



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

Change Form PAR/ Fire/ Office Package/ Business Package

Cover	<input type="checkbox"/> Fire <input type="checkbox"/> Property All Risks <input type="checkbox"/> Office Package <input type="checkbox"/> Business Package <input type="checkbox"/> Shop Package		
New Risk Location	Full Address: (Please provide any specific details about the property or premises)		
Property Details:			
Type Of Building <input type="checkbox"/> Multi-Storey Building <input type="checkbox"/> Village House/ Detached House <input type="checkbox"/> Commercial Building <input type="checkbox"/> Industrial Building <input type="checkbox"/> Others			
Building Construction			
<input type="checkbox"/> External walls to be of brickwork, masonry, concrete, reinforced concrete, hollow blocks, solid blocks, slabs, structural iron and steel work	<input type="checkbox"/> External walls to be of metal or asbestos cement sheeting	<input type="checkbox"/> External walls incorporate coatings of bituminous material, provided the framework supporting the sheets consists of non-combustible materials	<input type="checkbox"/> Open Storage
<input type="checkbox"/> Roofs to be of non-combustible materials	<input type="checkbox"/> Roofs of metal sheeting which incorporate coatings of bituminous materials	<input type="checkbox"/> Roofs to be in accordance with massive construction	<input type="checkbox"/> Structure other than specified
Occupancy Type <input type="checkbox"/> Dwelling <input type="checkbox"/> Office <input type="checkbox"/> Commercial/ Retail <input type="checkbox"/> Factory/ Godown	Square Footage	Year of built	Recent Renovations or Upgrades:
Fire Protection Systems (If yes, please provide details) <input type="checkbox"/> Smoke Detectors <input type="checkbox"/> Heat Detectors <input type="checkbox"/> Fire Alarms <input type="checkbox"/> Other Detection Systems <input type="checkbox"/> Fire Sprinklers Systems <input type="checkbox"/> Fire Extinguishers <input type="checkbox"/> Other Suppression Systems <input type="checkbox"/> Emergency Lighting Systems <input type="checkbox"/> Fire Doors <input type="checkbox"/> Fire-Rated Walls/ Ceilings/ Floors		Security Measures (If yes, please provide details) <input type="checkbox"/> Security doors <input type="checkbox"/> Key card systems <input type="checkbox"/> Biometric scanners <input type="checkbox"/> Security guards <input type="checkbox"/> Security lighting <input type="checkbox"/> Visitor access protocols <input type="checkbox"/> Alarm monitoring services	
Business Operations			
Nature of Business Operations at the New Location	Any changes in activities or processes that may impact the risk profile	Loss History (any previous insurance claims related to the new risk location)	Supporting Documentation (e.g. lease agreement/ property inspections/ risk assessments/ pictures/ virtual tour)
Sum Insured: <input type="checkbox"/> Building including Landlord's Fixtures & Fittings (but excluding drains & foundations) <input type="checkbox"/> Contents <input type="checkbox"/> Furniture, Fixtures & Fittings <input type="checkbox"/> Goods & Merchandise <input type="checkbox"/> Stocks held in trust/ on commission <input type="checkbox"/> Supplies & Inventory <input type="checkbox"/> Machinery <input type="checkbox"/> Portable Equipment <input type="checkbox"/> Specialized Equipment <input type="checkbox"/> Artwork <input type="checkbox"/> Valuable documents <input type="checkbox"/> Money <input type="checkbox"/> Fixed Glass <input type="checkbox"/> Signboards <input type="checkbox"/> Doors, Gates, Locks <input type="checkbox"/> Outdoor Fixtures <input type="checkbox"/> Contents Temporarily Removed <input type="checkbox"/> Personal Effects <input type="checkbox"/> Others			Business Interruption Coverage <input type="checkbox"/> Increased Cost of Working <input type="checkbox"/> Loss of Gross Income for the next 12 months

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To: Insurance Company/ Underwriters

Please review and verify the information provided by our client for the changes to be made. While the client has submitted various details and documentation, not all information has been independently verified, and we believe it is crucial to conduct your own risk assessment and underwriting process to ensure accuracy and completeness.

The client's application includes important data related to their property, assets, and coverage requirements. However due to the nature of insurance underwriting, it is essential for you to thoroughly assess the risks involved and verify the information provided before finalizing the policy terms and coverage.

We kindly ask that you review the client's submission and conduct your own assessment based on the underwriting guidelines and risk factors relevant to the particular case. If additional information or documentation is required for a comprehensive evaluation, please do not hesitate to reach out to us. We are more than willing to provide any necessary details or clarification to support your underwriting process.

To: Policyholder Regarding Disclosure of Material Facts

As a valued policyholder, we would like to remind you of the critical importance of providing complete and accurate information when disclosing material facts related to the risks covered under your insurance policy.

Ensuring full transparency and disclosure of all relevant details, particularly concerning the risk location and other pertinent information, is essential for the underwriting process. Failure to disclose such information may have implications on the underwriting decision and the extent of coverage available to you in the event of a claim.

We understand the significance of your role in providing us with the necessary information to assess the risks effectively and tailor the coverage to meet your specific needs. Your cooperation in disclosing all material facts is pivotal in maintaining the integrity of your insurance policy and ensuring that you are adequately protected against potential risks.

Should you require any assistance or clarification regarding the information that should be disclosed, please do not hesitate to contact us or your Technical Representative. Our team is here to support you in understanding the importance of full disclosure and its impact on your insurance coverage.

Thank you for your attention to this matter.