



GENERALI
Assicurazioni Generali S.p.A.

忠 利 保 險 有 限 公 司

個人意外計劃 (公務員 / 非公務員): Personal Accident plan (Civil Servant / Non-Civil Servant)

保障範圍 Scope of Coverage : 提供全球二十四小時意外保障 24 Hour Worldwide Coverage of accident

計劃特點 Product Highlights:

- ❖ 本計劃適用於公務員/非公務員及其家屬(包括配偶、父母、外父母、祖父母、子女、女婿、媳婦、兄弟姊妹、孫)。 Protection available for Civil Servants &/or Non Civil Servant employees and their family members including spouse, parents, grand parents, mother-in-law, father-in-law, son, son-in-law, daughter-in-law, sibling & grand child(ren).
- ❖ 個人意外計劃之保障額低至港幣 250,000。 Personal Accident Plan offers the lowest entry Sum Insured HK\$250,000
- ❖ 年繳保費之每張保單保費低至港幣\$300。 Annual Premium is as low as HK\$300.-
- ❖ 受益人可自由選擇。 Beneficiary either estate or designated
- ❖ 個人意外計劃之續保年齡高至 75 歲；並提供最高之意外保障額港幣 500,000 予年屆 71-75 歲之同事。 Personal Accident Plan offers renewal up to age of 75. For aged 71-75, we offer the highest Sum Insured HK\$500,000.
- ❖ 全球二十四小時保障。 24 Hour Worldwide Coverage
- ❖ 夫婦同時投保可享有九折優惠；「家庭計劃」子女更可獲免費保障。 10% Discount will be offered if a couple applies together; Free for Children for Family Plan
- ❖ 投保前毋須體格檢驗。 No medical Examination required
- ❖ 所有保障均不設自負金額。 No Excess under the policy
- ❖ 提供中醫、西醫醫療保障, 包括針灸及跌打。 Covering both Western & Chinese Medical Practitioner including Acupuncturist or Chinese Bonesetter
- ❖ 保障全面：包括氣體及食物中毒、暴動及民亂、劫機、失蹤、恐怖活動、天然災難(例如：地震、海瀾)等。 Broader Cover, including Gas and Food Poisoning, Riot and Civil Commotion, Hijacking, Disappearance, Terrorism activities.
- ❖ 保障一切業餘及消閒運動。 Cover for all amateur sports
- ❖ 免費保障：續保紅利、二級及三級燒傷保障、海外發生之意外死亡、殮葬費用保障等。 Free benefits: No claim Renewal Bonus, Burns Benefit (2nd&3rd Degree), Accident Death occurs outside HK & Funeral Expenses.

計劃內容 Benefits:

保障項目 Coverage	投保額 (港幣) Sum Insured (HK\$)	每人年繳保費(港幣) Annual Premium Per Person (HK\$)
A. 意外死亡及永久完全或部份傷殘 Accidental Death, Permanent Total or Partial Disablement - 保障受保人不幸因意外導致永久傷殘或死亡 Covers the Insured Person(s) pass away or disability arising from accident	計劃一 Plan 1: 250,000 計劃二 Plan 2: 500,000 計劃三 Plan 3: 750,000 計劃四 Plan 4: 1,000,000 計劃五 Plan 5: 1,500,000	計劃一 Plan 1: 300 計劃二 Plan 2: 590 計劃三 Plan 3: 870 計劃四 Plan 4: 1,140 計劃五 Plan 5: 1,625
B. 意外醫療費用 Accidental Medical Expenses - 保障受保人不幸因意外而需接受治療 Covers the Insured Person's medical expenses caused by accident - 每次意外最高賠償額 Max. per accident; - 包括跌打及針灸 Includes Bonesetter & Acupuncturist:	計劃一 Plan 1: 5,000 計劃二 Plan 2: 10,000 計劃三 Plan 3: 15,000	包括 Included

