大新保險
DAH SING INSURANCE

Dah Sing Insurance Company (1976) Limited
2703, 27/F Island Place Tower
510 King's Road, North Point
Hong Kong
Tel: 852 2808 5000
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Email: dsi@dahsing.com
Website: www.dahsing.com

SME SHOPSURE - PROPOSAL FORM
中小企盈店保 - 投保表格

1. Information of Insured 投保人資料

Name of Company/Business Entity 公司/機構名稱	
Certificate of Incorporation/Business Registration Certification Number (Please delete as appropriate) 公司註冊證書/商業登記證書號碼(請刪去不適用者)	
Name of Contact Person and Title 聯絡人姓名及職位	Contact Number 聯絡號碼
Email Address 電郵地址	Company Website(if any)公司網頁(如有)
Correspondence Address 通訊地址	
Business Nature 業務性質	
Insured Location 投保地址 / Place of Employment 工作地址 ☐ Same as the above Correspondence Address 與上述通訊地址相同 (Please supply information in a separate sheet when more than one (1) location or place of employment is insured. 如超出一處投保地址或工作地址，請另外以紙張提供資料)	
Insured Location Year of built 投保地址樓宇落成年份	Floor Area 建築面積
Effective Date 生效日期: DD 日/ MM 月/ YYYY 年	

2. Coverage 保障範圍

Section Cover 保障項目			**Sum Insured (HK$)投保額 (港幣)**
Section 1 第一節	Business Contents 業務財物	Contents 財物	
		Stock (Optional Cover) 存貨(自選保障)	
		Building (Optional Cover) 建築物 (自選保障)	
Section 2 第二節	Business Interruption 業務中斷	Additional Rent and Expenses 額外租金及開支	As per policy 根據保單
		Gross Profit or Standing Chargers (Optional Cover) 毛利或持續費用 (自選保障)	
Section 3 第三節	Money and assault 金錢及遇襲		As per policy 根據保單
Section 4 第四節	Third Party Liability 第三者責任		☐ HK$10,000,000 (Standard 基本)
			☐ HK$20,000,000 (Optional Cover 自選保障)
			☐ HK$30,000,000 (Optional Cover 自選保障)

Section 5 第五節	Personal Accident 人身意外	As per policy 根據保單
Section 6 第六節	Employees' Compensation (Optional Cover) 僱員補償(自選保障)	Please provide details in Employees' Details 請於僱員詳情提供資料
Section 7 第七節	Privacy Data Loss (Optional Cover) 私隱數據損失 (自選保障)	

For full terms, conditions and exclusions, please refer to the Policy Wording. 有關全部條款細則、保障範圍及不保事項，請參閱保單條款

Employees' Details 僱員詳情

Please provide a copy of latest wageroll (e.g. latest MPF contribution records, financial statements, tax returns or other relevant documents) of employee(s)
請提供最近的僱員工資副本（例如：最近的強積金供款記錄、財務報告、報稅表或其他相關文件）

Occupations of employee(s) by categories (inclusive of employees working outside Hong Kong SAR) 僱員職業類別 (包括在香港以外工作的僱員)	Estimated No. of Employees 預計僱員人數	^Estimated Annual Salaries/Wages & Other Earnings 預計的年薪 / 工資及其他收入
Full Time Employee(s)全職僱員		
Part-Time Employee(s)兼職僱員		

Are any employee(s) required to temporarily work from home? If yes, please provide number of employee(s) who required to temporarily work from home. 是否有僱員需要暫時在家辦公？如「是」者，請提供需要暫時在家辦公僱員數目。 Number of employees(s) 僱員數目: _____	Yes 是 ☐	No 否 ☐

This policy covers the employees as particularized hereinabove only. Furthermore, your independent contractor can be considered in law as your employee. If you want to include any independent contractor as employee under this policy, please provide the details to us for quotation. 本保單只保障上表所列的僱員。此外，你的獨立承判商在法律上有可能被視為你的僱員。如你想包括你的獨立承判商為本保單的受保僱員，請提供詳細資料給我們提供報價。

^Earnings include salaries, commissions, bonuses, overtime, allowance, etc., in accordance with the *Employees' Compensation Ordinance* (Chapter 282 of the Laws of Hong Kong). 根據《僱員補償條例》(香港法例第 282 章)，收入包括薪金、佣金、獎金、加班費、津貼等。

