

Delight Drive Private Car Insurance Plan

Our comprehensive coverage ensures worry-free driving

優悅私用汽車保險計劃

無憂馳騁之樂，全賴十足保障



INSURANCE RETIREMENT INVESTMENTS

EGICIP-0705

Be Life Confident



保障 · 退休 · 投資

EGICIP-0705

成就自信人生

優悅私用汽車保險計劃申請書 **Delight Drive Private Car Insurance Plan Application Form**

請以英文正楷填寫，並在適當的空格內填上 Please fill in this form in English block letters and tick the boxes where appropriate

私用汽車保險提供下列不同保障:

Private Motor Car Insurance provides the following options:

1. 第三者責任保險 — 第三者死亡、身體受傷或財物損失引致之法律責任
Third party liability cover: legal liability arising from the third parties' death, bodily injury and property(ies) damage;
2. 綜合性保險包括 Comprehensive cover:
 - a. 受保汽車本身之損毀及損失 Damage to and loss of the insured Motor Car;
 - b. 第三者責任保險，如以上(1)所述 Third party liability as described in (1) above;
 - c. 受保駕駛者及受保汽車上乘客因受保汽車發生的交通意外而受傷之醫療費用
Medical expenses for injury of insured driver and any passenger inside the insured motor car resulting from an accident to the insured motor car.

申請人資料 APPLICANT DETAILS

姓名(登記車主) Name of Registered Owner

姓 Surname 先生 Mr 女士 Ms

名 Given Name

香港身份證/駕駛執照號碼 HKID Card No. or Driving Licence No.

_____() / _____

出生日期(日/月/年) Date of Birth (dd/mm/yyyy)

____/____/____

通訊地址 Correspondence Address

職業/行業
Occupation or Business

住宅電話
Home Tel

手提電話
Mobile No.

公司電話
Office Tel

電郵地址
Email

駕駛經驗年數 Years of Driving Experience
超過 Over _____年Year(s)

如有分期付款租購，請註明按揭公司名稱
Hire Purchase Owner (Please state name if any)

投保範圍 COVERAGE REQUIRED

- 綜合性保險(全保) Comprehensive
 第三者責任保險 Third Party Liability

保障期
Period of Insurance

由 _____ 至 _____
from dd mm yyyy to dd mm yyyy

(首尾兩天計算在內 Both dates inclusive)

現時車錶哩數
Present mileage reading _____ 千米/公哩 Km

所投保之汽車有否安裝防盜警報系統?
Is the insured motor car installed with an Anti-Theft Alarm System?

- 沒有 No
 有(請附上資料) Yes (If yes, please attach details)

此車只用於
The insured motor car will used for:

- 社交、家庭及消閒用途 Social, domestic and pleasure use
 業務上用途 Business use

停車設施
Car Parking Facilities

住宅 Home 有 Yes 沒有 No
辦事處 Office 有 Yes 沒有 No

記名駕駛者資料 PARTICULARS OF THE NAMED DRIVER(S)

1	姓名 Full Name	與申請人之關係 Relationship to the Applicant	職業 Occupation
	出生日期 Date of birth	持有駕駛執照類別 Type of licence currently held	駕駛經驗年數 Years of driving experience
			超過Over _____年Year(s)
2	姓名 Full Name	與申請人之關係 Relationship to the Applicant	職業 Occupation
	出生日期 Date of birth	持有駕駛執照類別 Type of licence currently held	駕駛經驗年數 Years of driving experience
			超過Over _____年Year(s)

投保汽車資料 PARTICULARS OF THE INSURED MOTOR CAR

登記號碼 Registration Mark	車廠名稱 Make
汽車型號 Model	座位數量(不包括司機) Seating Capacity (Excluding driver)
底盤號碼 Chassis No.	汽缸容量 Cubic Capacity of Engine C.C.
製造年份 Year of Manufacture	何時購入 Date of Purchase
*估計價值(包括附加設備) Estimated Value including accessories HK\$	
*音響設備 Audio	*其他(請列明) Others (Please specify)
車身類型 Type of Body:	<input type="checkbox"/> 四驅車 4 Wheel Drive Jeep <input type="checkbox"/> 兩門跑/房車 2 Door Coupe/Saloon
	<input type="checkbox"/> 開蓬 Convertible <input type="checkbox"/> 四門房車 4 Door Saloon <input type="checkbox"/> 其他(請列明) Other (Please specify)

