

Applicable to premium payment by autopay only. 只供選擇以自動轉賬繳付保費之客戶填寫。

Name of party to be credited (The Beneficiary) 收款之一方 (受益人)
Prudential General Insurance Hong Kong Limited

I/We hereby authorize my/our below-named Bank to effect transfer(s) from my/our account to that of Prudential General Insurance Hong Kong Limited in accordance with such instruction as my/our Bank may receive from the beneficiary from time to time.

現授權本人/吾等之下述銀行，根據受益人不時給予本人/吾等銀行之指示，自本人/吾等之賬戶內轉賬予保誠財險有限公司之賬戶。

I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer(s) has been given to me/us.

本人/吾等同意本人/吾等之銀行毋須證實該等轉賬通知是否已交予本人/吾等。

I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfer(s).

如因該等轉賬而令本人/吾等之賬戶出現透支 (或令現時之透支增加)，本人/吾等將共同及分別承擔全部責任。

I/We confirm that my/our signature(s) on this Application Form is/are the same as that/those for the operation of my/our Savings/Current Account to be debited fro the transfer(s).

本人/吾等證明本人/吾等在此表格上之簽名式樣與本人/吾等之銀行賬戶簽名式樣一致。

I/We agree to notify Prudential General Insurance Hong Kong Limited of any change of bank account or cancellation of payment method and further agree that should there be insufficient funds in my/our Bank account to meet any transfer(s) hereby authorized, the Bank shall be entitled, at its discretion, not to effect such transfer(s) in which event the Bank may make the usual service charge to be paid by me/us.

本人/吾等同意如更改銀行賬戶或取消此付款方式時，將通知保誠財險有限公司，銀行賬戶並同意如本人/吾等之賬戶並無足夠款項支付該等轉賬時，本人/吾等之銀行有權不予轉賬，且銀行可收取慣常之服務費用。

This authorization shall have effect until further notice.

本授權書將繼續生效至另行通知為止。

I/We agree that any notice of cancellation or variation of this authorization which I/we may give to my/our Bank shall be at least two working days prior to the date on which such cancellation/variation is to take effect.

本人/吾等如同意取消或更改本授權書之任何資料，須於通知取消/更改生效日最少兩個工作天前交予本人/吾等之銀行。

Bank Name 銀行名稱	Bank No. 銀行編號	Branch No. 分行編號	A/C No. to be credited 收款賬戶之號碼
Name of Account Holder(s) 戶口持有人之姓名 (As recorded in statement/passbook - please complete in BLOCK LETTERS 在月結單/存摺上所記錄之名稱 — 請用英文正楷填寫)			Signature of Account Holder(s) 戶口持有人之簽名 (Signature must correspond to your Bank's record 簽名必須與銀行檔案相同)
I.D. No. of Account Holder(s) 戶口持有人身份證明文件之號碼			
I.D. Type 身份證明文件類別			
☐ HKID 香港身份證 ☐ Business Registration 商業登記證			
☐ Passport 護照 ☐ Certificate of Incorporate 公司註冊證明書			
☐ Others 其他 _____			
Date 日期			



保誠精選「安健寶」－專業人士人身意外保險計劃

我們深明專業人士，您一定希望擁有更全面的保障。我們誠意為擁有以下指定專業資格的您，度身訂造保誠精選「安健寶」－專業人士人身意外保險計劃，提供以下特定保障。

職業	專業資格
會計師	- 香港會計師公會之正規會員；或 - 被香港會計師公會認可的其他專業會計機構之正規會員
精算師	- Society of Actuaries 之正規會員
建築師	- 香港建築師學會之正規會員
牙醫	- 香港註冊牙醫（依照香港牙科註冊條例註冊）
醫生	- 香港註冊西醫（依照香港醫生註冊條例註冊）
工程師	- 香港工程師學會之正規會員
律師	- 持有 / 非持有執業證書之律師（根據香港律師會之法律界名錄）；或 - 註冊外國律師（根據香港律師會之法律界名錄）；或 - 香港大律師公會之正規會員
藥劑師	- 香港註冊藥劑師（依照香港藥劑業及毒藥條例）
測量師	- 香港測量師學會之正規會員
獸醫	- 香港註冊獸醫（依照香港獸醫註冊條例）

