engaging in or attending to any business or occupation c) Loss of one or more limbs d) Loss of sight in one or both eyes	HK\$120,000 per year HK\$120,000 HK\$120,000 HK\$120,000 HK\$120,000
Section 5	Repatriation Expenses In the event of serious sickness or injury to your domestic helper resulting in his / her being certified by a registered medical practitioner as medically unfit to work leading to the termination of his / her employment contract, or resulting in his / her death. a) the repatriation of your domestic helper to his / her home country by scheduled flight (economy class) ; or b) the transportation of the mortal remains to his / her home country	HK\$25,000 per year
Section 6	Free Additional Benefits Re-hiring Expenses In the event a valid claim is payable under Section 5 - Repatriation Expenses, this Plan will pay for expenses incurred in securing a replacement helper, including air ticket, agency fees and processing fees. Hospital Cash Subsidy In the event your domestic helper is hospitalised due to sickness or injury, a daily cash allowance commencing from the third day of his / her confinement will be paid. Loan Protection If you make a financial loan with documented evidence to your domestic helper which cannot be repaid due to the death of the helper, or his / her being medically unfit to continue employment, this Plan will reimburse the amount of the loan outstanding. Fidelity Protection The actual financial loss directly resulting from the act of fraud or dishonesty committed by your domestic helper.	HK\$10,000 per year HK\$6,000 per year HK\$200 per day HK\$10,000 per year HK\$5,000 per year

Major Exclusions

The following is only a summary of the major exclusions. Please refer to the policy for details.

General Exclusions

War, act of terrorism, accident or sickness sustained or contracted outside Hong Kong (except Employer's Liability Cover), nuclear or radioactivity hazards, pre-existing conditions, sexually transmitted diseases, HIV and/or HIV related illness including AIDS, suicide, intentional self-injury, pregnancy, miscarriage, childbirth, infertility, mental or nervous disorder, alcoholism or drug addiction.

Special Exclusions Applicable to:

Section 1 - Employer's Liability
Pneumoconiosis or any late payment surcharge that the employers may become liable under the legislation.

Section 2 - Hospital & Surgical, Clinical and Other Expenses
Cosmetic surgery unless due to injury covered under this Plan, routine physical examination or any expenses incurred outside Hong Kong.

Section 3 - Dental Expenses
Routine examination, scaling, cleaning, polishing, crowning, bridges, braces, dentures, dental prosthetics or any expenses incurred outside Hong Kong.

Section 4 - Personal Accident
Air travel (except as a passenger in a fully licensed passenger carrying aircraft), mountaineering, rock climbing, underwater activities necessitating the use of breathing apparatus, motor cycling, racing (other than on foot or swimming), dangerous sports or activities.

Age Limit

18 to 60 years of age

Eligibility

Overseas domestic helpers who are employed under an Employment Contract as governed by the Immigration Ordinance (Chapter 115).

Premium Table

Period of Insurance	Premium (HKD)	EC Levy* (HKD)
1 Year	680	10.80
2 Years	1,292	21.60

*Employees' Compensation Insurance Levy, Government Terrorism Facility Charge & Employees' Compensation Insurers Insolvency Bureau - Contribution

Insurance levy is not included in the above premium

Insurance Levy Rate Table

Date of Policy Inception	Rate	Cap(HK\$)	Date of Policy Inception	Rate	Cap(HK\$)
From 1 Jan 2018 till 31 Mar 2019	0.040%	2,000	From 1 Apr 2020 till 31 Mar 2021	0.085%	4,250
From 1 Apr 2019 till 31 Mar 2020	0.060%	3,000	From 1 Apr 2021 onwards	0.100%	5,000

Levy collected by the Insurance Authority has been imposed on relevant policy at the applicable rate. The payment received for such levy will be remitted to the Insurance Authority under the prescribed arrangement. For further information, please visit www.fwd.com.hk or contact: (852) 3123 3123.

Notes

This brochure gives only an outline of the terms and conditions of the insurance cover and any information given herein is subject to the precise terms and conditions in our Policy, a specimen copy of which will be furnished to you on request.