3. Questions 問題

1	Is there any burglar alarming system or security protection system at the insured premise? 是否已安裝防盜系列或保安設備？	Yes 是 ☐	No 否 ☐
2	Are any employee(s) required to station more than 180 days at anywhere outside Hong Kong? If yes, please give details. 是否有僱員需要駐守在香港境外地方超過 180 天？如「是」者，請詳述說明之。	Yes 是 ☐	No 否 ☐
3	Have you suffered any losses or damages covered by this plan during the past 3 years? If yes, please provide details in question 5. 閣下於過往三年是否就本計劃的承保範圍內的保障招致有關的損失或損毀？如「是」者，請於問題 5 詳述說明之。	Yes 是 ☐	No 否 ☐
4	Any employee(s) wounded or dead due to business operation in the past 3 years? If yes, please provide details in question 5. 是否有僱員在過去三年內，因執行職務而受傷或死亡？如「是」者，請於問題 5 詳述說明之。	Yes 是 ☐	No 否 ☐

5	[Note: Employer shall make request to the previous insurers for providing written evidence of such records] 【提示：僱主應向前保險公司要求提供意外記錄證據】				
	Date of Accident (DD/MM/YYYY) 發生意外的日期 (日/月/年)	Title of the employee (applicable to employees' compensation claim only) 該僱員職位 (只適用於僱員補償索償)	Details of each accident (Including cause of loss, degree of injury, current status, etc.) 每宗事故的細節（包括意外原因、受傷程度和現狀等）	Claim Amount (HK$) 賠償金額（港幣）	
				Paid Claim(s) (including partial claim payment) (HK$) 已支付的賠償金額(包括部分已支付的賠償)（港幣）	Outstanding Claim(s) (HK$) 尚待解決的賠償 (港幣）
6	Has any proposal /renewal ever been declined or cancelled or increase premium rate or imposed restricted terms or refused to renew? If yes, please give details. 閣下投保或續保時，是否曾經被保險公司拒絕或取消保單或增加保險費或附加限制條款或拒絕續保？如「是」者，請詳述說明之。			Yes 是 ☐	No 否 ☐

4.PAYMENT METHOD 繳付方法

☐ By Credit Card 信用卡 ☐ VISA ☐ mastercard

Issuer 發卡銀行 ☐ Dah Sing Bank 大新銀行 ☐ Other Bank 其他銀行_____

Cardholder's Name 信用卡持有人姓名 _____

Credit Card Number 信用卡號碼 _____

Credit Card Expiry Date 信用卡有效日期
MM/YY 月/年_____

☐ By Dah Sing's Bank Account
大新銀行的銀行戶口

Name of the Account Holder(s)
銀行戶口持有人名稱 _____

Account Holder's HKID card number/Certificate of Incorporate/Business Registration number 銀行戶持有人香港身份證號碼/商業登記證/公司註冊證書號碼 _____

Account Number 銀行戶口號碼 _____

☐ By Cheque 支票

Cheque payable to：Dah Sing Insurance Company (1976) Limited 支票抬頭：大新保險（1976）有限公司

5. PAYMENT AUTHORISATION 保費付款授權

I hereby authorise Dah Sing Insurance Company (1976) Limited to debit the premium payments together with IA Premium Levy of SME ShopSure which I enrolled, from my credit card/bank account stated above. 本人授權大新保險(1976)有限公司從本人上述之信用卡/銀行戶口賬戶支取本人投保的中小企盈店保所需保費，連同保監保費徵費。

Signature of Cardholder/Account Holder(s) 信用卡/銀行戶口持有人簽署

Signing Date 簽署日期

X_____

_____

DD 日 MM 月 YY 年

6.Personal Information Collection Statement ("PICS") 個人資料收集聲明

1. Purpose: Your personal data are collected by Dah Sing Insurance Company (1976) Limited ("Company") for the purpose of: **目的：**大新保險(1976)有限公司(以下簡稱「本公司」)為以下目的收集 閣下之個人資料：

(i) processing, administering, implementing and effecting the requests indicated in this document or any documents that you may submit to the Company from time to time; 處理、管理、落實及實行 閣下提交予本公司的本文件或不時提交的任何其他文件中所表明的申請；

(ii) providing all services related to this document (and the relevant insurance policy), including (but without limitation) promoting and improving such services or related services provided by the Company or its subsidiaries and affiliates; 提供與本文件(和有關保單)相關的一切服務，包括(但不限於)推廣及改善本公司或其子公司及關聯公司提供的有關本次申請的服務或相關服務；

(iii) communicating with you in relation to administrative purposes; 就行政目的與 閣下聯絡；