保障範圍一覽表

保障項目	最高保障額（港幣）
意外死亡及永久性傷殘保障	\$1,000,000
- 雙倍利益賠償	\$1,000,000
暫時喪失全部工作能力/ 暫時喪失部份工作能力	暫時喪失全部工作能力： 每星期\$3,000 暫時喪失部份工作能力： 每星期\$750
醫療費用	每年\$18,000為上限 每年\$4,500為上限（每日最高\$250）
免費24小時緊急支援服務	免費提供無限額之全球緊急醫療救援及護送回港保障。
個人責任保障	每年\$200,000
*註冊中醫乃根據香港《中醫藥條例》下註冊的中醫師。如需查詢有關註冊中醫名單，可瀏覽香港中醫藥管理委員會網頁www.cmchk.org.hk。	

推廣期：2015年1月26日至2015年12月31日

PRU^{choice} Personal Accident – Professional Insurance Plan

We understand how essential it is for a professional like you to insure with a comprehensive coverage. We specially offer you, with the following designated qualifications, the tailor-made PRU^{choice} Personal Accident – Professional Insurance Plan, providing the below specific coverage.

Occupation	Qualifications
Accountant	- Full member of Hong Kong Institute of Certified Public Accountants; or - Full member of other professional accounting bodies recognized by Hong Kong Society of Accountants
Actuaries	- Full member of Society of Actuaries
Architect	- Full member of Hong Kong Institute of Architects
Dentist	- Registered Dentist (registered pursuant to the Dentists Registration Ordinance of Hong Kong)
Doctor	- Registered Medical Doctor (registered pursuant to the Medical Registration Ordinance of Hong Kong)
Engineer	- Full member of Hong Kong Institute of Engineers
Lawyer	- Solicitor with / without Practicing Certificate (in accordance with the law list of Law Society of Hong Kong); or - Registered Foreign Lawyer (in accordance with the law list of Law Society of Hong Kong); or - Full member of the Hong Kong Bar Association
Pharmacists	- Registered Pharmacists (registered pursuant to the Pharmacy and Poisons Ordinance of Hong Kong)
Surveyor	- Full member of Hong Kong Institute of Surveyors
Veterinary surgeons	- Registered Veterinarian (registered pursuant to the Veterinary Surgeons Registration Ordinance of Hong Kong)

Table of Coverage

Benefits	Maximum Sum Insured (HKD)
Accidental Death & Permanent Disablement	\$1,000,000
- Double Indemnity Benefit	\$1,000,000
Temporary Total Disablement / Temporary Partial Disablement	Temporary Total Disablement: Weekly Benefit \$3,000 Temporary Partial Disablement: Weekly Benefit \$750
Medical Expenses	Up to \$18,000 per year Up to \$4,500 per year (Subject to \$250 per day)
24 Hours Emergency Assistance Services	Free Unlimited Cover of Medical Evacuation and Repatriation to Hong Kong
Personal Liability	\$200,000 per year
*Registered Chinese Medicine Practitioner is referred to those medical practitioners registered pursuant to the Chinese Medicine Ordinance of Hong Kong. For list of registered Chinese Medicine Practitioner, please visit the website of Chinese Medicine Council of Hong Kong (www.cmchk.org.hk).	

Promotion Period: 26 January 2015 to 31 December 2015

GI3/BRIN0149B/P01 (01/15)

Application Form for PRU^{choice} Personal Accident - Professional Insurance Plan

保誠精選「安健寶」- 專業人士人身意外保險計劃申請表

Applicable on or after 26 January, 2015
2015年1月26日或之後適用

Details of Applicant 申請人詳情

(Please complete in BLOCK LETTERS 請用英文正楷填寫)

Applicant is 申請人：

☐ One of Insured Person(s) 其中一位受保人 ☐ Contact Person 聯絡人

Surname 姓 Given Name 名

I.D.No./Passport No. 身份證號碼/護照號碼 Gender 性別 ☐ Female 女 ☐ Male 男

Marital Status 婚姻狀況 Date of Birth 出生日期 (dd/mm/yy) (日/月/年)

Height 身高 (cm/feet) (厘米/尺) Weight 體重 (kg/lb) (公斤/磅)