保障範圍

保障項目	承保範圍	最高保障金額
第一項	僱主責任 家傭在受僱期間因工作引致生病、受傷或死亡而導致僱主須承擔之法律賠償責任。	每宗事故 100,000,000港元
第二項	住院及外科手術、診療及其他費用 住院及外科手術費用 家傭因生病或意外受傷而需入院接受外科手術或治療之實際費用。 a) 每日住院費 b) 外科手術費 診療（門診）費用 家傭因意外受傷或生病而需接受註冊醫生診治之醫療費用。 a) 門診治療 b) 跌打治療	每年30,000港元 每天350港元 每次15,000港元 每年4,000港元 每次200港元 (每天只限一次) 每年500港元 每次100港元 (每天只限一次)
第三項	牙科費用 家傭因牙齒疾患需接受由註冊牙醫進行的口腔手術、治療膿腫、X光檢查、脫牙或補牙。	每年2,000港元 每次實際費用之75%
第四項	個人意外 家傭在休假期間意外受傷，導致12個月內因傷死亡或永久性傷殘。 a) 意外死亡 b) 完全及永久性傷殘而導致不能從事任何工作 c) 喪失任何肢體 d) 一目或雙目失明	每年120,000港元 120,000港元 120,000港元 120,000港元 120,000港元
第五項	遣送費用 家傭經註冊醫生證明因受傷或疾病不能繼續工作或因死亡而導致僱傭合約被終止。 a) 以國際航機（經濟客位）將家傭送返原居國家；或 b) 將遺體運送返原居國家	每年25,000港元
第六項	額外保障 改聘費用 如根據本計劃第五項 - 遣送費用可獲賠償，此額外保障可保障改聘另一名海外家傭替代原來之家傭的費用，包括機票費用、介紹費用及處理費用等。 住院現金津貼 家傭因生病或意外受傷而需入院治療，由第三天起，可獲現金津貼。 償還貸款保障 若你曾向你的家傭作出有證據之私人財務借貸，如家傭因死亡、受傷或疾病而不能繼續工作導致未能償還，其尚欠之借貸餘款將可獲得賠償。 忠誠保障 因家傭作出一些欺詐或不誠實行為引致僱主的金錢損失。	每年10,000港元 每年6,000港元 每天200港元 每年10,000港元 每年5,000港元

主要不保事項

以下為不保事項之概略，詳細內容請參閱保單。

一般不保事項

戰爭、恐怖主義活動、在香港以外地方發生之傷病或意外（僱主責任保障除外）、核能或放射性風險、受保前已存在之傷病、性病、愛滋病、自殺、自我傷害行為、懷孕、流產、分娩、不育、精神病、酗酒或濫用藥物。

適用於個別保障利益之不保事項：

第一項 - 僱主責任

肺塵埃沉着病、法例下僱主因不依期作工傷賠償而須付之罰款。

第二項 - 住院及外科手術、診療及其他費用

美容或整形手術（因本計劃保障範圍內損傷所引致者除外）、例行體格檢查或在香港以外地方的治療費用。

第三項 - 牙科費用

例行口腔檢查、洗牙、磨牙、鑲裝牙冠、牙橋、牙箍、假牙或在香港以外地方的治療費用。

第四項 - 個人意外

飛行（以乘客身份搭乘民航機除外）、攀山、攀石、供氧設備輔助呼吸之水中活動、駕駛或乘坐電單車、速度競賽（跑步、游泳除外）、高危運動或活動。

受保年齡

18至60歲

投保資格

此計劃只適用於入境條例（第一一五章）所訂條例下的合約制海外家傭。

保費表

保單年期	保費(港幣)	僱員補償保險徵費*(港幣)
1 年	680	10.80
2 年	1,292	21.60

* 僱員補償保險徵款，恐怖主義活動而引致的索償（“財務安排”）費用及保險公司〈僱員補償〉無力償債管理局徵款

以上保費並未包括保費徵費

保費徵費表

保單起保日	徵費率	最高徵費(港幣)	保單起保日	徵費率	最高徵費(港幣)
由2018年1月1日至2019年3月31日	0.040%	2,000	由2020年4月1日至2021年3月31日	0.085%	4,250
由2019年4月1日至2020年3月31日	0.060%	3,000	由2021年4月1日之後	0.100%	5,000

保險業監管局已向相關的保單按規定的徵費率徵收保費徵費。已收取的徵費付款會按規定轉付予保險業監管局，詳情請瀏覽 www.fwd.com.hk 或聯絡 (852) 3123 3123。

注意

本小冊子乃保障條款及規定之摘要，僅供參考之用。有關保障條款及規定一概以保單內容為準。如閣下需要保單樣本，請向本公司索取。

Please complete in BLOCK LETTERS and tick where appropriate. 請以英文正楷填寫並於適當空格內加上「✓」號。