*重要通知：只適用於「綜合性保險」(全保)
閣下在本申請書內所提供之「投保汽車之估計價值」，將被用作計算「綜合性保險」(全保)保費。若受保汽車因損毀及損失而索償，本公司所提供之最高賠償，將受保單內條款及條件，(包括所有適用之自負額)及下列條款限制：(a)於損毀及損失時受保汽車之合理市值；或 (b)閣下於此申請書提供之「投保汽車之估計價值」(如適用)；以金額較低者為準。

*IMPORTANT NOTICE - FOR COMPREHENSIVE COVER ONLY
The "Estimated Value of the Motor Car" you provide us with in this Application Form will be used as the basis on which the premium for your comprehensive insurance is calculated. In the event of a claim for loss of or damage to the insured motor car, the maximum amount payable will be subject to the terms and conditions of the insurance policy (including any claims excesses that may apply) and will be limited to: a) the reasonable market value of the insured motor car at the time of its loss or damage; or b) the estimated value of the insured motor car as specified in this Application Form, (if applicable) whichever is the lesser amount.

其他核保資料 OTHER UNDERWRITING INFORMATION

- 1) 閣下曾否就汽車保險被保險公司拒絕投保、取消保單、拒絕續保 是 Yes 否 No
或附加強制性自負額?

Has any company declined your application; cancelled or refused to renew or imposed a compulsory deductible upon a motor vehicle insurance policy held by you.
若答「是」，請詳細註明。
If yes, please specify why: _____

- 2) 閣下是否享有「無賠償折扣」(NCD)? 是 Yes 否 No
Are you entitled to a No Claims Discount (NCD)?

a. 若答「是」，請回答以下問題。

If yes, please state:

1. 「無賠償折扣」
NCD _____ %
2. 保單號碼:
Policy No. _____
3. 保險公司名稱:
Name of the Insurance Company _____

b. 若「否」，請註明原因：

If no, please tick the appropriate box(es) below:

- 從未擁有汽車
I have never previously owned a car
- 本人曾就現有汽車保險索償
I made a claim under an existing policy
- 此為額外新添之汽車
The car is my additional car
- 其他，請詳述
Other reason(s), please specify _____

3) 閣下是否擁有其他汽車？ 是 Yes 否 No
Do you own any additional car(s)?
若答「是」，請示所擁有汽車的登記號碼。
If yes, please specify the Registration Mark(s) _____

4) 此車是否有經過變換、更改或改裝？ 是 Yes 否 No
Has the car you are applying to insure ever been converted, adapted or modified in any way.
若答「是」，請詳細註明。
If yes, please specify how _____

5) 閣下或其他記名駕駛者在過去兩年曾否因違反第375章道路交通(違例駕駛紀錄)條例而被扣分？ 是 Yes 否 No
Have you or any of your named driver(s) committed an offence against the Road Traffic (Driving-Offence Points) Ordinance, Chapter 375 and had points deducted during the last 2 years?
若答「是」，請詳細註明。
If yes, please specify _____

6) 閣下或其他記名駕駛者在過去三年內曾否因駕駛汽車時遭遇交通意外或失車，不論該汽車是否屬於閣下或其他記名駕駛者？ 是 Yes 否 No
Have you or any of your named driver(s) been involved in a traffic accident or lost a car during the last 3 years, irrespective of whether the car was owned by you or a named driver?
若答「是」，請詳細註明。
If yes, please give specify details of the accident/loss. _____

7) 閣下或其他記名駕駛者是否患有視、聽或其他身體缺陷？ 是 Yes 否 No
Do you or any of your named driver(s) suffer from defective vision, hearing or any physical infirmity?
若答「是」，請詳細註明。
If yes, please specify _____

8) 閣下有否在本公司購買其他保險，如有請列出保單號碼。 是 Yes 否 No
Do you have any other policies with our Company? If yes, please state the Policy Number.
保單號碼 自從
Policy No. _____ Since _____

付款方法 PAYMENT METHOD

本人選擇以下列方式繳交保費 I wish to pay my premium by

- 支票(抬頭請填「國衛保險(百慕達)有限公司」)
Cheque (please make payable to "AXA China Region Insurance Company (Bermuda) Ltd")
 信用咭(請填寫以下之信用咭付款授權書)
Credit Card (please fill in the Credit Card Authorisation Form at below)

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

VISA MasterCard

信用咭編號 Credit Card Account No.

