



太平洋保險有限公司

THE PACIFIC INSURANCE CO., LTD.

總行

九龍分行

元朗分行

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旅行平安保險投保書

PERSONAL ACCIDENT TRAVEL INSURANCE PROPOSAL FORM

1. 投保人姓名 (英文) _____ (中文) _____
Name of Proposer (English) _____ (Chinese) _____
2. 香港身份證號碼* _____ 年齡 _____ 性別 _____ 職業 _____
H. K. I. D. No. _____ Age _____ Sex _____ Occupation _____
3. 通訊地址 _____
Postal Address _____
4. 旅程所經地方 _____
Itinerary of journey _____
5. 所乘搭交通工具名稱 (如有, 請述明航空公司或船公司名稱及航班號碼)
Means of conveyance (please give name of Transportation Company, Flight No., if available) _____
6. 保險期間共 _____ 個月 / 天 由 _____ 至 _____ (首尾兩天包括在內)
Period of Insurance _____ months/days from _____ to _____ (both dates inclusive)
7. 投保金額 _____
Amount to be insured _____
8. 閣下是否另有其他個人意外保險及 / 或人壽保險? 是 YES 否 NO
Have you any other Personal Accident Insurance and/or Life Insurance?
若然, 請詳述:
If so, please state:
(a) 保險公司名稱 _____ (b) 投保金額 _____
Name of Insurance Company _____ Sum Insured _____
9. 受益人姓名 _____ 性別 _____
Name of Beneficiary _____ Sex _____
10. 受益人住址 _____
Residential Address of Beneficiary _____
11. 與投保人關係 _____
Relationship with the Proposer _____

* 閣下可親自出示身份證正本或提供副本以供查核。 Please present your Identity Card in person or provide a copy for verification.

聲明 DECLARATION

本人謹保證及聲明上述一切陳述均屬實無訛, 及本人健康正常, 身體健全。本人同意此投保書及所有聲明將成為本人與太平洋保險有限公司訂立保險合約之根據, 及願接受並遵守貴公司所簽發之保險單內所有條款及細則。

I hereby warrant and declare the truth of all the above statements and I am physically sound and my health is good. I hereby agree that this Proposal and Declaration shall be the basis of the Contract between me and The Pacific Insurance Company, Limited, and accept a policy subject to the terms, exceptions and conditions prescribed by the Company.

本人謹聲明本人已閱讀並同意太平洋保險有限公司有關收集、使用、保障和查閱個人資料的政策和做法。

I hereby declare that I have read and agree to The Pacific Insurance Company, Limited's policies and practices on the collection, use, security and access of personal data information in accordance with the Ordinance.

本人謹聲明本人已獲得以上所提及第三者之同意使用其個人資料以填寫此投保書。

I hereby declare that I have obtained the consent of the third parties mentioned hereinbefore for the use of their personal data in completing this proposal form.

日期 _____
Date _____

投保人簽署 _____
Signature of Proposer _____

除經發給正式保險單或按保單外, 本公司在未接納此投保書及未收妥保費前概不負任何承保責任。
The Company will not undertake any liability until this Proposal has been accepted and Premium received by the Company, except as provided by a Policy or an official Cover Note issued by the Company.

本公司專用 FOR OFFICE USE ONLY

Policy No. : _____ Premium : _____

Account Code : _____ Rate : _____

Remarks : _____

Loyal Insurance
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