(II) Domestic Helper's Information 家傭資料	
Name of Insured Person (Domestic Helper) 被保人(家傭) 姓名 <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Mr.先生 <input type="checkbox"/> Ms.女士 </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Mrs.太太 <input type="checkbox"/> Miss小姐 </div>	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Date of Birth (DD / MM / YYYY) 出生日期(日 / 月 / 年) _____ / _____ / _____ <div style="display: flex; justify-content: space-around; font-size: small;"> DD日 MM月 YYYY年 </div> </div> <div style="width: 35%;"> Nationality 國籍 _____ </div> </div>
HKID card No. / Passport No. 香港身份證號碼 / 護照編號 <div style="text-align: center; height: 40px; border: 1px solid black; margin-top: 10px;"> () </div>	Address of Employment (if different from Correspondence Address) 僱用地址(若與通訊地址不同) Flat _____ 室, _____ Floor樓, Block _____ 座, Building大廈名稱: _____ Street 街道: _____ District地區: _____ <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <input type="checkbox"/> HK 香港 / <input type="checkbox"/> Kowloon 九龍 / <input type="checkbox"/> NT 新界 </div>

(III) General Information 其他資料

1. During last three years, have you ever had any domestic helper insurance refused?
過去三年內，閣下在投保家傭保險時曾否被拒絕？

☐ Yes 是 ☐ No 否

2. Are you aware of any condition for which your domestic helper may require medical or surgical treatment?
閣下是否知道上述家傭可能因某種病症而需要接受治療或手術？

☐ Yes 是 ☐ No 否

If the answer to question 1 or 2 is "YES" please give details:
如問題1或2所選之答案為「是」請詳細說明：

(IV) Payment Method 付款方法	
Cheque should be crossed and made payable to "FWD General Insurance Company Limited" 劃線支票抬頭請寫：「富衛保險有限公司」	
<input type="checkbox"/> Cheque 支票	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard
Credit Card No. 信用卡號碼	
<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>
Cardholder's Name 持卡人姓名	Card Expiry Date 信用卡有效期至
<div></div>	<div><div></div><div></div></div> — <div><div></div><div></div><div></div><div></div></div>
	MM月 YYYY年
I hereby authorize FWD General Insurance Company Limited to charge my credit card account specified for this insurance. 本人茲授權富衛保險有限公司從本人列明的信用卡賬戶支取此保險所應繳之保費。	
_____ Cardholder's Signature 持卡人簽署	_____/_____/_____ Date 日期 (DD / MM / YYYY)

*The payer and the policyholder must be the same person. No third party payment is accepted. 付款人及保單持有人必須為同一人。第三者付款將不獲接納。

Levy collected by the Insurance Authority will be imposed on the relevant policy at the applicable rate. For further information, please visit www.fwd.com.hk or contact: (852) 3123 3123.

保險業監督處將按照適用之徵費率就相關保單收取徵費。如有任何查詢，請瀏覽 www.fwd.com.hk 或致電：(852) 3123 3123。

Personal Information Collection Statement ("PICS")