_____ - _____ - _____ - _____

持咭人姓名

Cardholder's Name _____

保費(港幣)

Premium (HK\$) _____ 信用咭有效日期至 _____ / _____ / _____
Card Expiry Date _____ mm _____ yy

持咭人簽署 Cardholder's Signature _____ 日期(日/月/年) Date (dd/mm/yyyy) _____

本人現授權國衛保險有限公司從本人上述信用咭賬戶內扣除在此申請書內所申請的保險計劃之保費。本人亦謹此授權(國衛保險(百慕達)有限公司)將本人在此付款授權書內之資料披露予國衛保險有限公司及(國衛保險(百慕達)有限公司)及國衛保險有限公司將本人在此付款授權書內之資料披露予銀行及其他財務機構用作授權繳付在此申請書內所申請的保險計劃之保費。I hereby authorise AXA China Region Insurance Company ("AXA CRI") to charge the above Credit Card Account for the insurance premium of the insurance plan applied for in this application form. I hereby also authorise (i) AXA China Region Insurance Company (Bermuda) Limited ("AXA CRIB") to disclose to AXA CRI and (ii) AXA CRIB and AXA CRI to disclose to bank and/or other financial institution the information relating to this payment authorisation for the purpose of payment of the insurance premium of the insurance plan applied for in this application form.

申請人聲明 DECLARATION OF APPLICANT

本人/吾等謹此聲明，在此申請書內所填報之一切資料，不論是否本人親手所寫，就本人/吾等所知及所信，均為事實之全部並正確無訛。此申請書將成為本人/吾等與國衛保險(百慕達)有限公司(貴公司)所訂立合約之基礎，本人同意有關保險須在 貴公司接受本申請書後才生效，正式簽署保單者除外。

依據個人資料(私隱)條例本人謹此代表本人及其他在此申請書提及人士(「有關人士」)聲明及同意 貴公司可以在任何情況下(不論是否打算對本人及所有受保人採取不利行動)核對 貴公司所有收集或持有之任何有關人士的個人資料(不論是否此申請書所載或從其他途徑所取得)及/或可以使用、儲存、透露、(不論依在本港或海外)給 貴公司認為有需要之人士，不受限制地包括 貴公司之任何關聯公司、再保公司或任何與 貴公司有關之人士機構以(1)審核及評估此投保書及任何其他投保申請；(2)提供所有關於此投保書之服務之推廣、改善及進一步推廣於 貴公司及其關聯公司所提供之服務；(3)用於本人及有關人士作任何其他的溝通及/或遵守任何適用之司法區域之法律。如有關人士不能提供任何此申請書所需的資料，貴公司可能因此不能接受此投保申請。

本人謹此代表本人及所有有關人士授權任何僱主、註冊西醫、醫院、診所、銀行、政府機構、組織或人士，凡知道或持有任何有關本人及任何一位有關人士紀錄者，及/或曾診驗或可能將會診驗本人或任何其他有關人士，均可將該等資料提供 貴公司。貴公司或任何指定之醫生、醫療人員或化驗所，可就此投保申請或任何與之有關賠償申請，替本人進行所需之醫療評估及測試，作為本人及任何有關人士之健康狀況。此授權對本人之繼承人及授權人員具有約束力。本授權書的影印本與本均有同等效力。

本人聲明及同意已獲有關人士授權及同意本人聲明及協議。

本人及所有有關人士有權依據個人資料(私隱)條例要求查閱及更正任何 貴公司持有關於本人及有關人士之個人資料，所有要求均可以書面向一般保險部經理提出(地址:香港灣仔告士打道151號國衛中心18字樓)。

IWE DECLARE that the statements and particulars given in this application whether or not written by my own hand are, to the best of my/our knowledge and belief, true and complete; and that this application shall form the basis of my/our contract with AXA China Region Insurance Company (Bermuda) Ltd ("the Company"). IWE agree that the policy will be not in force until the application has been accepted by the Company, except to the extent of any official cover note which may be issued.