(iv) investigating, processing and paying claims made under your insurance policy; 調查、處理及繳付 閣下保單的索償申請；

(v) co-operating with any investigation and meeting any disclosure requirements imposed by any legal, regulatory, governmental, tax, law enforcement or other authorities, or regulatory or industry bodies within or outside the Hong Kong Special Administrative Region ("HKSAR"); 依照在香港特別行政區境內或境外任何法律、監管、政府、稅務、執法或其他機關，或監管機構或行業組織的要求，配合調查及作出披露；

(vi) transferring your personal data to any federation or similar organisation of insurance companies ("Federation") and any members of the Federation to carry out its regulatory functions and/or in the interest of insurance industry or any members; 將 閣下的個人資料發送給任何保險公司聯會或類似組織(以下簡稱「聯會」)以及聯會的任何成員，以供其履行其監管職能及/或為保險行業或聯會的任何成員的合理利益所需的其他職能；

(vii) statistical or actuarial research; and 統計或精算研究；及

(viii) other ancillary purposes which are directly related to the purposes set out above. 其他直接與以上目的相關的目的。

For using the personal data provided by you for promotional/marketing purposes, please refer to the section titled "**Use of Personal Data in Direct Marketing**".

The failure to provide the personal data by you may result in the Company being unable to provide products and services, assess your policy application, process claims under insurance policies issued by the Company, or process any other requests, enquiries, or complaints from you. 就本公司使用 閣下提供的個人資料作宣傳或市場推廣用途，請參閱「**使用個人資料作直接促銷用途**」一節。未能提供所需的個人資料可能導致本公司無法為 閣下提供產品及服務、評估 閣下的保單申請、處理保單索償、或處理任何 閣下提出的要求、查詢或投訴。

2. Transfer: Personal data provided by you to the Company will be kept confidential but it may be transferred to parties mentioned below for the aforementioned purposes: **轉移：**閣下提供的個人資料將保密處理，惟會因以上所述之目的將此等資料轉移給以下各方：

(i) any related company(ies), including subsidiaries or affiliates of the Company; 本公司的任何成員公司，包括附屬公司及聯屬公司；

(ii) any other unrelated company engaging in the business of insurance, financial services intermediaries or reinsurance; 任何其他從事保險、金融服務中介團體或再保險相關業務的非本公司成員公司；

(iii) financial service intermediaries that are authorised by the Company for the distribution of products and services provided by the Company; 獲本公司授權以分銷本公司所提供之產品及服務的金融服務中介團體；

(iv) claims, investigation or other services provider providing services relevant to your insurance policies; 提供與 閣下的保單有關的索償、調查或其他服務的提供者；

(v) relevant industry association and Federation that exist or are formed from time to time; 現有或不時成立的相關行業協會及聯會；

(vi) any person (including agent, contractor or third-party service provider) who provides administrative, telecommunication, computer, payment, data processing or other services in connection with the operation of the Company's business and provision of products and services to you; 就本公司之營運及向 閣下提供之產品及服務而為本公司提供相關的行政、電訊、電腦、付款、數據處理或其他服務的任何人士(包括代理商、承包商或第三方服務提供者)；

(vii) any legal, regulatory, governmental, tax, law enforcement or other authorities, or regulatory or industry bodies within or outside HKSAR; 於香港境內或境外任何法律、監管、政府、稅務、執法或其他機關，或監管機構或行業組織；

(viii) any third-party in connection with a transfer or a potential transfer of all or part of the business of the Company and some of the transferees may be located within or outside HKSAR; and 與本公司業務的轉讓或擬議轉讓有關的任何第三方，當中部分受讓方或位於香港境內或境外；及

(ix) Your insurance agents, intermediaries or referrer. 閣下的保險代理人或中介人或介紹人。

3. Access: You have the right to ascertain what type of personal data the Company holds, whether the Company holds your personal data and, if so, the

right to request access to and correction of any such personal data. Such request can be made to the Data Protection Officer of the Company at 2703, 27/F, Island Place Tower, 510 King's Road, North Point, Hong Kong. The Company has the right to charge a reasonable fee for processing a request to access your personal data. **查閱：**閣下有權查明本公司持有個人資料的類別、本公司是否持有　閣下的個人資料，如持有，閣下有權要求查閱本公司持有涉及　閣下的個人資料以及對該等資料作出更正。閣下可向本公司的資料保障主任提出此等要求，其地址為香港北角英皇道 510 號港運大廈 27 樓 2703 室。本公司有權為處理　閣下的個人資料查閱要求而收取合理費用。