1. From time to time, it is necessary for you to supply FWD General Insurance Company Limited (the "Company") or agents and representatives acting on its behalf 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 dependents, beneficiaries, 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").
 5. 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) developing insurance and other financial services and products;
 - (iv) developing and maintaining credit and risk related models;
 - (v) processing payment instructions;
 - (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, analysing, investigating, processing, assessing, determining, responding to, resolving or settling such claims detecting and preventing fraud (whether or not relating to the policy issued in respect of this application);
 - (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.
 6. Your Personal Data will be kept confidential, but to facilitate the purposes set out in paragraph 5 above, 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, organizations that consolidate claims and underwriting information for the insurance industry, fraud prevention organizations, other insurance companies (whether directly or through fraud prevention organizations or other persons named in this paragraphs), the police and databases or registers (and their operators) used by the insurance industry to analyze and check information provided against existing information, 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).
 7. 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.
 8. The Company is only allowed to (i) use Your Personal Data in direct marketing; or (ii) provide Your Personal Data to another person or company for its use in direct marketing, if you provide your consent or do not object in writing.
 9. In connection with direct marketing, the Company intends:
 - (i) to use your name, contact details (such as phone number, email address and mailing address), gender, services and products portfolio information, financial background and demographic data held by the Company from time to time in direct marketing to market the following classes of services and products offered by the Company, other members of the Group and/or Our Business Partners (being providers of the product and services described below) from time to time:
 - a. insurance services and products;
 - b. wealth management services and products;
 - c. pensions, investments, brokering, financial advisory, credit and other financial services and products;
 - d. health-check and wellness services and products;
 - e. media, entertainment and telecommunications services;
 - f. reward, loyalty or privileges programmes and related services and products; and
 - g. donations and contributions for charitable and/or non-profit making purposes; and
 - (ii) to provide your name and contact details (such as phone number, email address and mailing address), gender, services and products portfolio information, financial background and demographic data to FWD Life Insurance Company (Bermuda) Limited or any members of the Group and/or Our Business Partners for their use in direct marketing the classes of services and products described in paragraph 9(i) above (including, in the case of Our Business Partners, for money or other commercial benefit).
- The Company intends to send you marketing communications or materials and use Your Personal Data in accordance with paragraphs 8 & 9 above. If you do NOT agree to receive such marketing communications or the Company's intended use of Your Personal Data, you may write to the Corporate Data Protection Officer of the Company at the address below to opt out from direct marketing at any time:
- Corporate Data Protection Officer
FWD General Insurance Company Limited
8th Floor, FWD Financial Centre,
308 Des Voeux Road Central
Hong Kong
10. To facilitate the purposes set out in paragraphs 5 and 9 above, the Company may transfer, disclose, grant access to or share Your Personal Data with the parties set out in paragraphs 6 and 9(ii) 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.
 11. 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.
 12. 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 above. Should you have any queries, please do not hesitate to call our Customer Service Hotline on 3123 3123.
 13. In case of discrepancies between the English and Chinese versions of this PICS, the English version shall apply and prevail.
 14. The Company reserves the right, at any time effective upon notice to you, to add to, change, update or modify this PICS.

收集個人資料聲明

- 閣下需要不時向富衛保險有限公司（「本公司」）或本公司的代理及代表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養人、受益人、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。
- 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；
 - 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；
 - 處理付款指示；
 - 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、分析、調查、處理、評核、決定、回應、解決或和解有關申索以及偵測和防止欺詐行為（無論是否與就此申請而發出的保單有關）所需的目的；
 - 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。
- 閣下的個人資料將被保密但為達成上文第5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、整合保險業申索和承保資料的組織、防欺詐組織、其他保險公司（無論是直接地，或是通過防欺詐組織或本段中指名的其他人）士、警察、和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）、法律顧問及／或其他專業顧問；
 - 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有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。
- 本公司只可在閣下作出書面同意或不反對的情況下 (i) 使用閣下的個人資料作直接促銷用途，或 (ii) 將閣下的個人資料提供予其他人士或公司作其直接促銷用途。

- 就直接促銷而言，本公司擬：
 - 使用本公司不時持有的閣下姓名、聯絡資料（例如：電話號碼、電郵地址、郵寄地址）、性別、服務及產品組合資料、財務背景及人口統計資料作直接促銷用途；銷售本公司、本集團其他成員及／或本公司之業務夥伴（即以下產品及服務的供應商）不時提供的下列服務及產品：
 - 保險服務及產品；
 - 財富管理服務及產品；
 - 退休金、投資、經紀、財務諮詢、信貸及其他金融服務及產品；
 - 健康檢查及健康服務及產品；
 - 媒體、娛樂及電信服務；
 - 獎賞、客戶忠誠或優惠計劃及相關服務及產品；及
 - 為慈善及／或非牟利用途的捐款及捐贈。
 - 將閣下的姓名及聯絡資料（例如：電話號碼、電郵地址、郵寄地址）、性別、服務及產品組合資料、財務背景及人口統計資料提供予富衛人壽保險（百慕達）有限公司及本集團任何成員及／或本公司之業務夥伴，讓其用於直接促銷上文第9(i)段所載的服務或產品（如為業務夥伴，則包括作金錢或其他商業利益）。

本公司有意向閣下送交推廣訊息或資料及根據上述第8及第9段使用閣下的個人資料。如閣下不同意接收有關的推廣訊息或本公司擬對閣下的個人資料的使用，閣下可於任何時間致函本公司的資料保護主任並將函件郵寄至以下地址，藉以行使閣下不同意此項安排的權利：

富衛保險有限公司
香港德輔道中308號
富衛金融中心8樓

- 為達成上文第5及第9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6及第9(ii)段所列出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》大致相同或作用同一用途的資料保護法。
- 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遵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上述地址。如閣下有任何疑問，敬請致電本公司之客戶服務熱線3123 3123。
- 中英文本如有歧異，概以英文本為準。
- 本公司保留隨時增補、更改、更新及修訂本聲明之權利，並任何更改將於發出通知時起生效。

