Motor Insurance Application Form 汽車保険投保書 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「✓」陰。

(I) Details of Applicant 申請人資料		
Full Name of Applicant 申請人姓名:		
	□ Mr. 先生	□ Miss 小姐
	□ Ms.女士	□ Co. 公司
Date of Birth (DD/MM/YY) 出生日期(日	/月/年):	
DD日Y	Y年	
HKID Card/B.R.No. 香港身份證/商業登	記證號碼:	
Contact No. 聯絡電話:		
Email Address 電子郵件:		
Business or Profession 行業或職業:		
Correspondence Address 通訊地址:		
Flat 室 , Floor 樓 , Block 座 _ Building 大廈名稱: Street 街道: HK 香港 / Kowloon 九龍 / NT新界		
Period of Insurance Required 要求保單	生效日期:	
From由DD日MM月_	YY年	
To 至DD日MM月_	YY年	
Cover Required 保險類別		
□Comprehensive 綜合保險 □T	hird Parties 第三	者保險
(III) Payment Method 付款方法		
Cheque should be crossed and made r (Hong Kong) Company Limited" 劃線支票抬頭請寫:「保特保險(香港)有阪 □ Cheque No. 支票 □ Visa □ Maste Credit Card No. 信用卡號碼 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	松司」 erCard L L L Card	ch Insurance B Expiry Date 卡有效期至
	L	
I here by authorize Bolttech Insurance charge my credit card account specifie 本人茲授權保特保險(香港)有限公司從本 缴之保費	ed for this insura	nce.
 Cardholder's Signature 持卡人簽署	Da	 te 日期

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。

Motor Insurance 汽車保險



II) Particulars of Car to be Insured	投保	 气車詳情						
legistration No. 巨牌號碼:	Mak	ers Name & Chassis No. 牌子及車身底盤號碼		Engine Capacity c.c / Tonnes 汽缸容積/噸: Year of Manufacture 製造年份:		nufacture		
ype of Body 車型:		oser's Estimate of Present Value (inclu ssories) 市價(連零件在內):	ıding	Date of Purchase by Proposer 購買日期: Seating Capacity (inclu 座位數量(連駕駛人在內				
□ Automatic 自動(自動波) □ Manual 手動(棍波) □ Automatic & Manual 兼具自動 b手動性能(半自動波)	□С	of Door 車門數量 oupe 雙門		Anti-Theft Alarm Syste 防盜系統(型號/價格): ack 五門掲背			m (Model / Value)	
「 compulsory excess applies to all claims for accidental damage to your car whilst it is being driven by anyone other than a driver who has been accepted by the Company and is specially named in the policy. Please complete the following for each of the drivers you wish to be named. 如駕駛人並未列名於下,投保人須負責額外之汽車意外損壞賠額。 情列出駕駛人名單。								
full Name 姓名:		(Proposer 投保人:)						
Relationship with Proposer 與被保人關係:		Self 本人						
Occupation 鐵業:								
Date of Birth (DD/MM/YY) 出 主日期 (日/月/年):								
香港身份證號碼:								
n which year did the driver(s) nar jet a full driving license in Hong Kong? (e.g. 2015) 駕駛人取得香港 駕駛執照的年份? (例: 2015年)								
NOTE: The premium for comprehensive terms relates to TWO named drivers only. The Policy may be extended to provide for up to TWO additional drivers a maximum of 4 named drivers in all) subject to payment of an additional premium at a rate of 10% at the total premium for each additional driver. 主意: 綜合保險保費只包括兩名記名駕駛人士,記名駕駛人可增多兩名即記名駕駛人共四名,每增多一名所須加付保費為百份之十。								
Is the car owned by, or registered							□ Yes 是 □ No 否	
Is a Hire Purchase Company interested? If "Yes" , please provide name of Hire Purchase Company. 現時是否仍有任何 "分期付款" 合約? 如 "有" , 請提供財務公司 名稱						□ Yes 是 □ No 否		
	e best	of your knowledge will drive 該汽車駕駛.	 人中					
						□ Yes 是 □ No 否		
b. been involved in any motor accident or loss within the last 3 years? 在過去三年內曾否牽涉交通意外?							□ Yes 是 □ No 否	
c. been refused motor insurance, renewal or had any special terms or conditions imposed by any insurer? 在過去三年內曾否被拒絕汽車投保、續保,或投保時須接受任何特別條件?						□ Yes 是 □ No 否		
						□ Yes 是 □ No 否		
e. suffered or is suffering from any defective vision or hearing, fits or any other physical defects or infirmity? 是否患有不良視力或聽覺、羊癇症、 其他疾病或其他缺陷?						□ Yes 是 □ No 否		
Has the Motor Vehicle been modified in any way from manufacturer's standard specification? 上述投保之汽車曾否經過任何改裝或裝置非原裝標準機件?						□ Yes 是 □ No 否		
Have you held or do you now hold a motor insurance policy? 現時是否有任何汽車保險?)					□ Yes 是 □ No 否			
Are you entitled to a "No Claim Discount"? If "Yes", please provide proof of "No Claim Discount" (e.g. your last renewal notice) 是否持有「無索償折扣優惠」?如 "有",請附有關證明文件(如續保通知書)					□ Yes 是 □ No 否			
Name of the Company 保險公司名		Registration Number 車牌號碼	Policy No. 保單號	碼	Expiry Date 滿約	1日期	NCD 無索償	折扣
Purpose of use: Will the car車輛用		 車輌						
or Private Car(私家車)		1 112						
. ,	tic and	d pleasure purposes and for your busines:	s or profession?只月	用於私人或投保人對	業務上用途?			□ Yes 是 □ No 否
b. be used for hire or reward racing pace-making reliability trial speed testing or for any purpose in connection with the Motor Trade?用於出租、賽事或汽車行業?						□ Yes 是 □ No 否		
c. the carriage of goods for hire or reward ? 租賃載負用途?							□ Yes 是 □ No 否	
or Commercial Vehicle(商用車)								
a. the carriage of passengers for hire or reward? 租賃載客用途?						☐ Yes 是 ☐ No 否		
b. the carriage of explosive, inflammable or volatile nature? 裝載易燃 爆炸或危險物品? f answer is "Yes" for the above question(s), please give full details except for question 5 & 7a 如答「是」請列細節,問題 5 及 7a 除外						□ Yes 是 □ No 否 □ Yes 是 □ No 否		

