

樂信「家傭萬全保」

承保範圍：

賠償限額：

1 僱主責任 保障<僱員補償條例>下僱主之法律責任	HK\$100,000,000
2 住院及手術費用 每天住院及每次手術費全年最高限額 HK\$35,000	全年 HK\$35,000
3 診所治療費用 門診 (每日只限一次) 跌打或物理治療 (每日只限一次)	全年 HK\$4,200 每次 HK\$210 全年 HK\$700
4 牙科治療 因緊急的牙齒疾患而需接受口腔手術， 治療膿腫，X光檢查，脫牙或補牙	全年 HK\$2,500 實際合理及必須費用 之三分之二
5 個人意外傷亡保障 於非工作期間 (休息日) 意外受傷，導致 死亡或永久傷殘或自殺身亡	HK\$200,000
6 遣返原居地開支 - 家傭因病或嚴重受傷而不能繼續正常工作而需被送回原居地 - 運送家庭傭工之遺體回原居地 (包括自殺身亡)	全年 HK\$35,000
7 中斷服務現金津貼 受保家傭因患病、嚴重受傷而須住院， 由第四天起，可獲現金津貼補償	全年 HK\$6,000 每天 HK\$200
8 重新聘請家傭費用 受保家傭因患病、嚴重受傷或死亡而須 遣返原居地，重新補聘家傭的合理費用	全年 HK\$10,000
9 貸款保障 受保家傭因患病、嚴重受傷或死亡而不能 繼續工作，導致未能償還您曾對家庭 傭工作出有證據之私人財務借貸，尚欠 借貸餘款將可獲得賠償	全年 HK\$10,000
10 忠誠保障 因家傭偷竊、欺詐、舞弊行為所引致的 金錢損失	全年 HK\$5,000
11 家傭個人財物 在僱主居所內之個人財物損失 (自負額： 每宗索償 HK\$200)	全年 HK\$3,000

計劃特點

1. 免等候期，保障即時生效
2. 家傭投保年齡為18-60歲
(可續保至65歲)

保費 Premium

一年 One Year	HK\$ 680.00
兩年 Two Years	HK\$ 1,200.00
(including EC levy and Minimum Premium HK\$ 680.00 已包括徵款及最低保費為 HK\$680.00)	

註Remark: 此小冊子只供參考之用，詳情請參閱保單合約之保險條款細則
This brochure is for reference only, please refer to Insurer's actual
policy for complete details

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樂信保險經紀有限公司

LOYAL INSURANCE ADVISERS LIMITED

香港專業保險經紀協會會員

a member of Professional Insurance Brokers Association

總行 HEAD OFFICE:

九龍旺角登打士街32號歐美廣場18樓
18th Floor, Omega Plaza, 32 Dundas Street, Kowloon.
電話 Tel: 2388 3283 (12 Lines) 傳真 Fax: 2388 9578 (3 Lines)

分行 BRANCH:

新界元朗大棠路11號光華廣場11樓1103室
Room 1103, 11/F., Kwong Wah Plaza,
11 Tai Tong Road, Yuen Long, New Territories
電話 Tel: 2475 7248 (4 Lines) 傳真 Fax: 2473 2555 (2 Lines)

承保保險公司 Underwritten by:



閩信保險有限公司

Min Xin Insurance Company Limited
(a wholly owned subsidiary of Min Xin Holdings Limited) (閩信集團全資附屬公司)

香港總行 Head Office

香港中環紅棉路8號東昌大廈17樓
17/F., Fairmont House, 8 Cotton Tree Drive, Central, Hong Kong

閩信保險有限公司乃本港上市公司「閩信集團」(股票編號222)
之全資附屬機構，在香港及澳門經營一般保險業務超過35年，並
在福建省福州市設有代表處。

閩信保險並為廈門國際銀行及澳門國際銀行之聯屬機構，截至
2007年底，集團相關公司的總資產值超過港幣30億元，實力雄
厚。

樂信「家傭萬全保」

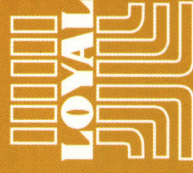
海外家傭綜合保險計劃 'LOYAL' Overseas Helper Insurance Scheme



樂信「家傭萬全保」

是一份既全面又超值的綜
合保險，能令您們在僱用
海外家傭時，倍感安心，
不會為勞工賠償責任及家
庭傭工的醫療開支而煩
惱。

保障更延伸至因家庭傭工自殺身亡賠償及將家傭遺
體運回原居地之費用，保障周全。



樂信保險經紀有限公司
LOYAL INSURANCE ADVISERS LIMITED

香港專業保險經紀協會會員
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'LOYAL' Overseas Helper Insurance

Scope of Cover : Maximum Limit :

