



Tugu Insurance Company Limited 德高保險有限公司

(Incorporated in Hong Kong) (在香港註冊成立)

28/F, United Asia Finance Centre, 333 Lockhart Road, Wanchai, Hong Kong Tel: (852)2824-2939 Fax: (852)2824-3070

Website 網址: www.tuguhk.com E-mail 電郵: info@tuguhk.com

僱員賠償保險投保書

Employees' Compensation Insurance Proposal Form

經紀業務適用
For broker business

Name of proposer in full 投保人全名 _____

Correspondence address 通訊地址 _____

_____ Email address 電郵地址: _____

Contact no. 聯絡電話: _____ Fax no. 傳真號碼: _____

Period of insurance required 要求保單生效日期:

From 由: ____ DD日/ ____ MM月/ ____ YYYY年 To 至: ____ DD日/ ____ MM月/ ____ YYYY年

Employer's details 僱主資料

1. Name of employer in full 僱主全名 (if different from name of proposer above 如與投保人不同) _____

Business registration no. 商業登記號碼 _____

(Please provide a copy of valid business registration document 請提供有效商業登記文件之副本)

2. Place of employment 僱用工作地點 (if different from correspondence address above 如與通訊地址不同) _____

Details of employer's business activities/Profession 僱主之業務 / 行業資料

1. Please provide a general description of the employer's business activities/profession.
請詳細說明僱主之業務活動/職業提供。 _____

2. How long has the business been established?
業務成立年期 _____ Year(s) 年

3. Does any of the work carry out by the employers involve:
僱主所從事的工作是否涉及:

a) any work on ships, chemical works, off-shore structures, oil or gas refineries?

任何於船舶、化學廠、離岸建築物、石油或天然氣精煉廠進行的工作?

Yes 是 ☐ No 否 ☐

If yes, please give nature of work and no. of employee(s) involved.

如是，請說明有關工作性質和所涉及的員工人數。 _____

b) any work outside Hong Kong?

任何在香港以外的地方工作?

Yes 是 ☐ No 否 ☐

If yes, please give nature of work and no. of employee(s) involved.

如是，請說明有關工作性質和所涉及的員工人數。 _____

c) work at a height above 10 metres or underground?

在高度10米以上或於地底進行的工作?

Yes 是 ☐ No 否 ☐

If yes, please give nature of work and no. of employee(s) involved.

如是，請說明有關工作性質和所涉及的員工人數。 _____

d) use, handle, store or transport any hazardous substances such as toxic chemicals, explosive substances, gases, asbestos, radioactive substance?

使用、處理、貯存或運送任何危險物質，如有毒化學品、爆炸性物質、氣體、石棉、放射性物質? Yes 是 ☐ No 否 ☐

If yes, please give nature of work and no. of employee(s) involved.

如是，請說明有關工作性質和所涉及的員工人數。 _____

4. Does the employer 僱主有否
a) hire any self-employed persons for their business? Yes 是 ☐ No 否 ☐
為其業務聘用任何自僱人士?
b) hire any part-time employees? Yes 是 ☐ No 否 ☐
聘用任何兼職員工?
c) plan to increase the no. of the employees substantially or add different occupations in a short period of time?計劃在短時間內大幅增聘員工或增設不同職務? Yes 是 ☐ No 否 ☐

d) 上列僱員在過去十二個月內支付薪金,工資及其它收益為: The total amount of salaries wages and other earnings paid by me/us to the above mentioned employees during the past twelve months was:	
e) 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? 如需要,請列明: Do you want the Geographical Area of the Policy to be extended to apply outside Hong Kong in respect of employees working temporarily abroad? If so, please give details:	
f) 是否願意依據僱員賠償條例投保承包商之責任? 如願意,請列明: Do you wish to insure your liability under the Employees' Compensation law(s) to the employees of sub-contractors? If so, please state:	

包商名稱 Name of Contractor	包工性質 Nature of work sublet	如合約包括勞動力與材料， 請列明合約估計承包之金額 If contract for labour and materials state estimated amount of contract	若合約只包括勞動力， 請列明包工金額 In cases for which the contract is for labour only state amount of contract

注意: 總包商或承包商必需依據一九八二年僱員賠償條例「條訂」法案之第二十節及四十節投保總包商之責任。
NOTE: THE LIABILITY OF THE PRINCIPAL CONTRACTOR MUST BE INSURED BY EITHER THE PRINCIPAL CONTRACTOR OR THE SUB-CONTRACTOR TO COMPLY WITH SECTIONS 24 AND 40 OF THE EMPLOYEES' COMPENSATION (AMENDMENT) ORDINANCE 1982.