2021年2月

Important Notes

The Applicant (i.e. You are) is required to disclose all material facts which you know FWD General Insurance Company Limited (the “Company”) as an insurer would regard them as likely to influence the acceptance and assessment of this proposal. If you are in doubt whether certain facts are material you should disclose them. We recommend you to keep a record (including a copy of completed proposal) for your future reference of all information given. Providing correct answers and making sure we are informed is for your own protection, as failure to disclose such information may mean that your policy will not provide with the cover you require and may even invalidate the policy altogether.

重要事項

申請人(即你)必須提供所有可能影響富衛保險有限公司(「本公司」)接受承保及評估之重要事實，如未能確定這項事實是否具有實質性的關係，應該將該等事實填報，我們建議你將有關的資料(包括此投保書副本作紀錄)，以備日後作參考之用。為確保你的利益，你應如實呈報所有有關資料，否則此保單將可能無法提供你所需的保障，甚至可能會導致此保單無效。

Declaration
聲明

I/WE HEREBY DECLARE AND AGREE THAT:

1. The information and particulars provided on this application form are accurate, true and complete and are given to the best of my knowledge and belief. I/We have not withheld any material information and accept that this application and declaration shall form the basis of the contract between the Company and me/us. I hereby acknowledge that failure to supply true and accurate answers to this application or inform the Company of all material information about this application may render the the Company unable to accept or process this application or the insurance policy void.
2. The insurance coverage applied for shall only take effect when this application has been accepted by the Company and I/We have paid the required premium.
3. (If applicable) I/We have obtained the authorisation from the insured person to provide the information requested in this application and to deal with and receive or request information concerning the insured person from the Company in relation to any matters arising from this application. I/We further acknowledge that the insured person has been explicitly informed and agrees that his/her personal data will be transferred to the Company for the purpose of this application and has been informed of his/ her rights under the Personal Data (Privacy) Ordinance.
4. I/we have read, understood and accepted the PICS.
- The Company intends to send you marketing communications or materials and use your Personal Data in accordance with paragraphs 8 & 9 of the PICS. If you do not agree to receive such marketing communications or the Company's intended use of your Personal Data, please tick below to exercise your right to opt-out.
- ☐ Opt-out marketing communications or materials and the Company's intended use of my personal data

Where the Applicant(s) has/have an Insurance Broker:

I/We understand, acknowledge and agree that, as a result of the purchasing and taking up the policy by me/us, with the policy issued by the Company, the Company will pay my/our authorized insurance broker commission during the continuance of the policy including renewals, for arranging the said policy. (If applicable) Where the applicant is a body corporate, I/We am/are the authorized person(s) signing on behalf of the applicant and I/We further confirm to the Company that I/We am/are authorized to do so.

I/We understand that the above agreement is necessary for the Company to proceed with the application.

本人 / 我們，謹此聲明並同意：

1. 於此申請表格內所提供的資料及細節均是準確無誤，真實及為事實之全部，並且是盡本人 / 我們所知及所信而作答的。本人 / 我們並沒有隱瞞任何重要資料及同意此申請表格之內容及聲明將成為本公司及本人 / 我們的保險合約之承保根據。本人 / 我們在此確認，如未能提供真實及準確無誤之資料或通知本公司任何有關此保險申請之重要資料，將可能導致本公司不能接受或處理此保險申請或令本保單失效。
2. 保障一概必須在本申請獲本公司接納後及本人 / 我們已繳交應付保費後始可生效。
3. (如適用) 本人 / 我們已獲受保人授權提供本申請所需之一切資料，並就本申請之相關事宜，與本公司進行交涉，並向其接收或索取與受保人有關之資料。本人 / 我們並確認受保人已獲明確通知及同意，其個人資料將會轉介予本公司作辦理本申請之用，亦已獲通知其在個人資料（私隱）條例下所享有的權利。
4. 本人 / 我們已閱讀、明白及接受收集個人資料聲明。

本公司有意向閣下送交推廣訊息或資料及根據收集個人資料聲明第8及第9段使用閣下的個人資料。如閣下不同意接收有關的推廣訊息或本公司擬對閣下的個人資料的使用，請在以下有關方格內加上劃(√)號。