Use of Personal Data in Direct Marketing　使用個人資料作直接促銷用途

4. Direct Marketing: Apart from the aforementioned purposes, the Company intends to use your personal data in direct marketing and the Company requires your consent (which includes an indication of no objection) for that purpose. In this connection, please note that: **直接促銷：**除了以上所述的用途，本公司擬把　閣下資料作直接促銷用途，而本公司爲該用途須獲得　閣下同意（包括表示不反對）。就此，請注意：

(i) your name, contact details, products and services portfolio information, transaction pattern and behaviour, financial background and demographic data held by the Company may from time to time be used by the Company in direct marketing; 本公司可能把本公司不時持有的閣下姓名、聯絡資料、產品及服務組合資料、交易模式及行爲、財務背景及人口統計數據作直接促銷用途；

(ii) the following classes of services, products and subjects may be marketed: 以下類別的服務、產品及促銷標的可能用作促銷：

(1) financial, insurance, credit card, banking and related services and products; 財務、保險、信用卡、銀行及相關服務及產品；

(2) reward, loyalty or privileges programmes and related services and products; 獎賞、客戶或會員或優惠計劃及相關服務及產品；

(3) services and products offered by the Company's co-branding partners (the names of such co-branding partners can be found in the application form(s) and/or advertising leaflet(s)/poster(s) for the relevant services and products, as the case may be); and 本公司的聯營夥伴提供之服務及產品（該等聯營夥伴的名稱載於相關服務及產品（視乎情況而定）的申請表及 / 或宣傳單張 / 海報中）；及

(4) donations and contributions for charitable and/or non-profit making purposes; 爲慈善或非牟利機構用途的捐款及捐贈；

(iii) the above services, products and subjects may be provided or (in the case of donations and contributions) solicited by the Company and/or: 上述服務、產品及促銷標的可能由本公司及 / 或下列各方提供或（就捐款及捐贈而言）徵求：

(1) group companies of Dah Sing Financial Holdings Limited ("DSFH"); 大新金融集團有限公司的集團公司；

(2) third party financial institutions, insurers, credit card companies, securities and investment services providers; 第三方金融機構、保險商、信用卡公司、證券及投資服務供應商；

(3) third party reward, loyalty, co-branding or privileges programme providers; 第三方回贈、客戶獎勵或優惠計劃供應商；

(4) co-branding partners of the Company and group companies of DSFH (the names of such co-branding partners can be found in the application form(s) and/or advertising leaflet(s)/poster(s) for the relevant services and products, as the case may be); and 本公司及大新金融集團有限公司的集團公司的聯營夥伴（該等聯營夥伴的名稱載於相關服務及產品（視乎情況而定）的申請表及 / 或宣傳單張 / 海報中）提供的服務及產品；及

(5) charitable or non-profit making organisations; 慈善或非牟利機構；

(iv) in addition to marketing the above services, products and subjects by the Company, the Company also intends to provide the data described in paragraph (4)(i) above to all or any of the persons described in paragraph (4)(iii) above for use by them or any of those persons in marketing those services, products and subjects, and the Company requires your written consent (which includes an indication of no objection) for that purpose; 除由本公司推廣上述服務、產品及促銷標的以外，本公司亦擬將以上(4)(i)段所述的資料提供予以上(4)(iii)段所述的全部或任何人士，以供該等人士在推廣該等服務、產品及促銷標的中使用，而本公司爲此用途須獲得　閣下書面同意（包括表示不反對）；

(v) The Company may receive money or other property in return for providing the data to the other persons in paragraph (4)(iv) above and, when requesting your consent or no objection as described in paragraph (4)(iv) above, the Company will inform you if it will receive any money or other property in return for providing the data to the other persons. 本公司可能因如以上(4)(iv)段所述將資料提供予其他人士而獲得金錢或其他財產的回報。如本公司會因提供資料予其他人士而獲得任何金錢或其他財產的回報，本公司會於以上(4)(iv)段所述徵求　閣下同意或不反對時如是通知　閣下。

If you do not wish the Company to use or provide to other persons your data for their use in direct marketing as described above, you may exercise your opt-out right by notifying the Company. Please add「√」in the appropriate box. 如　閣下不希望本公司如上述使用　閣下的資料或將　閣下的資料提供予其他人士作直接促銷用途，閣下可通知本公司以行使　閣下拒絕推廣之選擇權。請於適當方格內加上「√」。

☐ I do not wish the Company to use my personal data in direct marketing. 本人不願　貴公司使用本人之個人資料作直接促銷用途。