5. 是否僱用? Do you employ?

a) 行業外之任何散工, any casual workers otherwise than for the purpose of your trade & business, b) 任何外工, 或 any out workers, or c) 任何與投保人同屋之家眷 any member of your family who resides with you 若然, 是否需要為該僱員投保? If so, do you require cover for such employees?	a) b) c)
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6. 投保地點是否屬法例或法則管轄該樓宇之用途或維修?
Do your premises come within the meaning of any Law or Regulation governing the conduct or maintenance of such premises?

a) 若然, 請列明該法例或法則 If so, name such Laws or Regulations b) 有無遵照該法例或法則切實執行? Have you carried out all the obligations imposed on you by such Laws and/or Regulations?	a) b)
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7. a) 是否裝有任何鋸牀或蒸氣, 煤氣, 水力, 電力或其它機械動力所推動力之其它機器?
Have you any circular saws or other machinery driven by steam, gas, water, electricity or other mechanical power?
b) 一切機械廠房及通道是否採用堅固柵欄防護?
Are your machinery, plant and ways properly fenced and Guarded and otherwise in good order and condition?

a) b)

8. 汽鍋種類? What boilers have you?

9. 請列明所用之酸性液體, 氣體, 化學原料或爆炸性及其用量?
State what acids, gases, chemicals or explosives will be used and to what extent?

Employee's details 僱員資料

1. Please provide the following information 請提供以下資料

[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)]:

[請提供最近期的僱員薪酬記錄副本（例如：最近期的強積金供款記錄、財務報表、報稅表或其他有關文件）]：

Occupation of Employee(s) by Categories 僱員職務類別	Number of Employees 僱員人數	Estimated Total Annual Earnings* 估計全年總收入*
Occupation of Employee(s) by Categories 僱員職務類別	Number of Part Time Employees 兼職僱員人數	Estimated Total Annual Earnings* 估計全年總收入*
Total 總計：		

Declaration 聲明

I/We, being the owner/authorised person/representative of the proposed business, 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). Failure to disclose all material facts or under declaration on the total annual earnings may invalidate the insurance.

本人（等）作為投保業務的擁有人／獲授權人士／代表，謹此保證本人（等）或代本人（等）對上述全部僱員所申報之估計全年總收入均根據《僱員補償條例》（第282章）並屬真確及完整。倘未披露所有重要事實或少報全年總收入，可能導致保險作廢。

Authorised signature (with company chop) 獲授權簽署（連公司圖章）

Name 姓名：_____

Position 職位：_____

Date 日期：_____

* 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、花紅、超時工作補薪、津貼等。

2. Please advise the working experience/qualification/certificate that the employer or employee(s) possesses in relation to the business. 請提供僱主或僱員所擁有的業務相關之工作經驗/認可資格/證書。

Insurance history 投保歷史

1. Is the employer's at present insured, or has the employer ever proposed for an insurance in respect of employer's liability to its employees?

僱主目前是否已投保或曾投保對僱員之責任保險？

Yes 是 ☐ No 否 ☐

If yes, please state the name of insurance company.

如是，請列出保險公司名稱

2. Has any such proposal or renewal ever been declined or withdrawn?

該投保或續保是否曾被拒絕或撤回？

Yes 是 ☐ No 否 ☐

3. Has an increase premium rate been required?

是否曾被提高保費率？

Yes 是 ☐ No 否 ☐

Claims and related details 索償及相關資料

1. Please provide the claim history for the past 3 years 請提供過去三年之索償記錄

[Note: Employer shall make request on the previous insurers for providing written evidence of such records.]