In accordance with the provisions of the Personal Data (Privacy) Ordinance of Hong Kong, IWE declare and agree on behalf of myself/ourselves, all insured person(s) and other persons referred to this application ("Relevant Persons") that any personal data of the Relevant Persons collected or held by the Company (whether contained in this application or otherwise) may be used in connection with matching for whatever purpose (whether or not with a view to taking any adverse action against me and any other Relevant Persons) with such other personal data and/or may be used, stored, disclosed, transferred (whether within or outside Hong Kong) to such persons as the Company may consider necessary including without limitation any of its affiliated companies, reinsurers, loss adjusters, lawyers, banks, police or any individuals/organisations associated with the Company to: (1) underwrite and evaluate this application and any other application for insurance purposes; (2) provide all services (whether related to this application or not) and promote, improve and further promote services by the Company and its affiliated companies; and (3) communicate with me and the Relevant Persons for any other purpose and/or comply with the laws of any applicable jurisdiction. If the Relevant Persons fail to provide any information requested in this application, it may result in the Company's inability to accept this application.

I HEREBY AUTHORISE on behalf of myself and all other Relevant Persons (1) any employer, registered medical practitioner, hospital, clinic, bank, government institution or insurance company that has any knowledge of me or any of the other Relevant Persons and who has attended or may hereafter attend to me or all other Relevant Persons to disclose such information to the Company, (2) the Company or any of its appointed medical examiners or laboratories to perform the necessary medical assessments and tests to evaluate the health status of myself or any other Relevant Persons in relation to this application and any claim arising therefrom. Such authorisation to survive me or any other Relevant Persons insofar as legally possible. A photocopy of this authorisation shall be as valid as the original.

I DECLARE AND AGREE that I have the full authority from and the consent of the other Relevant Persons to make the above declarations, agreements and authorisations.

I and the Relevant Persons have the right under the Personal Data (Privacy) Ordinance to request access to and correct any of the personal data held by the Company concerning myself and the Relevant Persons. Any request may be made in writing and addressed to the Manager of the General Insurance Division 18/F AXA Centre 151 Gloucester Road Wanchai Hong Kong.

申請人簽署 Applicant's Signature (請勿於空白投保書上簽署 Do not sign a blank form)	日期(日/月/年) Date (dd/mm/yyyy)
營業員姓名及編號 Agent Name and Code	營業員聯絡電話 Agent's Phone No.

注意 Note

- 此保單並不承保比賽、拉力賽、越野賽、教授駕駛、出租或收受報酬載乘客的用途。
- 遇有第三者財物損失索償時，受保人必須預先繳付該項損失之自負額予本公司，本公司方會辦理賠償。
- 如申請書之中、英文本有任何差別時，概以英文本為準。
- 此申請書及聲明乃是保險有效之組成部分及保單的基礎。有關此計劃的條款、條件、限額及不保事項，請查閱有關保單。
- 此申請書不適合於中國大陸作宣傳以及派發，並需要在香港境內簽署。
 - This Policy excludes the use of the car for racing competitions, rallies, trails, driving instruction, or the carriage of passengers for hire or reward.
 - In the event of third party property damage claim, the third party property damage excess must be paid to the Company before the claim can be settled.
 - If there is any difference between the English and Chinese versions of this Application Form, the English version shall prevail.
 - This Application Form together with the Declaration is incorporated in and is the basis of the Policy. For detailed terms, conditions, limitations and exceptions of AXA Private Car Insurance, please refer to the relevant Policy.
 - This Application Form is not for promotion and distributed in Mainland China and it must be signed in Hong Kong.

申報 Disclosure

投保人所周知之任何其他事項，若可能對所投保的保險的接受或評估構成影響，均必須預先申報。若未能確定甚麼事項應按申報，請即通知本公司或聯絡閣下的經紀人或保險代理。本公司亦建議閣下保存所提供的資料(包括信件副本)的記錄，以便日後參考，為保單閣下本身利益，務請確保申報全部有關事項，漏報可能使保單不能為閣下提供所需要的保險保障，甚至使保單完全失效。

Any other facts known to you, which are likely to affect the acceptance or assessment of the insurance cover you are requesting, must be disclosed in advance. Should you have any doubts as to exactly what you must disclose, please do not hesitate to ask us or your broker/ insurance agent.