Occupation & Title 職業及職銜

Home Tel No. 住宅電話號碼

Mobile No. 手提電話號碼

Email Address 電子郵箱

Correspondence Address 通訊地址

Flat/Room 室 Floor 樓 Block 座

Building/Estate 大廈/屋苑

Street/Road & District Area 街道及地區

☐ HK 香港 ☐ KLN 九龍 ☐ NT 新界

Insured Person(s) 受保人	
Surname 姓	Given Name 名
Relationship with Applicant 與申請人之關係	Gender 性別 ☐ Female 女 ☐ Male 男
I.D.No./Passport No. 身份證號碼/護照號碼	Date of Birth 出生日期 (dd/mm/yy) (日/月/年)
Occupation & Title 職業及職銜	
Height 身高 (cm/feet) (厘米/尺)	Weight 體重 (kg/lb) (公斤/磅)

Table Of Premium 保費表

Classification of Occupation for Insured Person 受保人職業類別	Original Price(HKD) 原價(港幣)	First Year Premium Discounted Price(HKD) 折扣後首年保費特價(港幣)
☐ Class 1 第一類	\$2,250 (Annual 年繳) \$201 (Monthly 月繳)	☐ \$1,800 (Annual 年繳) ☐ \$161 (Monthly 月繳)
☐ Class 2 第二類	\$3,100 (Annual 年繳) \$277 (Monthly 月繳)	☐ \$2,480 (Annual 年繳) ☐ \$222 (Monthly 月繳)

For the details of Benefits, please refer to Table of Coverage in the cover of this promotion leaflet.
有關保障項目之詳情，請參閱本宣傳單張之保障範圍一覽表。

Period of Insurance 保單生效日期

Policy commences on 本保單由 / / for one year. 起生效，為期一年。
dd日 mm月 yy年

Insurance Details 投保資料

1. Does the insured person suffer from any illness, mental disease, physical impairment, defects or deformities and/or any condition affecting mobility, sight, speech and/or hearing? If yes, please give details.
受保人是否有任何疾病、精神病、身體傷殘、缺陷、畸形，及/或其他情況，以致影響行動、視覺、說話及/或聽覺？若「是」，請詳述。
☐ Yes 是 ☐ No 否

2. Does the insured person engage in or intend to engage in any hazardous activities (no matter is covered by the Policy or not), pursuits or duties? If yes, please give details and indicate the frequency.
受保人是否參與或準備參與任何危險性之活動（無論是否在受保範圍內）或工作或職務？若「是」，請詳述及列明參與的次數。
☐ Yes 是 ☐ No 否

3. Has the insured person received any surgical and medical treatment or encountered any accidents during the past 5 years which have prevented he/she from following his/her occupations, business or pursuits for a period of longer than 7 days? If yes, please give details.
受保人在過去五年內，是否曾接受外科手術或醫療護理，或因意外事故而停止主要職務連續超逾七天？若「是」，請詳述。
☐ Yes 是 ☐ No 否

4. Is the insured person holding other personal accident policies with a total aggregate sum insured of HK\$1,000,000 or above? If yes, please state the name of the insurance companies, benefit and period of insurance.
受保人是否持有其他個人意外保險，而總保障額相等或大於港幣\$1,000,000？若「是」，請列明承保公司、投保金額及該保單有效日期。
☐ Yes 是 ☐ No 否

5. Has the insured person ever made any claims in respect of Life, Accident or Medical insurance during the last 5 years? If yes, please give details.
受保人有无在過去五年就人壽、意外或醫療保險提出索償？若「是」，請詳述。
☐ Yes 是 ☐ No 否

6. Has the insured person ever been declined of Life or Accident Insurance, or been refused to renew your insurance, or had any special conditions imposed, or at a lowered sum insured? If yes, please give details.
受保人曾否被保險公司拒絕承保或續保人壽或意外保險，或需附加任何特別條款或減少保障額？若「是」，請詳述。
☐ Yes 是 ☐ No 否

Declaration 聲明

I/We hereby declare and agree that 本人/吾等現聲明及同意：

· the statements and particulars given in this application are, to the best of my/our knowledge and belief, true and complete and that this application form shall form the basis of the contract with Prudential General Insurance Hong Kong Limited.