1	Employees' Compensation Provide compensation according to the Employees' Compensation Ordinance	HK\$100,000,000
2	Hospitalization and Surgical Expenses No sub-limits for Room & Board Charges & Surgical Expenses	HK\$35,000 per year
3	Clinical Expenses Out-patient Expenses Bonsetter or Physiotherapist Treatment (followed by a registered medical practitioner)	HK\$4,200 per year HK\$210 per visit per day/ HK\$100 per visit per day/ HK\$700 per year
4	Dental Expenses Emergency dental expenses including Oral Surgery, Treatment of abscesses, X-ray, extractions or fillings as a result of domestic helper's dental disease	HK\$2,500 per year Two-thirds of the Expenses
5	Personal Accident Covering accidental death and permanent disablement occurs during the rest days of the domestic helper Special cover for the domestic helper sustain death due to suicide during the period of insurance	HK\$200,000
6	Repatriation Expenses - Repatriation of the domestic helper to her home country due to unfit to work in the event of serious sickness or injury - Transportation of mortal remains in the event of death (including death resulting from suicide)	HK\$35,000 per year
7	Loss of Services Cash Allowance Cash allowance for loss of services commencing from the forth day due to hospitalized, sickness or injury of the helper	HK\$6,000 per year HK\$200 per day
8	Replacement Helper Expenses Extra expenses necessarily incurred in employing a replacement helper if your helper is repatriation due to serious injury, illness of death	HK\$10,000 per year
9	Loan Protection If Employer make a financial loan with documented evidence proof to his/her domestic helper which cannot be repaid due to her death or her being medically unfit to continue employment, it will reimburse the amount of the loan outstanding	HK\$10,000 per year
10	Fidelity Coverage All pecuniary loss sustained by the employer from any act of larceny, dishonest or fraudulent misappropriation of monies	HK\$5,000 per year
11	Domestic Helper's Personal Belongings Accidental loss or damage of domestic helper's personal belongings within employer's residential premise (subject to an excess of HK\$200 per claim)	HK\$3,000 per year

海外家傭綜合保險計劃投保書 Application Form

樂信保險經紀有限公司 LOYAL INSURANCE ADVISERS LIMITED

香港專業保險經紀協會會員

a member of Professional Insurance Brokers Association

承保保險公司 Underwritten by :

閩信保險有限公司
(閩信集團全資附屬公司)
Min Xin Insurance Company Limited
(a wholly owned subsidiary of Min Xin Holdings Limited)

投保人資料 Applicant's Information (請以英文填寫)

投保人姓名 (僱主) Name of Insured / Employer	性別 Sex	男 M ☐ 女 F ☐
出生日期 D.O.B	身份證號碼 HKID Card No.	聯絡電話
地址 Address		

受保人資料 Domestic helper's Information (請以英文填寫)

受保人姓名 (家傭) Name of Helper	性別 Sex	男 M ☐ 女 F ☐
出生日期 D.O.B	身份證/護照號碼 HKID Card / Passport No.	
保單生效日期 Effective Date	國籍 Nationality	

☐ 一年 One Year HK\$680.00 ☐ 兩年 Two Year HK\$1,200.00

投保人聲明 Insured's Declaration

1. 本人/吾等聲明在此投保書內填報的資料,根據本人/吾等所知及所信,為確實及完全者。本人/吾等同意此投保書應作為本人/吾等與閩信保險有限公司保險合約的基礎及有關保險項在該公司接受此投保書後才生效。I/We declare that to the best of my knowledge and belief the information on this application form is true and complete in every respect. I/We agreed that this application and declaration shall be the basis of the contract between me/us and Min Xin Insurance Company Limited ("the Company") and this insurance will not become effective until this application has been accepted by the company.

2. 本人現委託樂信保險經紀有限公司安排上述保險亦同意繳交保費並明白支票抬頭須註明"樂信保險經紀有限公司"或"閩信保險有限公司" I/We agree to appoint **Loyal Insurance Advisers Limited** to arrange the above insurance and also agree and understand that the payment should be made by crossed cheque to order of "Loyal Insurance Advisers Limited" or the Company

個人資料聲明 Personal Information Collection Statement

閣下提供的資料,為本公司提供保險業務所需,並可能使用於下列目的: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;任何索償,或該等索償的調查或分析;行使任何代位權;及可能轉移予:任何有關的公司,或任何其他從事保險或專保業務有關的公司,或與保險業務有關的中介人,或索償調查或其他服務提供者,以達到任何上述或有關目的;現存或不時成立的任何保險公司協會或聯會或聯會(聯會),以達到任何上述或有關目的,或以便聯會執行其監督職能,或其他基於保險業或任何(聯會)會員的利益及不時在合理要求下賦予(聯會)的職能;及/或透過(聯會)轉予任何(聯會)的會員,以達到任何上述或有關目的。此外,在此授權閩信保險有限公司由(聯會)從保險業內收集的資料中查閱及/或核對閣下任何資料。閣下有權查閱及要求更正由閩信保險有限公司持有的閣下的個人資料。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 alterations, variations, cancellation or renewal of such product or service; any claim or investigation or analysis of such claim; and exercising any right of subrogation. And may be transferred to: 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; any association, federation or similar or organization 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 required in the interest of the insurance industry or any member(s) of the Federation; and members of the "Federation" by the "Federation" for any of the above or related purposes. Moreover, Min Xin Insurance Company Limited is hereby authorized to obtain access to &/or to verify any of your data with the information collected by the Federation from the insurance industry. You have the right to obtain access to and to request correction of any personal information concerning yourself held by our company.

投保人簽署 Signature of Applicant

投保人簽署
Signature of applicant: _____

日期 Date : _____

一般不保事項適用於所有保障項目 General Exclusion applicable to all Sections

Childbirth, pregnancy, miscarriage, abortion, intoxication by alcohol, narcotics or drugs, acquired immune deficiency syndrome (AIDS)/AIDS related complex (ARC), pre-existing injury sickness or disease, and any injury, sickness, accident or event occurring outside Hong Kong.
生育、懷孕、流產、酗酒或非法服用毒品、愛滋病或其相關病徵、在香港以外發生的任何傷病、事故。
其他不保事項,請參閱正式保單 (Please refer to the insurance policy for details of other exclusions in each section)