[註：僱主需向曾投保的保險公司索取書面形式的索償記錄。]

Accident year 意外發生年份	Paid claim(s) (including partial claim payment) 已支付索償 (包括部分索償償付)		Outstanding claim(s) 未支付索償		Total for the year 全年總計	
	No. of case 賠案數目	Amount (HK\$) 金額 (港幣)	No. of case 賠案數目	Amount (HK\$) 金額 (港幣)	No. of case 賠案數目	Amount (HK\$) 金額 (港幣)

2. Details of any claim with amount over HK\$50,000. 任何索償金額超過港幣50,000元的個案詳情。

Date of accident 意外發生日期	Brief details of each accident (including cause of loss, degree of injury, current status, etc.) 概述每宗意外的經過 (包括受傷原因、受傷程度、現況等等)	Claim amount (HK\$) 索償金額港幣		
		Paid 已支付	Outstanding 未支付	Variation date 修訂日期

Authorised signature (with company chop)

獲授權簽署 (連公司圖章)

Date

日期

Name

姓名

Position

職位

Commission Disclosure 佣金披露

Declaration 聲明

The Applicant/Proposer understands, acknowledges and agrees that, as a result of the Applicant/Proposer purchasing and taking up the policy to be issued by Tugu Insurance Company Limited ("the Company"), the Company will pay the authorized insurance broker commission during the continuance of the policy including renewals, for arranging the said policy. Where the Applicant/Proposer is a body corporate, the authorized person who signs on behalf of the Applicant/Proposer further confirms to the Company that he or she is authorized to do so.

The Applicant/Proposer further understands that the above agreement is necessary for the Company to proceed with the application.

投保人明白、確知及同意，德高保險有限公司（“本公司”）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獲授權保險經紀支付佣金。假如投保人為法人團體，代表投保人簽署的獲授權人員須向本公司確認他/她已獲該法人團體授權。

投保人亦明白本公司必須取得投保人以上的同意，才可以處理其保險申請。

余/余等下列具名人願向 貴公司依據上述之保險條款投保，余/余等同意設一正確之薪金及工資記錄表冊並於保險期屆時遵照 貴公司所需之表報格式並報實際支出之薪金及工資並繳付超過以上所估計之薪金及工資數額之保險費用。余/余等茲聲明余/余等已閱讀及審核上列之一切表報及細則均屬正確，余/余等並無隱藏，虛報或歪曲任何事實，余/余等所估計之薪金及工資乃是公平者，余/余等同意本項聲明時作為余/余等與 訂立契約之基礎。

I/We, the undersigned, desire to effect an insurance as abovestated in terms of the Policy to be issued by the Company. 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, misrepresented or mis-stated any material fact, that I/We have fairly estimated my/our total salaries wages and expenditure, and I/We agree that this declaration shall be the basis of the contract between me/us and the



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Website 網址: www.tuguhk.com E-mail 電郵: info@tuguhk.com

Personal Information Collection Statement

Tugu Insurance Company Limited ("the Company") may collect personal information to enable the Company to carry on insurance business. The personal information may be used for the following purposes of:

- processing and assessing of applications for any insurance products and daily operation of the related services;
- any alterations, variations, cancellation or renewal of any insurance and related services;
- any claims or investigation or analysis of such claims;
- detect and prevent fraud (whether or not relating to the policy issued in respect of this application);
- exercising any right under the insurance policy including right of subrogation, if applicable;
- meeting the requirements under any law and regulation, requests from regulators, industry bodies, government agencies and court order; and
- any activities directly relating to the above purposes.

The information you provide to the Company may be provided or transferred to the following parties in Hong Kong or overseas for the purposes set out in the above paragraph:

- any agent, contractor or third party service provider who provides administrative, telecommunications, computer, payment, debt collection, data processing or storage or related services or any other company carrying on insurance or reinsurance related business, or an intermediary, or a claim or investigation or other service provider providing services relevant to insurance business, for any of the above or related purposes;
- any association, federation or similar organization of insurance companies ("Federation") that exists or is formed from time to time for any of the above or related purposes or to enable the Federation to carry out its regulatory functions or such other functions that may be assigned to the Federation from time to time and are reasonably required in the interest of the insurance industry or any member(s) of the Federation;
- any members of the Federation by the Federation for any of the above or related purposes;
- regulators;
- lawyers;
- health care professionals; hospitals;
- auditors;
- organisations that consolidate claims and underwriting information for the insurance industry;
- fraud prevention organisations;
- other insurance companies (whether directly or through fraud prevention organisation or other persons named in this paragraph);
- the police and databases or registers (and their operators) used by the insurance industry to analyse and check information provided against existing information; and
- any party under a duty of confidentiality to the Company including a group company of the Company which has undertaken to keep such information confidential.