☐ 拒絕接收推廣訊息或資料及本公司擬對本人的個人資料的使用

如申請人有保險經紀：

本人 / 我們明白、確知及同意，本公司會就本人 / 我們購買及接受其簽發的保單，於保單有效期內（包括續保期）向負責替本人 / 我們安排有關保單的獲授權保險經紀支付佣金。（如適用）假如申請人為法人團體，本人 / 我們為代表申請人簽署的獲授權人員並向本公司確認本人 / 我們已獲該法人團體授權。

本人 / 我們亦明白本公司必須取得申請人的上述同意，才可以處理其保險申請。

Signature of Applicant / Individual to whom the PICS is given
申請人 / 獲發收集個人資料聲明人士簽署 _____

Name of Agent / Broker/ Technical Representative
代理人 / 經紀 / 業務代表 _____

Date (DD / MM / YYYY)
日期 (日 / 月 / 年) _____ / _____ / _____

Account Code
賬戶號碼 _____

Should there be any discrepancy between the English and the Chinese Versions of this application form, the English Version shall apply and prevail. 本申請表格的英文版本如有差異，以英文版本為準。

FWD in Hong Kong

FWD spans Hong Kong, Macau, Thailand, Indonesia, the Philippines, Singapore, Vietnam, Japan and Malaysia. In Hong Kong, the FWD life insurance and general insurance businesses have been assigned strong financial strength ratings by international rating agencies, and offer customers life, medical insurance, general insurance, employee benefits, and financial planning.

FWD is focused on creating fresh customer experiences and making the insurance journey simpler, faster and smoother, with innovative propositions, and easy-to-understand and relevant products, supported by digital technology. Through this customer-led approach, FWD aims to become a leading pan-Asian insurer with a vision to change the way people feel about insurance. Established in Asia in 2013 with a trailblazer mentality, FWD is the primary insurance business of investment group, Pacific Century Group.

FWD in Hong Kong offers*

Life Insurance	Products range from individual life insurance, medical and critical illness protection plans, savings plans, educational reserves for children, legacy, retirement plans, investment-linked insurance, and more.
General Insurance	A wide spectrum of insurance solutions for individual and corporate customers, including household, motor, personal accident, individual medical, property, travel, working holiday, overseas study, golf, marine cargo, pet, business pack, office, and more.
Employee Benefits	An array of group life and health insurances are available to protect and retain corporations' invaluable assets – employees. Group life solutions cover members for total and permanent disablement, death, accidental death and dismemberment benefits and more, while group health solutions protect members with medical insurance and long-term disability income etc.
Financial Planning	Professional financial advisers help customers analyse their financial situations and propose tailored plans to build and boost customers' wealth and investment portfolios.

* Life Insurance, employee benefits and financial planning are offered by FWD Life Insurance Company (Bermuda) Limited and General Insurance is offered by FWD General Insurance Company Limited

富衛在香港

富衛業務遍佈香港、澳門、泰國、印尼、菲律賓、新加坡、越南、日本及馬來西亞。在香港，富衛的人壽保險及一般保險業務均獲國際評級機構授予卓越的財務實力評級，並提供人壽及醫療保險、一般保險、僱員福利，及財務策劃服務。

富衛專注為客戶創造嶄新體驗，利用數碼科技，提供簡單、易明和貼心的創新產品，使整個保險體驗更簡便、快捷及順暢。富衛秉持以客為先的服務理念及方針，矢志成為泛亞洲區領先的保險公司，創造保險新體驗。富衛於2013年在亞洲成立，是投資集團「盈科拓展集團」轄下的主要保險業務。

富衛於香港提供*

人壽保險	產品包括個人人壽保險、醫療及危疾保障計劃、儲蓄計劃、子女教育儲備、遺產傳承規劃、退休計劃、投資相連保險等。
一般保險	為個人及企業客戶提供多元化的保險方案，包括家居、汽車、個人意外、個人醫療、財產、旅遊、工作假期、海外升學、高爾夫球、貨運、寵物、辦公室、工商業綜合保險等。
僱員福利	一系列團體人壽及健康保險服務，為企業最寶貴的資產——僱員——提供全面保障。團體人壽方案提供完全及永久傷殘、身故、意外身故及傷殘賠償等；而團體健康方案則包括醫療及長期傷殘保險等。
財務策劃	專業理財顧問協助客戶分析財務狀況，度身制定合適的財富增值及投資方案。

* 富衛人壽保險(百慕達)有限公司提供人壽保險、僱員福利及財務策劃服務；富衛保險有限公司則提供一般保險。