☐ I do not wish the Company to provide my personal data to any other persons for their use in direct marketing and, whether or not such persons are group companies of DSFH. 本人不願　貴公司將本人的個人資料提供予任何其他人士作直接促銷用途，不論該等人士是否大新金融集團有限公司的集團公司。

You may, in future, withdraw your consent to the use of your personal data by the Company and/or any third parties in direct marketing. Such request can be made to the Data Protection Officer of the Company at 2703, 27/F, Island Place Tower, 510 King's Road, North Point, Hong Kong and the Company shall cease to use your personal data in indirect marketing. 閣下將來可以撤回　閣下對個人資料作本公司及第三方直接促銷用途的同意書。這項要求可向本公司的資料保障主任提出，其地址為香港北角英皇道510號港運大廈27樓2703室。此後，本公司須停止使用　閣下的個人資料作直接促銷用途。

Amendment to the PICS　個人資料收集聲明的修訂

The Company reserves the right to, at any time with or without notice, amend the PICS by publishing such amendments on the website of the Company. However, the Company may (but is not obliged to), in addition to the aforesaid, notify you in writing of such amendment. Should there be any amendment to the PICS, such amendment will become effective with immediate effect. 本公司保留權利可隨時且在無須通知的情況下通過在本公司的網站上發佈修訂本個人資料收集聲明。然而，雖然如上所述，本公司可能（但沒有義務）以書面形式知會　閣下相關修訂。任何有關個人資料收集聲明的修

訂將在刊登後即時生效。

7.Declaration 聲明

1. I/We hereby declare my/our presence in Hong Kong at the time of application. 本人 / 吾等特此聲明本人 / 吾等申請此保險時身處香港。
2. I/We hereby declare that the information given above is true and correct to the best of my/our knowledge and I/we believe that all material facts affecting the assessment of this application have been disclosed. I/We understand that this application will not become effective until this Proposal Form has been accepted by Dah Sing Insurance Company (1976) Limited ("Company") and the Company reserves the right of final approval and agree that this Proposal Form should be the basis of the contract between me/us and the Company. 本人 / 吾等特此聲明在本投保書內所填報的資料均盡本人 / 吾等所知為屬實及正確，並確信已披露所有足以影響評估本申請的重要事項。本人 / 吾等明白本投保書被大新保險(1976) 有限公司 (以下簡稱「貴公司」) 接納後，本申請方始生效及　貴公司保留最終批核決定權，本人 / 吾等並同意本投保書作為本人 / 吾等與　貴公司之間的合約基礎。
3. I/We understand I/we shall refer to the policy document of this Plan for the details of the insurance coverage, exclusion clauses and terms and conditions, and I/we have read the related policy document. 本人 / 吾等明白所有保障項目、不承保事項、條款及細則概以此計劃保單為準，並聲明已細閱有關保單文件。
4. I/We have read and agree to be bound by the PICS and in particular, I/we agree that all personal data about me/us collected by the Company may be held and disclosed within or outside Hong Kong. 本人 / 吾等已細閱並同意受個人資料收集聲明的約束，特別是，本人 / 吾等同意所有　貴公司所收集有關本人 / 吾等的個人資料可在香港或香港以外地區持有及披露。
5. I/We understand that the provision of the personal data requested in this form is mandatory, and my/our failure to provide all data requested may mean the Company is unable to process my/our application. 本人 / 吾等明白提供本投保書上要求的個人資料是必需的，本人 / 吾等未能提供所需資料可導致　貴公司不能處理本人 / 吾等的申請。
6. I/We understand that this service/product is not targeted at customers in the EU. 本人 / 吾等明白本服務 / 產品並不是以歐盟的人士為目標。

In the event of any discrepancy between the Chinese and English versions, the English version shall prevail. 如中文及英文版之間有任何差異，一概以英文版為準。

Signature of Proposer with Company Chop (If applicable) 投保人簽署及公司蓋印 (如適用者)

Date 日期

8.Checklist of documents required for application 申請所需文件

1	a copy of latest wageroll (e.g. latest MPF contribution records, financial statements, tax returns or other relevant documents) of employee(s). 最近的僱員工資副本 (例如：最近的強積金供款記錄、財務報告、報稅表或其他相關文件)。	Please provide a copy 請提供副本 ☐

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Branch Name and Code 分行名稱及編號	Name of Agent 代理人姓名	Agent /Staff Number 代理人/職員編號	Contact Number 聯絡電話