If you do not agree to the use of your personal data for above purposes, it would not be possible for the Company to process your application and render the services.

You may seek access to and to request correction of any personal information concerning yourself held by the Company subject to payment of an administrative fee. Requests for such access or correction can be made in writing to Tugu Insurance Company Limited at 28/F, United Asia Finance Centre, 333 Lockhart Road, Wanchai, Hong Kong.

(If there is any inconsistency between the English and Chinese version of this Personal Information Collection Statement, the English version shall prevail.)

個人資料收集聲明

德高保險有限公司 (「本公司」) 會收集個人資料以經營保險業務。個人資料會被用作下列用途：

- 處理及評估任何保險產品的申請和相關服務的日常工作；
- 修改、變更、取消或更新任何保險和相關服務；
- 任何申索或調查或分析有關申索；
- 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）；
- 如適用，行使任何保險單內訂明的權利，包括代位權；
- 符合任何法例和附屬法例的規定，監管機構、行業團體和政府代理的要求及法庭命令；及
- 任何與上述用途直接有關的活動。

本公司可就上一段列明的用途把閣下給予本公司的資料提供或轉交至以下列在香港境內或海外的各方：

- 任何代理、承包商或第三方服務供應商，包括提供行政、電訊、電腦、付款、收債、數據處理或儲存或相關服務的供應商，或任何其他經營保險或分保相關業務的公司、或中介人、或提供申索或調查或其他提供與保險業務有關的服務供應商，作任何上述或相關的用途；
- 任何已成立或不時成立的協會、聯會或與保險公司相似的組織（「聯會」）作任何上述或相關的用途，或協助聯會履行其規管職責或其他不時獲分配的職責，而該等職責乃是為了保險行業或聯會任何會員的利益而合理地要求；
- 聯會任何成員由聯會作任何上述或相關用途；
- 監管機構；
- 律師；
- 醫護專業人士；醫院；
- 核數師；
- 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）；及
- 任何一方對本公司有保密責任，包括承諾將該等資料保持機密的本公司集團公司。

如閣下不同意使用其個人資料作上述用途，本公司則無法處理閣下的申請和提供服務。

閣下可查閱和更正本公司持有有關閣下的任何個人資料。閣下可就有關查閱和更正的要求致函至香港灣仔駱克道 333 號亞洲聯合財務中心二十八樓德高保險有限公司。本公司有權收取相關的行政費用。

(若此個人資料收集聲明之中、英文版本有歧異之處，應以英文版為準。)



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Privacy Policy Statement

Tugu Insurance Company Limited (the "Company") is committed to full compliance with the requirements of the Personal Data (Privacy) Ordinance, Cap.486 ("the Ordinance") in respect of the collection, use, retention and disclosure of personal information.

At all times, the Company shall endeavour to ensure all collection and/or storage and/or transmission and/or usage of personal data from individuals be done in accordance with the obligations and requirements of the Ordinance. In doing so, the Company will ensure that staff involved in handling personal data comply with the strictest standards of security and confidentiality.

We collect personal data in a number of ways. The most common circumstances in which we collect personal data are when you enquire about products we offer, you apply for an insurance product, or make a claim.

The types of personal data we collect from you will depend on the circumstances in which that information is collected. We may collect details including your name, HKID, date of birth, contact details and other personal data which is relevant to the insurance product you are applying for or the claim you are making.

The purposes for which your personal data will be used will depend on the circumstances in which that personal data is collected. We will inform you of the purposes for which we intend to use your personal data in the Personal Information Collection Statement at or before the time we collect your personal data.