We recommend you keep a record of any additional information (including copies of letters) given by you for your future reference. Ensuring we are fully informed at all times is in your own best interests, as non-disclosure of such information may result in your policy failing to provide you with the coverage you require, or possibly even invalidate the policy altogether.

FOR OFFICE USE ONLY

EXCESS

1. Accidental Damage	the first HK\$ _____	Insured By	
2. Theft	the first HK\$ _____		Policy No.
3. Unnamed Driver	the first HK\$ _____	Cover Note	221-
4. Young Driver	the first HK\$ _____		Premium
5. Inexperienced Driver	the first HK\$ _____	Approved By	Date
6. Third Party Property Damage	the first HK\$ _____		

ME	DATE	U/W	DATE
----	------	-----	------

優悅私用汽車保險計劃

人生樂事莫過於無拘無束，驅車任意飛馳。如何能避免突如其來的意外、意外損毀或偷竊破壞您的駕駛樂趣？AXA優悅私用汽車保險計劃，無論您與摯愛是否馳騁路上，都能享有24小時全面周全的保障。

承保及保障範圍

第三者責任保險

- 第三者死亡或身體受傷的最高保障額為HK\$100,000,000；及
- 第三者財物損毀的最高保障額為HK\$2,000,000。

或

綜合保險

- 除上列第三者保障範圍外，「綜合保險」提供受保汽車及其受保之附屬物的損失或損毀最高賠償額為賠償限額或合理市場價值（以較低者為準）。
- 保障受保駕駛者及車上乘客因交通意外而引致受傷的醫療費用，最高賠償額為HK\$5,000。

優悅私用汽車綜合保險之額外保障

同款新車賠償

如受保汽車於首次登記的12個月內(首次登記並須於製造日期內12個月內完成)，因被盜竊或於交通意外中完全損毀，便可換取同款的新車以作賠償。

更換擋風玻璃

若您只有擋風玻璃或車窗(天窗除外)因意外而導致損毀，您可獲免費更換優惠並毋須支付任何「自負額」。而您原有的「無賠償折扣」亦不受影響，此項保障的最高賠償金額為每年HK\$8,000。(VIP計劃則為HK\$5,000)

SOS 24小時拖車服務

若受保汽車因交通意外損毀，或機件故障而引致無法行駛，SOS將會提供24小時拖車服務，將受保汽車拖至最近的維修中心或您所指定的香港境內地方。

(註：本服務由SOS提供，SOS或會直接向您收取拖車費用。)

追討索償服務

如第三者被證實為應負上交通意外責任的一方，本公司將會在賠償款項付出後代您向該第三者追討所有不在承保範圍內之損失。

「零」折舊率修理賠償

若損毀的受保汽車在發生意外時車齡少於一年(以首次登記日期計算)，維修時所更換之零件均不會被扣除折舊率而獲全數賠償。

24小時諮詢熱線

全日24小時為您提供即時交通意外善後建議、協助及一般賠償程序資料。

(註：本服務由SOS提供，SOS或會直接向您收取費用。)

優悅(VIP)私用汽車保險計劃

AXA另備有優悅(VIP)私用汽車保險計劃，適用於價值HK\$600,000以上的汽車，保障範圍更為優越。請向AXA國衛一般保險部查詢。

請即致電 AXA，盡享駕駛樂趣！

如欲投保或查詢詳情，請致電

AXA一般保險客戶熱線：2828 8330

Delight Drive Private Car Insurance Plan



Few feelings in life are more satisfying than the convenience of being able to jump in your car and drive anywhere you want at any time. So why let unforeseen occurrences such as accidents, accidental damage or thefts wreck your driving pleasure? Take out AXA Delight Drive Private Car Insurance Plan and ensure you and your loved ones enjoy comprehensive 24-hour protection while both on the road and off.

Benefits & Features

Third Party Liability Coverage

- Enjoy protection of up to HK\$100 million in respect of bodily injuries or deaths occasioned to any third parties, and
- Enjoy protection of up to HK\$2 million in respect of property damage to any third parties.

OR

Comprehensive Coverage

- In addition to the third party coverage outlined above, Comprehensive Coverage offers you up to the Limit of Indemnity or a reasonable market value, whichever is lower, against loss or damage to your car and its insured accessories, and
- Up to HK\$5,000 of Medical expenses coverage for your car's insured driver(s) and occupants following an accident.