就本人/吾等知悉範圍內，此申請表上填報的一切資料，均屬確實完整，本人/吾等並同意以此申請表作為本人/吾等與保誠財險有限公司之間所訂合約的根據。

· the insurance will not be in force until the application form has been accepted by the Company and **the premium has been paid**, except to the extent of any official cover note which may be issued.
除持有 貴公司簽發的臨時保單外，保障需在 貴公司覆核、接納申請表及已繳付保費後才能生效。

· I/We have read and understood the content of the brochure, and have the right to request for the policy specimen for the details of the coverage.
本人/吾等已細閱及清楚明白有關小冊子內容，及有權要求索取保單樣本了解有關保障詳細範圍。

· any person covered the insured person under this insurance is a resident of Hong Kong SAR.
此保單之所有受保人均為香港特別行政區居民。

Payment Method 付款方法

If the selected payment method is either by Credit Card or Autopay, the policy will be renewed automatically on a yearly basis subject to underwriting approval and premium will be collected from the designated account.

如選擇以信用卡或自動轉賬繳付保費，保單於核保後每年自動續保及從指定的戶口內扣除保費。

☐ Yearly by Credit Card 以信用卡年繳

☐ Monthly by Credit Card 以信用卡月繳

☐ Yearly by Cheque 以支票年繳
(Please attach cheque* for first year premium) (請連同首年保費之支票*寄回)

☐ Yearly by Autopay 以自動轉賬年繳
(Please attach cheque* for first year premium) (請連同首年保費之支票*寄回)

☐ Monthly by Autopay 以自動轉賬月繳
(Please attach cheque* for two month's premium) (請連同兩個月保費之支票*寄回)

* Please make the cheque payable to "Prudential General Insurance Hong Kong Limited".
請註明支票抬頭人為「保誠財險有限公司」。

Credit Card Account Details 信用卡戶口資料

Applicable to premium payment by credit card only. 只供選擇以信用卡繳付保費之客戶填寫。

☐ VISA Card  VISA 卡 ☐ Master Card  萬事達卡

Credit Card Number 信用卡號碼
mm月 yy年

Credit Card Expiry Date 信用卡有效日期至

I/We hereby authorize Prudential General Insurance Hong Kong Limited to collect from my/our designated credit card account for all payment(s) and recurring payment(s) of this insurance including that/those related to initial installment, subsequent endorsement(s) and its renewal(s).
本人/吾等授權保誠財險有限公司，經由本人/吾等指定的信用卡戶口內，扣除有關本保單的所有及首期保費，包括因其後背書所需的保費以及每年續保的保費。

Cardholder's Name 信用卡持有人姓名 Date 日期

Cardholder's Signature 信用卡持有人簽名

Table Of Premium		
Classification of Occupation for Insured Person	Original Price (HKD)	First Year Premium Discounted Price(HKD)
Class 1	\$2,250 (Annual) / \$201 (Monthly)	\$1,800 (Annual) / \$161 (Monthly)
Class 2	\$3,100 (Annual) / \$277 (Monthly)	\$2,480 (Annual) / \$222 (Monthly)
The Premium only applicable to the below Occupation Classifications: Class 1: Professions and occupations involving mainly indoor work and of non-manual and non-hazardous nature and; Class 2: Professions and occupations requiring outdoor work or occasional manual work or use of light tools or machines of non-hazardous nature. If the applicant involved no manual work but needs to work in construction site for supervision, additional premium will be charged after underwriting approval. If you are not sure about the class of your current occupation, please contact us for inquiry.		

If clients insure **PRU^{choice} Personal Accident – Professional Insurance Plan** together with his/her family members who at the same time insure **PRU^{choice} Personal Accident – Professional Insurance Plan** and/or **PRU^{choice} Personal Accident**, they could enjoy an extra 10% family premium discount!

Age Limits

Age Limits at Entry : 18 – 65
Not Renewable after aged : 70

This promotion plan provides only the above Benefits as stated in the Table of Coverage. For details of Accidental Death & Permanent Disablement, Temporary Total Disablement/Temporary Partial Disablement, Medical Expenses and 24 Hours Emergency Assistance Service, please refer to **PRU^{choice} Personal Accident Brochure**. For Personal Liability and more coverage details, please refer to policy document. Please call your financial consultant or visit our website www.prudential.com.hk to know more.

The above promotion and family premium discount are subject to all the relevant terms & conditions.