Generally, we may use your personal data for the purpose for which you provided it to us; for the purposes which are directly related to the purposes for which you provided it to us; and any other purposes to which you have consented.

Your personal data may be provided or transferred to other third party. The third parties to whom your personal data will be disclosed will depend on the purposes for which that personal data is used. We will inform you of the third parties to whom your personal data will be disclosed in the Personal Information Collection Statement at or before the time we collect your personal data.

Generally, we may disclose your personal data as necessary for the purpose for which you provided it to us; for the purposes which are directly related to the purposes for which you provided it to us; and any other purposes to which you have consented.

In exceptional circumstances, we may be required or permitted by law to disclose personal data, for example to law enforcement authorities or to prevent a serious threat to public safety.

We will only retain the personal data for as long as it is necessary to fulfill the original or directly related purposes for which such data was collected, unless the personal data need to be retained to satisfy any applicable statutory, contractual or tortious obligations.

Under the Ordinance, individuals have the right to request access to and correction of their personal data held by the Company. Should you wish to access or correct your personal information held by us, please present your enquiry by writing to Tugu Insurance Company Limited at 28/F, United Asia Finance Centre, 333 Lockhart Road, Wanchai, Hong Kong. Any requests or access to and correction of personal information will be dealt with promptly and we will use our best endeavours to handle such requests before the expiry of 40 days maximum. A reasonable fee may be charged to offset the Company's administration and actual costs incurred in the complying with your data access request.

(If there is any inconsistency between the English and Chinese version of this Privacy Policy Statement, the English version shall prevail.)

Aug 2019

私隱政策聲明

德高保險有限公司（「本公司」）致力恪守第 486 章《個人資料(私隱)條例》（「條例」）有關收集、使用、保留和披露個人資料的規定。

本公司將無時無刻盡力確保所收集及/或儲存及/或傳送及/或使用的所有個人資料，須遵照條例規定的責任和要求處理。在執行上，本公司將確保負責處理個人資料的員工遵守最嚴格的保安及保密標準。

我們以多個途徑收集個人資料，當中最常見的情況包括當閣下查詢本公司提供的產品、向本公司申請保險產品或提出申索時。

我們向閣下收集個人資料所屬的類別，視乎該資料是在甚麼情況下收集，可能包括閣下的姓名、香港身份證號碼、聯絡詳情及與閣下申請的保險產品或閣下的索償相關的其他個人資料。

閣下的個人資料用作甚麼用途視乎收集該資料的情況而定。我們會於收集閣下的個人資料時或之前，在「個人資料收集聲明」內通知閣下我們打算使用其個人資料的用途。

一般而言，我們可使用閣下的個人資料作閣下提供有關資料予我們的用途、與該等用途直接相關的用途及任何其他閣下已同意的用途。

我們可提供或轉交閣下的個人資料至其他第三方。我們向哪些第三方披露閣下的個人資料，視乎該資料被用作甚麼用途。我們會於收集閣下的個人資料時或之前，在「個人資料收集聲明」內通知閣下我們打算向哪些第三方披露閣下的個人資料。

一般而言，我們可因應閣下提供有關資料予我們的用途、與該等用途直接相關的用途及任何其他閣下已同意的用途的需要而披露閣下的個人資料。

在特殊情況下，我們可因應法律規定或准許，如按照執法機關的要求或為防止危害公眾安全，披露有關個人資料。

我們保留有關個人資料的時間並不會長於達致收集該等資料原來或直接相關的用途，除非個人資料須受任何適用的法定、合約或侵權責任的規限而被保留。

根據條例規定，個人有權要求查閱和更正本公司持有關於其本人的個人資料。若閣下欲查閱或更正本公司持有關於其本人的個人資料，請致函至香港灣仔駱克道 333 號亞洲聯合財務中心二十八樓德高保險有限公司表達有關要求。我們會將盡快處理任何關於查閱或更正個人資料的要求，並盡力於收到有關要求的 40 天限期內予以回覆。本公司或會收取合理的費用作行政和實際成本以便處理閣下的有關要求。

(若此私隱政策聲明之中、英文版本有歧異之處，應以英文版為準。)

2019 年 8 月