Trinity General Insurance Company Limited
三 聯 保 險 有 限 公 司
1001 HONG KONG PLAZA, 10TH FLOOR, 188 CONNAUGHT ROAD WEST, HONG KONG.
香 港 干 諾 道 西 188 號 香 港 商 業 中 心 1001 室
TEL. : 3413 0988 FAX : 2559 7892 Web-site : www.tgi.com.hk

PROPERTY ALL RISK PROPOSAL FORM
財 產 全 保 投 保 書

1. Name of Proposer .....
2. Insured Address .....
3. Business or Occupation .....
4. Period of Insurance From ..... to .....

5. PROPERTY INSURED	SUM INSURED

特約代理商 / 經紀行 Authorized Agents / Brokers

6. Hire Purchase Owners:

.....

7. Are there any circumstances connected with the risks which would render the Insurance more than normally hazardous?	Yes ☐ No ☐ If yes, please state particulars _____ _____
8. In respect of the risks you now wish to Insure against:-	Yes No If yes, please state particulars
a) Have you suffered any loss during the past 3 years?	a) ☐ ☐ _____
b) Have you ever claimed from any Insurer?	b) ☐ ☐ _____
c) Have you ever been Insured?	c) ☐ ☐ _____
9. In respect of any of the risks you now wish to Insure against has any Insurer:	Yes No If yes, please state particulars
a) Declined to Insure you?	a) ☐ ☐ _____
b) Refused to renew your Insurance?	b) ☐ ☐ _____
c) Increased your premium on renewal?	c) ☐ ☐ _____

DECLARATION

I / we hereby apply for Insurance against risks as set out above and I /we declare that the above particulars are true and complete in every respect and that no material fact has been suppressed or withheld. I / we agree that this declaration and the answers given above together with any correspondence relative thereto shall be the basis of the contract between myself / ourselves and the Company and I /we further agree to accept a Policy subject to the usual conditions prescribed by the Company and endorsed on its Policy and to pay the first premium thereunder when called upon to do so.

Proposer's Signature _____ Date _____

信用咭付款授權書
Credit Card Payment Authorization Form

☐ **VISA** ☐ **MasterCard**

信用咭號碼 Credit Card No.

☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

信用咭持有人姓名
Cardholder's Name _____

信用咭有效期至
Card Expiry Date ☐☐ ☐☐
MM 月 YY 年

保險費 Premium
HK(港幣)**$** .....

....
持咭人簽署 日期
Cardholder's Signature Date

本人授權三聯保險有限公司從本人上述之信用咭賬戶支取有關此保險單之保險費。
I hereby authorize **Trinity General Insurance Company Limited** to charge Credit Card for the Insurance Premium of this Insurance Policy.

注意事項 NOTES

閣下之簽署式樣須跟閣下之信用咭上的式樣相同，並在所有曾更改地方簽署。此授權書只適用於以保戶名義登記之信用咭賬戶。如閣下在保險單生效前取消保險單，本公司將向閣下收取相等於保險費百分之五之行政費。
Please ensure that the signature used is the same as that on your credit card, and sign all amendments in the same way. This Authorization in only applicable for Credit Card Account under the registration of the Insured. The Company will charge you an amount equivalent to 5% of the Premium for administrative fee in the event that you cancel the Insurance Policy before its effective date.

如以信用咭繳付保費滿 HK$5,000，部份信用咭可享有 12 個月免息分期優惠，詳情請致電 3413 0916 與本公司職員聯絡。
Interest-free 12-month instalment is now available for policyholder who pays the premium (HK$5,000 or more) with certain credit cards. For details. Please call 3413 0916.

12 個月免息分期優惠以發咭銀行批核爲準。
Interest-free 12-month instalment is subject to the approval of the credit card issuing bank.

收 集 個 人 資 料 聲 明
Personal Information Collection Statement

閣下提供的資料，爲本公司提供保險業務所需，並可能用作任何與保險或財務有關的產品或服務、或作任何更改、變更、取消、續期、索償或索償分析；並可能移轉予現存或不時成立任何有關的公司、或任何其他從事與保險或再保險業務有關的公司、或與保險業務有關的中介人、索償或調查或其他服務提供者、或任何保險公司的協會或聯會。
閣上有權查閱及要求更正由本公司持有有關 閣下的個人資料，如有此項要求，可書面向本公司提出。
The information you provide to us is collected to enable us to carry on insurance business and may be used for the purpose of any insurance or financial related product or service or any alternations, variations, cancellation or renewal of them; any claim or analysis of it; and may be transferred to any related company or any other company carrying on insurance or reinsurance or financial related business or an intermediary or a claim or investigation or other service provider companies that exists or is formed from time to time.
You have the right to obtain access to and to request correction of any personal information concerning yourself held by us. Requests can be made in writing to our Company.