Declaration 聲明

I/we hereby declare and agree that:

- 1. I/We have read and understood the product brochure and the terms and/or conditions of the policy provisions of the product in this application.
- 2. 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 Bolttech Insurance (Hong Kong) Company Limited ("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 Company unable to accept or process this application or the insurance policy void.
- 3. 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.
- 4. I/We have read, understood and accepted the Personal Information Collection Statement of the Company ("PICS"). By signing below, I/We confirm this application and agree that the Company may use and disclose all personal data about me/us that the Company currently or subsequently hold for the purposes as set out in the PICS, and I understand I can scan the QR code below for review of the PICS or else I can request a copy of the PICS by calling the Company's Customer Service Hotline at 3123 3344.



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- If you do not agree to the use and provision of your personal data for direct marketing as set out in paragraphs 8 and 9 of the PICS, please tick the box below and we will not use your personal data for direct marketing.
 - □ I/We do not agree with the use and provision of my/our personal data for direct marketing purposes and do not wish to receive any promotional and direct marketing materials.
- 6. (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 PICS (see paragraph 4 above).
- 7. 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.



Sun Flower Insurance Brokers Limited Placing through Sun Flower Insurance Agency Limited

Room 1105-08, Hing Yip Commercial Centre, 282 Des Voeux Road Central, Hong Kong
Tel: 2521 1881 Fax: 2521 1919 Email: Yip @sunflowergroup.com.hk www.sunflowerVIP.com
Thank you for considering Sun Flower to be one of your selected intermediaries.
We are pleased to get in touch should you have any enquiry regarding the captioned insurance.

本人/我們,謹此聲明並同意:

- 1. 本人/我們已參閱並明白有關此申請之產品小冊子及保單條款。
- 2. 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保持保險(香港)有限公司("本公司")及本人/我們之保險合約之承保根據。本人/我們在此確認,如末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。
- 3. 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。
- 4. 本人/我們已閱讀、明白及接受本公司的收集個人資料聲明。透過以下簽名,本人/ 我們確認此申請並同意本公司可根據收集個人資料聲明列出之目的使用及披露本 公司目前或將來持有的關於本人/我們的所有個人資料,並理解本人可以掃描以下 二維碼查看本公司的收集個人資料聲明,或可致電本公司的客戶服務熱線3123 3344索取收集個人資料聲明副本。



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- 5. 如閣下不同意本公司根據收集個人資料聲明第8和9段使用及提供本人的個人資料以作直銷目的,請在以下有關方格內加上剔號。
 - □ 本人/我們不同意本公司使用及提供本人的個人資料以作直銷目的,並不願意 接收任何推廣訊息或直銷資訊。
- 6. (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,獲誦知其在收集個人資料聲明下所享有的權利(見上文第4段)。
- 7. 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。

Statement of the Company 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

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 Personal Information Collection

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

Motor Insurance 汽車保險 Motor Insurance 汽車保險