Terms and Conditions of PRU^{choice} Personal Accident – Professional Insurance Plan (“Promotion Plan”)

- PRU^{choice} Personal Accident – Professional Insurance Plan** (“Promotion Plan”) is organized by Prudential General Insurance Hong Kong Limited (“PGHK”), Promotion Period is from 26 January 2015 to 31 December 2015, both dates inclusive (“Promotion Period”).
- These offers are only applicable to designated professionals, applicants are required to submit the proof of qualification together with the application form at the time of application.
- This promotion plan provides only the Benefits as stated in the Table of Coverage on the cover page. For details of Accidental Death & Permanent Disablement, Temporary Total Disablement/Temporary Partial Disablement, Medical Expenses and 24 Hours Emergency Assistance Service, please refer to **PRU^{choice} Personal Accident Brochure**. For Personal Liability and more coverage details, please refer to policy document.
- PRU^{choice} Personal Accident – Professional Insurance Plan** is underwritten by PGHK and is subject to the policy terms and conditions. For product details, please refer to the product brochure and the terms and conditions set out in the specimen policy issued by PGHK.
- All applications and renewals are subject to underwriting approval of Prudential General Insurance Hong Kong Limited (“PGHK”). The coverage on the Policy is subject to renewal upon expiry, but PGHK reserves the right to accept or decline any policy application and/or renewal.
- The offer of 20% First Year Premium Discount is applicable only to clients who newly and successfully insure with **PRU^{choice} Personal Accident – Professional Insurance Plan** during the Promotion Period, but not renewal policies. All relevant policy(ies) must have been approved and issued by PGHK on or before 31 December 2015, and the policy must be kept in-force during the first policy year.
- The offer of 20% First Year Premium Discount is only applicable to the first policy year and will not be applicable to subsequent renewals, subsequent endorsement(s)/ alternation(s) of the policy(ies).
- PGHK reserves the right to claw back the amount of premium discount if the policy has been terminated/ endorsed / alternated subsequently within the first policy year.

Terms & Conditions of Family Premium Discount:

- If applicant submits the application for the Promotion Plan together with his/her spouse, or unmarried children aged below 18, who submits the application for the Promotion Plan and/or **PRU^{choice} Personal Accident** at the same time, an extra 10% premium discount will be given for all insured persons to be covered upon successfully insured. The extra 10% discount will also be applicable to unmarried children if they are full-time students, aged 18 or above but below 23 and, are making separate application(s) of **PRU^{choice} Personal Accident** at the same time.

General Terms & Conditions:

- All policy applications are subject to underwriting approval of PGHK. PGHK reserves the right to accept or decline any policy application.
- PGHK reserves the right to amend the terms and conditions of the above Promotion and Family Premium Discount without prior notice. In case of dispute, PGHK’s decision is final and conclusive.
- The details of insurance product and other relevant information listed above are for reference only. They do not constitute any contract or any part thereof between PGHK and any other parties. For details of relevant terms & conditions of any insurance product, please refer to policy documents.

This promotion insert is intended to be distributed in Hong Kong only and shall not be construed as an offer to sell or solicitation to buy or provision of any insurance product outside Hong Kong. PGHK does not offer or sell any insurance product in any jurisdictions outside Hong Kong in which such offering or sales of the insurance products is illegal under the laws of such jurisdictions.

This promotion insert is issued by Prudential General Insurance Hong Kong Limited.

Prudential General Insurance Hong Kong Limited is a member of Prudential plc group.

G13/BRIN0149B/P01 (01/15)

保費表		
受保人職業類別	原價（港幣）	折扣後首年保費特價（港幣）
第一類	\$2,250（年繳） / \$201（月繳）	\$1,800（年繳） / \$161（月繳）
第二類	\$3,100（年繳） / \$277（月繳）	\$2,480（年繳） / \$222（月繳）
此保費只適用於以下職業分類： 第一類：主要從事室內、非體力勞動及非危險性的工作，及 第二類：須外出或間隔作輕度體力勞動或使用輕型機械的非危險性工作之申請人 如申請人需前往地盤作督導但無須勞動工作，保誠財險有限公司將於核保後收取額外保費。 如您未能確定所屬職業類別，可向本公司查詢。		

若客戶投保保誠精選「安健寶」－專業人士人身意外保險計劃，並與其家人同時投保保誠精選「安健寶」－專業人士人身意外保險計劃及/或保誠精選「安健寶」，更可享額外9折家人同保保費折扣優惠！

年齡限制

投保年齡 : 18 - 65

在此年齡後恕不續保：70

此推廣計劃只包括上列保障範圍一覽表內之保障項目。有關意外死亡及永久性傷殘保障、暫時喪失全部工作能力/暫時喪失部份工作能力、醫療費用、免費24小時緊急支援服務之詳情，請參閱保誠精選「安健寶」的產品小冊子。個人責任保障及更多保障詳情，請參閱保單文件。您亦可透可聯絡您的理財顧問或瀏覽www.prudential.com.hk了解更多。

以上推廣計劃及家人同保保費折扣優惠受所有有關的條款及細則限制。

保誠精選「安健寶」— 專業人士人身意外保險計劃（“推廣計劃”）之優惠條款及細則：

- 保誠精選「安健寶」－專業人士人身意外保險計劃（“推廣計劃”）由保誠財險有限公司（“保誠財險”）主辦，推廣期為2015年1月26日至2015年12月31日，包括首尾兩天（“推廣期”）。
- 此推廣計劃只提供予指定專業人士申請，申請人於遞交申請表時需連同有關的專業資格證明文件一併遞交。
- 此推廣計劃只包括封面保障範圍一覽表所列之保障項目。有關意外死亡及永久性傷殘保障、暫時喪失全部工作能力/暫時喪失部份工作能力、醫療費用、免費24小時緊急支援服務之詳情，請參閱保誠精選「安健寶」的產品小冊子。個人責任保障及更多保障詳情，請參閱保單文件。
- 保誠精選「安健寶」－專業人士人身意外保險計劃由保誠財險承保，並受保單內的所有條款及細則規限。有關產品詳情，請參閱推廣單張、產品小冊子及保單樣本內的條款及細則。
- 所有申請及續保均需經過保誠財險有限公司（“保誠財險”）核保審批。此保單中的保障於到期後將可續保，惟保誠財險保留所有接受或拒絕申請的權利。
- 客戶必須於推廣期內成功新投保保誠精選「安健寶」－專業人士人身意外保險計劃，續保保單恕不適用。有關保單必須於2015年12月31日或以前由保誠財險批核及繕發，而有關保單必須在保障首個保單年度維持生效，方可獲首年保費8折優惠。
- 首年保費8折優惠只適用於首年保障，有關保單於來年續保、任何背書或保單更改時將不再享有此優惠。
- 若已享有次優惠的保單隨後在首個保單年度內被取消或作出任何背書或保單更改，保誠財險保留追回保費折扣金額的權利。

家人同保保費折扣優惠之條款及細則：

- 若任何申請人申請此推廣計劃，並與其配偶、或未滿18歲之未婚子女同時遞交並成功申請投保推廣計劃及/或保誠精選「安健寶」，所有投保人之保費可獲額外9折優惠。如未婚子女為年滿18歲而又未滿23歲的全日制學生，並以獨立保單同時投保，亦可享有此折扣優惠。

一般條款及細則：

- 所有保單申請須經保誠財險核保，保誠財險保留接受或拒絕投保申請的權利。
- 保誠財險保留權利更改上述推廣計劃及家人同保保費折扣優惠之條款及細則，而毋須另行通知。如有任何異議，保誠財險保留最終決定權。
- 本宣傳單張所列的保險產品介紹及有關資料乃供參考之用，不能作為保誠財險與任何人士或團體所訂之任何合約之任何部份。有關任何保險產品的條款及細則，請參閱保單條文。

此宣傳單張僅旨在香港派發，並不能詮釋為在香港境外提供或出售或游說購買任何保險產品。如在香港境外之任何司法管轄區的法律下提供或出售任何保險產品屬於違法，保誠財險不會在該司法管轄區提供或出售該保險產品。

此宣傳單張由保誠財險有限公司發出。

保誠財險有限公司是英國保誠集團成員。

G13/BRIN0149B/P01 (01/15)

Personal Information Collection Statement

收集個人資料聲明

Prudential General Insurance Hong Kong Limited (referred to as “the Company”, “our”, “we”, or “us” in this Part entitled ‘Personal Information Collection Statement’) may collect certain personal information, including without limitation your name, identity card number (and copy of identity card), passport number, contact information, family history, health and medical information and financial information (“**Personal Information**”) from you when you apply for insurance or financial products and services from us, or when you apply to make changes to your policy, or when you make a claim against a policy. We may also collect Personal Information about you from third parties such as other insurance companies or agents, government agencies, medical personnel, credit reporting agencies, courts or public records.

保誠財險有限公司（在題為「收集個人資料聲明」之本部份，簡稱「本公司」或「我們」）可能會於閣下向我們申請保險或金融產品及服務、申請更改保單或就保單提出索償時向閣下收集一些個人資料，包括但不限於閣下的姓名、身份證號碼（及身份證副本）、護照號碼、聯絡資料、家族歷史、健康和醫療資料，以及財務資料（以下簡稱「個人資料」）。我們還可能從第三方，如其他保險公司或代理、政府機構、醫務人員、信用報告機構、法院或公開記錄等，收集關於閣下的個人資料。

1.Purpose of Collection 收集資料之目的

We may use your Personal Information for the following purposes: (a) to process your application; (b) to administer and process insurance policies, insurance claims and medical, security and underwriting checks; (c) to process payment instructions; (d) to verify your eligibility for insurance, financial or wealth management products and services; (e) to design and provide you with insurance, financial and related services and products; (f) to communicate with you; (g) to provide you with promotional materials relating to insurance or financial services or related wealth management products of the Company, and those of other entities whose ultimate parent company is Prudential plc (“**companies within the Prudential Group**”) or partnering financial institutions; (h) to perform a policy review or needs analysis; (i) to conduct research and statistical analysis; and (j) to meet disclosure requirements imposed by law or regulatory authorities.

我們可能會使用閣下的個人資料作下列用途：(a) 處理閣下的申請；(b) 管理和處理保單、保險索償、醫療、抵押和承保檢查；(c) 處理付款指示；(d) 核實閣下申請保險、金融或財富管理產品及服務的資格；(e) 設計及為閣下提供保險、金融及相關的服務和產品；(f) 與閣下進行通訊；(g) 為閣下提供關於本公司以及其他母公司為英國保誠集團的實體（「保誠集團內的公司」）或夥伴金融機構的保險或金融服務或相關的財富管理產品的推廣材料；(h) 進行保單審查或需求分析；(i) 進行研究和統計分析；及 (j) 符合法律或監管當局實施的披露要求。

2.Classes of Transferees 被資料轉交者的類別

We may disclose your Personal Information to third parties (within or outside Hong Kong) for the purposes outlined at Section 1 above, including without limitation the following third parties: (a) insurance agents; (b) re-insurance companies; (c) other companies within the Prudential Group; (d) claims investigation companies; (e) third party administrators; (f) third party service providers (including without limitation insurers, bankers, lawyers, accountants, and other third party service providers who provide administrative, telecommunications, computer, payment, printing, redemption or other services to us to enable us to operate our business); (g) industry associations and federations; (h) medical bill review companies; (i) professional advisors; (j) researchers; (k) credit reference agencies; (l) debt collection agencies; (m) partnering financial institutions; (n) regulators and government agencies; (o) law enforcement agencies; (p) the Courts. We may transfer your name, contact information and information about the products you have purchased (including the sales channel from which such products were purchased) to other companies within the Prudential Group, and other partnering financial institutions, for the purpose of providing you with promotional materials relating to those entities' insurance or financial services or related wealth management products. However, we will not disclose your Personal Information to any other third parties for direct marketing purposes without your consent.

We may transfer your Personal Information in connection with a transaction with another company which affects the control, governance, structure and/or management of all or a substantial part of our business, or if required to satisfy applicable legal or regulatory requirements.



Important Notes to Applicant 申請人須知

1. Disclosure - The applicant is requested to disclose any other facts known to the applicant which are likely to affect acceptance or assessment of the insurance cover the applicant is applying for. Should the applicant have any doubts about what should be disclosed, please feel free to contact us or your financial consultant/broker. The applicant is recommended to keep a record (including copies of letters) of any additional information given for the applicant's future reference. Failure to disclose may mean that the Policy will not provide with the cover the applicant requires, or perhaps may invalidate the Policy altogether.

披露—申請人必須就申請表內所有問題作出確實回答，並就申請需要提供一切有關資料，如有懷疑請向本公司或有關理財顧問/經紀查詢。如作出不確實回答或提供不正確資料，會令本保單作廢及不能生效。請保留申請表副本（包括信件影印本）以作日後參照。

2. A specimen copy of the Policy and a copy of your completed Application Form will be supplied on request.

如有需要，本公司可提供保單原文及申請表副本以作參考。

3. The **PRU***choice* Personal Accident – Professional Insurance Plan promotion leaflet only briefly outlined the benefits and special offer to applicants with professional qualifications. For product details, please refer to the **PRU***choice* Personal Accident product brochure and Policy.

此推廣保誠精選「安健寶」- 專業人士人身意外保險計劃推廣小冊子只列出給予擁有專業資格之受保人之保障及特別優惠。有關產品詳情，請參閱保誠精選「安健寶」之產品小冊子及保單。

4. If applicant's premium payment is made by credit card or autopay, the Policy will be renewed automatically.

若申請人以信用卡或自動轉賬形式繳付保費，保單將會自動續保。

5. The application form must be signed by a person who attained age 18 or above.

申請表必須由年滿18歲或以上的申請人簽署。

6. Applicants are required to submit the proof of qualification together with the application form at the time of application.

申請人於遞交申請表格時需連同有關專業資格證明文件一併遞交。

7. This document is intended to be distributed in Hong Kong and shall not be construed as an offer to sell or solicitation to buy or provision of any insurance product outside of Hong Kong. Prudential General Insurance Hong Kong Limited does not offer or sell any insurance product in jurisdictions outside of Hong Kong in which such offering or sale of the insurance product is illegal under the laws of such jurisdictions.

此文件僅旨在香港派發，並不能詮釋為在香港境外提供或出售或游說購買任何保險產品。如在香港境外之任何司法管轄區的法律下提供或出售任何保險產品屬於違法，保誠財險有限公司不會在該司法管轄區提供或出售該保險產品。

Signature of Applicant
申請人簽署

X

Name in BLOCK LETTERS
姓名 (請用英文正楷填寫)

Date
日期

3.Consequence of failing to provide Personal Information
未能提供個人資料的影響

Unless otherwise specified by us, it is mandatory for you to provide the Personal Information requested by us. In the event that any such Personal Information is not provided, we may be unable to provide you with the services or carry out the activities outlined at Section 1 above.

除非我們另有規定，否則閣下必須提供我們所要求的個人資料。若未能提供任何此等個人資料，我們可能無法為閣下提供服務或進行上述第一部分所列出的活動。

4.Access and Correction Rights 查閱和更正的權利

Under the Personal Data (Privacy) Ordinance (the "**Ordinance**"), you have the right to request access to and correction of any Personal Information that you provide to us. You may make such a request by writing to our Data Protection Officer at 3/F Berkshire House, 25 Westlands Road, Quarry Bay, Hong Kong. In accordance with the Ordinance, we have the right to charge a reasonable fee for the processing of any Personal Information access or correction request.

根據《個人資料（私隱）條例》（「條例」），閣下有權要求查閱及更正任何閣下提供給我們的個人資料。閣下如欲查閱或更正個人資料，請向我們的資料保護主任作出書面要求，地址是香港愛魚涌華蘭路25號栢克大廈3樓。根據條例的規定，我們有權就處理查閱及更正任何個人資料的要求，收取合理的費用。

Opting-out Marketing Communications or Materials
拒絕接受促銷信息或資料

We intend to send you marketing communications or materials (as set out in the above Personal Information Collection Statement), but we cannot do so without your consent. In the event that you do not wish to receive such marketing communications or materials, please let us know by ticking the opt-out box below,and returning the form to us in person or at 3/F Berkshire House, 25 Westlands Road, Quarry Bay, Hong Kong.

我們有意向閣下發送〔載於上述收集個人資料聲明的〕促銷信息或資料，但未經閣下的同意，我們不能這樣做。假若閣下不希望收到該等促銷信息或資料，請在以下拒絕接受方格內劃上「✓」號以讓我們知道閣下的意向，並親身交回本表格或送交本表格至香港愛魚涌華蘭路25號栢克大廈3樓。

☐ Opt-out box 拒絕接受方格

The Applicant/ Policyholder/ Insured Person hereby confirm understanding of and agreement to the contents in this Part entitled 'Personal Information Collection Statement'.

申請人/保單持有人/受保人特此確認明白並同意在題為「收集個人資料聲明」之本部份中的內容。