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	> \$200 每日每次 per day per visit, 最高賠償額 max. up to 80%; > \$1,500/ 每宗意外 Disability; \$2,000/ 每保單年度 Policy Year	計劃四 Plan 4: 20,000 計劃五 Plan 5: 25,000	
C.	燒傷保障 (二級及三級) Burns Benefit(2nd&3rd Degree) - 保障因意外導致損害 Covers the Insured Persons injury arising from burns	100,000	免費 Free
D.	海外發生之意外死亡 Accident Death occurs outside HK - 額外保障受保人不幸於海外因意 外導致永久傷殘或死亡 Additional cover if Insured pass way outside Hong Kong	100,000	免費 Free
E.	殮葬費用保障 Funeral Expenses 只限意外 Accident Only - 保障受保人不幸因意外死亡而導 致之殮葬費用 Covers the funeral expenses if the Insured Person(s) pass away arising from accident	5,000	免費 Free
F.	續保紅利 No claim Renewal Bonus	首三年每年可獲保障項目 A) 原本保額之 5% 增益，直至最高 15%並以港幣\$ 250,000 為限 For the first 3 years, 5% increase per policy year on the initial amount of benefit A), up to 15% and subject to max. \$250,000	免費 Free
G.	子女免費保障 (只限父母同時投保) Free coverage for child(ren) (If Insured + Spouse enrolled together)	父母保障項目 A) 之 15% Free benefit A) 15% of parent	免費 Free

*24 小時全球緊急支援服務 Free Worldwide 24-hour SOS Hotline Service

備註 Remarks :

- 1) 投保人之投保年齡為 6 個月 – 65 歲。〔可續保至 75 歲; 66-70 歲保障不變; 唯 71-75 歲之個人意外保障額為原來之 50%及上限為港幣 500,000, 以較小者為準; 此外, 不提供「意外醫療費用」之保障〕 Age limit: 6 months - 65 (Renewal up to 75; same coverage up to 70. For age 71-75, AD&D sum insured will be reduced by 50% of original amount and subject to max. HK\$500,000, whichever is lesser, no AMR will be offered.)
- 2) 子女年齡: 6 個月至 17 歲之未婚及未就業子女(全日制學生至 25 歲) Children Age Limit: unmarried and unemployed child between age 6 個月– 17 (or up to age 25 if full time student)
- 3) 年繳保費之每張保單最低保費為港幣\$ 300。 Annual Premium is HK\$300.-
- 4) 夫婦同時投保可享有保費總和10% 的折扣優惠。夫婦投保計劃必須相同。 10% discount will be offered on spouse plan. Spouse's benefit selection must be same as the Principle Insured.
- 5) 父母之保障額必須等如或低於主要投保人(公務員)。 Parents' cover & limits must be either the same or lower than the main Policyholder.
- 6) 子女投保只限於計劃一或二。 Children can only choose Plan 1 & 2
- 7) 本計劃不接受內地人投保, 除非他/ 她受僱於香港公司並持有香港簽發之工作證及身份證。 this Policy will not cover (i) PRC citizens who reside and work within the territory of PRC and/or ii) local citizens who work in local countries unless he/she is employed by the Policyholder in Hong Kong with working permit in Hong Kong and Hong Kong Identity Card issued.

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主要不承保事項 Main Exclusions

受保前已存在之損傷或疾病、自我毀傷、任何戰爭引致疾病或受傷、直接參與暴動、內亂、服兵役或服務於紀律部隊、參與職業運動、一切違法行為引致之受傷、懷孕或節育、精神病或智力不健全、因酒精或服食藥物引致之傷害、牙科護理、整容、先天性缺陷或疾病、愛滋病、性病、定期健康檢查或休養、非以乘客身份乘搭飛機所引致的傷害以及列於保單上的不保職業。 Pre-existing conditions, self-inflicted injury, acts of war, direct participation in strike, riot, civil commotion, service in military, disciplinary forces, professional sports, illegal acts, pregnancy or treatment pertaining to infertility, mental disorders, conditions caused by chronic, alcoholism or drug addiction, surgical or treatment of dental or cosmetic purpose, congenital anomalies or sickness, AIDS, sexually transmitted diseases, periodic check-up or rest cures, traveling except as fare-paying passenger.

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2) 閣下或其他受保人有否已投保意外、疾病、傷殘、醫療或人壽保險被拒保、延擱或撤銷? 或曾持有該種保險或證書，而於事後曾被修正、增加保費、取消、或被拒絕續保? 如有，請註明保險公司、保障項目、投保額、原因、現狀等。 Have your or other covered members' applications of life, accident or medical insurance ever been declined or postponed, or your insurance ever been modified, rated-up, cancelled or refused invitation for renewal? If yes, please state the Insurer, benefit, sum insured, reason, condition, etc.

Yes 有 No 無

3) 閣下或其他受保人之身體或四肢有無任何殘缺? 如有，請註明殘缺部位或病徵等。 Do you or other covered members have any physical or mental impairment or condition? If yes, please state the suffered area or diagnosis, etc.

Yes 有 No 無

4) 閣下或其他受保人曾否患有或曾治療以下疾病: 心臟病、高血壓、糖尿、癌症、腫瘤、潰瘍、肺結核、哮喘、癲癇、氣腫、肋膜炎、結腸炎、風濕性高熱病、梅毒、或任何腦部、中樞神經系統、腸胃、肝臟、胰、或生殖泌尿器等疾病? Have you or other covered members ever suffered from hypertension, heart disease, mental disorder, diabetes mellitus, cancer, tumour, ulcer, tuberculosis, asthma, epilepsy, stroke, emphysema, pleurisy, colitis, rheumatic fever, venereal disease; or any other disease of brain, central nervous system, gastro-intestinal tract, liver (or is Hepatitis B Carrier), pancreas, kidney, genito-urinary organs, back, spinal column, etc? If yes, please state suffered date, extent of recovery or any recurrence, etc

Yes 有 No 無

5) 閣下或其他受保人於過去五年是否曾經或打算將來接受任何醫藥治療、外科手術或服食任何藥物? 如有，請註明手術及藥物種類、主診醫生姓名及地址。 Have you or other covered members received in the past 5 years, currently receiving or will you contemplate to receive any medical, surgical treatment or medication? If yes, please state the type of surgery and medicine, doctor's name and address.

Yes 有 No 無

聲明 –

本人/吾等提供的資料，為忠利保險提供業務所需，並可能使用於下列目的：(i) 任何與保險或財務有關的產品或服務、或該等產品或服務的任何更改、變更、取消或續期；(ii)任何索償、或該等索償的調查或分析；(iii)行使任何代位權；及可能移轉予：a)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公司、或與保險業務有關的中介人或索償或調查或其他服務提供者，以達到任何上述或有關的；(b) 現存或不時成立的任何保險公司協會或聯會或類同組織（「聯會」），以達到任何上述或有關目的、或以便「聯會」執行其監管職能、或其他基於保險保險業或任何「聯會」會員的利益而不時在合理要求下賦予「聯會」的職能；及/或(c)透過「聯會」移轉予任何「聯會」的會員，以達到任何上述或有關目的。此外，在此授權忠利保險由「聯會」從保險業內收集的資料中查閱及/或核對本人/吾等任何資料。

本人/吾等有權查閱及更正由忠利保險持有有關本人/吾等的個人資料，如有需要，可向忠利保險個人資料保護主任提出。(香港分行：香港銅鑼灣勿地臣街1號時代廣場二座35樓。)

The information I/We provide to Generali is collected to enable Generali to carry on insurance business and may be used for the purpose of: (i) any insurance or financial related product or service or any alternations, variations, cancellation or renewal of such product or service; (ii) any claim or investigation or analysis of such claim; and (iii) exercising any right of subrogation; and may be transferred to: (a) any related company or any other company carrying on insurance or reinsurance related business or an intermediary or a claims or investigation or other service provider providing services relevant to insurance business for any of the above or related purposes; (b) any association, federation or similar organisation of insurance companies ("Federation") that exists or is formed from time to time for any of the above or related purposes or to enable the Federation to carry out its regulatory functions or such other functions that may be assigned to the Federation from time to time and are reasonably and/or to verify any of my/our data with the information collected by the Federation form the insurance industry.

I/We have the right to obtain access to and to request correction of any personal information concerning myself/ourselves held by Generali. Requests for such access can be made to Generali's Personal Data Protection Officer. (Hong Kong Branch: 35/F., Tower II, Time Square, 1 Matheson Street, Causeway Bay, Hong Kong.)

申請人簽署 Applicant Signature	日期 Date (DDMMYY)	代理人/ 中介人簽署 Producer Signature	公司專用 For Office Use Only

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