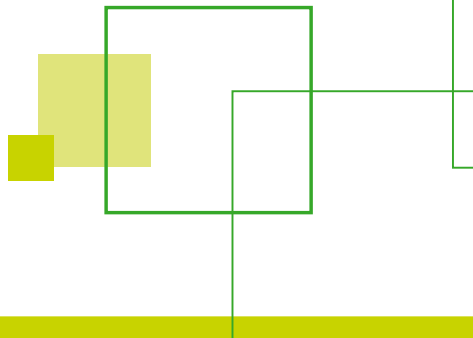
Additional benefits of Delight Drive Comprehensive Coverage

"New for old" replacement of vehicle

Replace a new car of the same make and model if your car is stolen or suffers total loss in an accident, within one year of its manufacture and the first 12 months of its first registration.

Windscreen replacement

If only the windscreen or any windows of your car (except sun-roof) is damaged, you will be paid for repair or replacement up to HK\$8,000 (or HK\$5,000 for VIP benefits per policy year) without applying any excess and your percentage of No-Claims-Discount will not be affected.



24-hour SOS towing service

SOS will arrange for your car to be towed to any car repairer or your designated location in Hong Kong if an accident or mechanical breakdown leaves it immobilized, unfit or unsafe to drive.

(Note: This service is provided by SOS who may charge you direct.)

Claims recovery service

Following claim payment, our teams will pursue un-insured losses resulting from accidents caused by a third party.

No deduction of depreciation for damaged parts

Pay no depreciation if your car is less than one year old from the date of first registration at the time of an accident.

24-Hour Enquiry Hotline

Obtain immediate advice, assistance and general claims information at all hours of the day and night.

(Note: This service is provided by SOS who may charge you direct.)

Delight Drive (VIP) Private Car Insurance Plan

To offer prestige protection, AXA provides Delight Drive (VIP) Private Car Insurance Plan for cars valued over HK\$600,000. For details, please contact our General Insurance Department.

**Call now and ensure the ultimate
in worry-free driving pleasure !**

To find out more or take out a policy, please call our
General Insurance Customer Hotline on 2828 8330.

AXA集團

AXA國衛乃AXA亞太區控股公司的一份子，屬環球AXA集團成員。AXA集團於提供財富保障及管理服務方面皆為世界翹楚。AXA集團的歷史可追溯至19世紀初，並於1986年開始在香港經營業務。AXA集團在世界各地為5,000萬名客戶保障未來，而單在香港及澳門已獲得100萬名客戶信賴。

About AXA

AXA China Region is a part of AXA Asia Pacific Holdings, a member of the global AXA Group, a worldwide leader in Financial Protection and Wealth Management. AXA has a history dating back to the early 19th century and commenced business in Hong Kong in 1986. AXA secures the future of 50 million people around the world. One million people in Hong Kong and Macau trust AXA to protect their families.

註：

1. 一般不受保項目包括：酒後駕駛、戰爭及恐怖活動。
2. 所有賠償及保費金額均以港幣計算。
3. 本小冊子只供參考之用，並不構成保險合約的一部分；有關此項保障計劃的內容及細則，請參閱保單文件。一切條款以保單為準，如有需要可向本公司索取保單樣本以作參考。
4. 如小冊子之中、英文版有任何差別，概以英文版本為準。

Notes:

1. Major exclusions: drink driving, war and terrorism.
2. All benefits and premiums are in Hong Kong dollars.
3. This leaflet is only a summary and does not constitute any part of the contract. For full terms and conditions, please refer to the policy document itself. A specimen policy can be made available to you upon request.
4. In the event of any inconsistency between English and Chinese versions of this leaflet, the English versions shall prevail.

國衛保險(百慕達)有限公司
(於百慕達註冊成立的有限公司)
香港銅鑼灣勿地臣街1號時代廣場1座36樓

AXA China Region Insurance Company (Bermuda) Ltd.
(Incorporated in Bermuda with limited liability)
36/F Tower One Times Square 1 Matheson Street Causeway Bay Hong Kong
電話 Tel : (852) 2828 8330 傳真 Fax : (852) 2511 9851
網址 Website: www.axa.com.hk