

Underwriter 承保公司：

Insurance Agent 保險代理：



# GENERALI

Assicurazioni Generali S.p.A. - Hong Kong Branch  
忠意保險有限公司 (香港分行)  
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# 祥昇 保險代理有限公司

Peaceful Insurance Agency Limited

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## 海外家傭綜合保險 Overseas Domestic Helper Insurance 轉換家傭申請書 Application for Change of Domestic Helper

保單號碼

Policy Number : \_\_\_\_\_

投保人名稱

Proposer's Name : \_\_\_\_\_

現時家傭名稱

Current Domestic Helper's Name : \_\_\_\_\_

新家傭名稱

New Domestic Helper's Name : \_\_\_\_\_

護照號碼

Passport Number : \_\_\_\_\_

身份證號碼

I.D. Card No. : \_\_\_\_\_

國籍

Nationality : \_\_\_\_\_

性別

Sex : Male  Female

出生日期

Date of Birth : \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(DD/MM/YYYY)

每月工資

Monthly Salary : \_\_\_\_\_

聯絡電話

Tel No. : \_\_\_\_\_

生效日期

Effective Date : \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(DD/MM/YYYY)

現時僱傭公司名稱

Current Employment Agency : \_\_\_\_\_

### Declaration & Authorisation ("Declaration") 聲明及授權 (「聲明」)

- I/We declare that I/we have never had my/our Overseas Domestic Helper Insurance declined, cancelled or refused to renew by Assicurazioni Generali S.p.A. - Hong Kong Branch ("Generali Hong Kong").  
本人 / 我們聲明本人 / 我們之海外家傭綜合從未有被忠意保險有限公司 (香港分行) (「忠意香港」) 拒絕投保、取消或拒絕續保。
- I/We hereby declare and agree on behalf of myself and/or anyone who may have any interest in any insurance on this application that all statements and information provided in this Application for Change of Domestic Helper ("Application Form") are to the best of my/our knowledge and belief complete and true, and all such statements and information shall form the basis and become a part of the policy, and understand that if any such statement or information is incomplete or untrue, the coverage provided under the policy may be void. I/We hereby declare that no information (whether or not it is covered by the questions in this application) which may influence Generali Hong Kong's assessment and acceptance of this application has been withheld and understand that if I/we am/are uncertain as to whether or not a particular information is material, the information should be disclosed.  
本人 / 我們謹代表自己及 / 或可能擁有此轉換家傭申請書 (「此申請書」) 所列保險權益的任何人作出聲明及同意, 此申請書內所提供之一切陳述及資料, 就本人 / 我們所知所信, 均為事實之全部並確實無訛, 及一切該等陳述及資料, 將成為發出保單的根據, 並作為保單一部份, 並且明白若資料錯誤或不詳盡, 可能導致保單之保障無效。本人 / 我們在此聲明, 並無隱瞞任何足以影響忠意香港衡量應否接受此申請的事實 (不論是否已包括在此申請書的問題內) 及假如未能確定某些資料是否重要, 則應將有關事實予以披露。
- I/We on behalf of myself and other persons to be insured, hereby authorize any Registered Medical Practitioner, hospital, clinic, insurance company or other organization, institution or person, who/which has any records or knowledge of me/us or my/our health, to divulge to Generali Hong Kong or its authorized representatives or any reinsurers or any tribunal any information he or she or it may have with regard to me/us for the purpose of evaluating this application and any claim arising from the policy.  
本人 / 我們謹此代表自己及各受保人, 授權任何註冊醫生、醫院、診所、保險公司及機構、其他組織或人士, 凡知道或擁有有關本人 / 我們或本人 / 我們健康狀況之資料者, 均可將該等資料提供給忠意香港或其授權代表或再保險公司或仲裁機構以作評核本申請及其後與保單有關的賠償事宜之用。
- I/We acknowledge Generali Hong Kong to collect, use, store, disclose, transfer and otherwise process my/our personal data in accordance with the terms of the Personal Information Collection Statement issued by Generali Hong Kong (Regarding to Generali Hong Kong's Personal Information Collection Statement and Privacy Policy, please visit the following links: [https://www.generali.com.hk/EN\\_US/personal\\_information](https://www.generali.com.hk/EN_US/personal_information) and [https://www.generali.com.hk/EN\\_US/privacy\\_security\\_cookies](https://www.generali.com.hk/EN_US/privacy_security_cookies)).  
本人 / 我們確認忠意香港依照忠意香港發出的收集個人資料聲明及隱私保護條款, 請瀏覽: [https://www.generali.com.hk/ZH\\_HK/personal\\_information](https://www.generali.com.hk/ZH_HK/personal_information) 及 [https://www.generali.com.hk/ZH\\_HK/privacy\\_security\\_cookies](https://www.generali.com.hk/ZH_HK/privacy_security_cookies)
- I/We agree that this Application Form and the Declaration shall be the basis of the contract between me/us and Generali Hong Kong and shall be deemed to be incorporated in such contract.  
本人 / 我們同意此申請書及有關聲明, 將成為本人 / 我們與忠意香港之間所簽署合約之全部。
- I/We, understand, acknowledge and agree that, as a result of the applicant purchasing and taking up the policy to be issued by Generali Hong Kong, Generali Hong Kong will pay Peaceful Insurance Agency Limited commission during the continuance of the policy including renewals, for arranging the said policy. Where the applicant is a body corporate, the authorized person who signs on behalf of the applicant further confirms to Generali Hong Kong that he or she is authorized to do so.  
本人 / 我們明白、確知及同意, 忠意香港會就申請人購買及接受其簽發的保單, 於保單有效期內 (包括續保期) 向負責安排有關保單的祥昇保險代理有限公司支付佣金。假如申請人為法人團體, 代表申請人簽署的獲授權人員須向忠意香港確認他 / 她已獲該法人團體授權。
- I/We further understand that the above agreement is necessary for Generali Hong Kong to proceed with the application.  
本人 / 我們亦明白忠意香港必須取得本人 / 我們的同意, 才可以處理其保險申請。
- I confirm that I have full authority from each of the persons to be insured to provide information, make the above declarations and give the authorisation set out in this Application Form on behalf of each of the persons to be insured.  
本人確認, 本人擁有每位受保人的完全授權, 謹代表每位受保人依照此申請書的條款提供資料, 作出以上聲明及作出授權。

日期 Date (DD/MM/YYYY)

投保人簽署 Proposer's Signature

#### Disclaimer - Insurance Service 保險服務 責任聲明

This Employment Agency only provides service in forwarding insurance application and/or premium to Peaceful Insurance Agency Ltd., we will not give advices, warranties or promises whether expressly or implicitly on insurance products, and assumes no responsibility for the coverage and related services of any insurance product. Customers are strongly suggested to make enquiry, if any, directly to Peaceful Insurance Agency Ltd. for insurance coverage, terms and conditions.

本僱傭公司為客戶提供的購買保險服務, 只限於替客戶向祥昇保險代理有限公司遞交投保資料及/或保費之服務, 並不會就保險產品向客戶提供意見或給予任何明示或暗示的保證或承諾, 亦不會就保險產品的保障範圍及相關服務承擔任何責任。本公司建議各客戶在選購保險時, 如有任何疑問, 應直接致電祥昇保險代理有限公司了解保險產品內容和有關的條款及細則。

Employment Agency  
僱傭公司

Code: