



Personal Accident Protector 個人意外保險

Personal Accident Protector

Accident happens at all times and everywhere. At Liberty, our Personal Accident Protector protects you and your family against the financial stress under such circumstances. No matter what lifestyle you choose, we can provide you with the 24-hour worldwide protection of great flexibility.

個人意外保險

意外無處不在,無時不有。在利寶, 我們的個人意外保險保障您和您的家 人免受意外所造成的經濟負擔。不論 您選擇何種生活方式,我們都能為您 提供周全且極靈活的全球保障。

Personal Accident Protector

Description of Coverage

1. Accidental Death and Permanent Disability

In the event of death or permanent disablement within 12 months from an accident, a lump sum amount will be payable equal to the percentage specified in Scale of Benefits.

Extra benefits provided:

- Compensation on 2nd and 3rd degree burns
- Compensation on hijacking upon injury or death
- Extra worldwide indemnity on public transportation, including public bus, taxi, ferry, underground train and commercial aircraft etc
- Extra indemnity within HKSAR while you are a victim of :
 - Hit by falling object in public street
 - Landslide, flood, fire or explosion
 - Shot by police or criminal in a criminal act being as an innocent person
- Compensation on disappearance and exposure if insured person has not been found one year after disappearance on aircraft crash or vessel sunk.

2. Temporary Total Disability

In the event of temporarily totally disabled and cannot perform the usual work of duty, Liberty will pay for a weekly amount up to a maximum period of 52 weeks, subject to 3-month employment proof prior to the accident. If you are self-employed, the cover will be valid for the period when you are hospitalized for accidental bodily injury and Liberty will pay 50% of the benefit.

3. Accidental Medical Expenses

Liberty will pay you the actual expenses incurred for treatment of injury by a Registered Medical Practitioner when the injury took place within 12 months from the date of accident.

Liberty will also pay for the cost of treatment by Registered Chinese Medicine Practitioner and Physiotherapist, subject to a maximum limit of HK\$180 per day and up to HK\$2,000 per year.

4. Hospital Cash

A hospital cash benefit will be payable from 2nd day of confinement if you are hospitalized in HKSAR public hospital as a result of an accident, maximum up to 182 days.

5. Free Worldwide Emergency Assistance Services

If you are travelling worldwide, Liberty will provide you with free 24-hour emergency assistance services, such as medical service referral, medical evacuation, repatriation of mortal remains and guarantee of medical expenses during hospitalization.



Scale of Benefits

Accidental Death and Permanent Disability

1. Accidental death 100% 2. Permanent total disability 100% 3. Permanent total paralysis of all limbs 100% 4. Permanent and incurable insanity 100% 5. Loss of entire sight of one or both eyes 100% 6. Loss of one or more limbs 100% 7. Loss of speech and hearing 100% 8. Loss of hearing in both ears 75% 9. Loss of hearing in one ear 15% 10. Loss of speech 50% 11. Permanent total loss of lens of each eye 50% 12. Loss of toes a) All 20% b) Two joints of each big toe 7.5% 13. Loss of metacarpals a) First or second 3% b) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints 50 metacarpals aboth joints 50 metacarpals a) Both joints 60 metacarpals a) Both jo
3. Permanent total paralysis of all limbs 4. Permanent and incurable insanity 5. Loss of entire sight of one or both eyes 6. Loss of one or more limbs 7. Loss of speech and hearing 8. Loss of hearing in both ears 75% 9. Loss of hearing in one ear 10. Loss of speech 10. Loss of speech 11. Permanent total loss of lens of each eye 12. Loss of toes a) All b) Two joints of each big toe 13. Loss of metacarpals a) First or second b) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints b) First joint 15% 15. Fractured Leg or Patella with established non-union 16. Shortening of Leg by at least 5cm 100% 100% 100% 100% 100% 100% 100% 100
4. Permanent and incurable insanity 5. Loss of entire sight of one or both eyes 6. Loss of one or more limbs 7. Loss of speech and hearing 8. Loss of hearing in both ears 9. Loss of hearing in one ear 10. Loss of speech 10. Loss of speech 11. Permanent total loss of lens of each eye 12. Loss of toes a) All b) Two joints of each big toe 13. Loss of metacarpals a) First or second b) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints b) First joint 15% 15. Fractured Leg or Patella with established non-union 16. Shortening of Leg by at least 5cm 100%
5. Loss of entire sight of one or both eyes 6. Loss of one or more limbs 7. Loss of speech and hearing 8. Loss of hearing in both ears 75% 9. Loss of hearing in one ear 15% 10. Loss of speech 11. Permanent total loss of lens of each eye 12. Loss of toes a) All b) Two joints of each big toe 20% b) Two joints of each big toe 3% c) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints b) First joint 15% 15. Fractured Leg or Patella with established non-union 16. Shortening of Leg by at least 5cm 100% 100% 100% 100% 100% 100% 100% 10
6. Loss of one or more limbs 7. Loss of speech and hearing 8. Loss of hearing in both ears 9. Loss of hearing in one ear 10. Loss of speech 10. Loss of speech 10. Loss of speech 11. Permanent total loss of lens of each eye 12. Loss of toes a) All b) Two joints of each big toe 13. Loss of metacarpals a) First or second b) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints b) First joint 15% 15. Fractured Leg or Patella with established non-union 15% 16. Shortening of Leg by at least 5cm 100% 15% 100% 100% 15% 100%
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8. Loss of hearing in both ears 9. Loss of hearing in one ear 15% 10. Loss of speech 50% 11. Permanent total loss of lens of each eye 50% 12. Loss of toes a) All b) Two joints of each big toe 13. Loss of metacarpals a) First or second b) Third, fourth or fifth 24% 14. Loss of one thumb a) Both joints b) First joint 15% 15. Fractured Leg or Patella with established non-union 15% 16. Shortening of Leg by at least 5cm 75% 75% 75% 75% 75% 75% 75% 75
9. Loss of hearing in one ear 10. Loss of speech 50% 11. Permanent total loss of lens of each eye 50% 12. Loss of toes a) All b) Two joints of each big toe 7.5% 13. Loss of metacarpals a) First or second b) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints b) First joint 15% 15. Fractured Leg or Patella with established non-union 16. Shortening of Leg by at least 5cm 10%
10. Loss of speech 11. Permanent total loss of lens of each eye 12. Loss of toes a) All b) Two joints of each big toe 13. Loss of metacarpals a) First or second b) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints b) First joint 15% 15. Fractured Leg or Patella with established non-union 16. Shortening of Leg by at least 5cm 50% 50% 7.5% 12. Loss of toes 7.5% 13. Loss of metacarpals 3% 3% 50 Jirst joint 15% 15% 15% 16. Shortening of Leg by at least 5cm 10%
11. Permanent total loss of lens of each eye 12. Loss of toes a) All b) Two joints of each big toe 13. Loss of metacarpals a) First or second b) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints b) First joint 15% 15. Fractured Leg or Patella with established non-union 16. Shortening of Leg by at least 5cm 7.5% 50% 7.5% 7.
12. Loss of toes a) All b) Two joints of each big toe 7.5% 13. Loss of metacarpals a) First or second b) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints b) First joint 30% b) First joint 15% 15. Fractured Leg or Patella with established non-union 16. Shortening of Leg by at least 5cm Right Hand Left Hand
a) All 20% b) Two joints of each big toe 7.5% 13. Loss of metacarpals a) First or second 3% b) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints 30% b) First joint 15% 15. Fractured Leg or Patella with established non-union 15% 16. Shortening of Leg by at least 5cm 10% Right Hand Left Hand
b) Two joints of each big toe 7.5% 13. Loss of metacarpals a) First or second 3% b) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints 30% b) First joint 15% 15. Fractured Leg or Patella with established non-union 15% 16. Shortening of Leg by at least 5cm Right Hand Left Hand
13. Loss of metacarpals a) First or second b) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints b) First joint 15. Fractured Leg or Patella with established non-union 15% 16. Shortening of Leg by at least 5cm Right Hand Right Hand
a) First or second b) Third, fourth or fifth 2% 14. Loss of one thumb a) Both joints b) First joint 15. Fractured Leg or Patella with established non-union 15% 16. Shortening of Leg by at least 5cm Right Hand 3% 2% 10%
b) Third, fourth or fifth 14. Loss of one thumb a) Both joints b) First joint 15% 15. Fractured Leg or Patella with established non-union 16. Shortening of Leg by at least 5cm 10% Right Hand Left Hand
14. Loss of one thumb a) Both joints b) First joint 15% 15. Fractured Leg or Patella with established non-union 15% 16. Shortening of Leg by at least 5cm 10% Right Hand Left Hand
a) Both joints b) First joint 15% 15. Fractured Leg or Patella with established non-union 16. Shortening of Leg by at least 5cm 10% Right Hand Left Hand
b) First joint 15% 15. Fractured Leg or Patella with established non-union 15% 16. Shortening of Leg by at least 5cm 10% Right Hand Left Hand
15. Fractured Leg or Patella with established non-union15%16. Shortening of Leg by at least 5cm10%Right HandLeft Hand
16. Shortening of Leg by at least 5cm 10% Right Hand Left Hand
Right Hand Left Hand
17. Loss of four fingers and thumb 70% 50%
3.70
18. Loss of four fingers 40% 30%
19. Loss of each of index, middle, ring or litter finger
a) Three joints 15% 10%
b) Two joints 10% 7.5%
c) One joint 7.5% 5%
Second Degree Burn Third Degree Burn
20. Major Burns
On 50% or more of body surface 100% 100%
On 30% or more of body surface 50% 100%
On 20% or more of body surface 40% 100%
On 10% or more of body surface 20% 75%
On 5% or more of body surface 10% 50%



Extra Benefits

1. No-Claims Bonus

If you have been insured with Liberty for one year and have not reported, made or arisen any claim, Liberty will increase your original sum insured for Accidental Death and Permanent Disability benefit by 5% every year, up to maximum five consecutive years.

2. Personal Effects Damage Extension

If you suffer from damage to your clothing and/or personal effect at the same accident leading to hospitalization, Liberty will reimburse for the damage up to HK\$3,000, subject to HK\$250 excess.

3. Burial and Funeral Expenses

If you suffer from loss of life as a result of accident during the policy year, Liberty will reimburse the actual expenses for burial, cremation and funeral changes up to HK\$20,000.

4. Extended Dangerous Activities Coverage

Various kinds of dangerous activities are now covered by our Personal Accident Insurance, including skiing, snow boarding, water skiing, snorkeling, rafting, parachuting, sky-diving, trekking, bungee-jumping, etc.

5. Family Discount

If you insure with your direct family members, including spouse, parents, grandparents, siblings and children aged 21 or below at the same time, an extra 10% discount will be granted on all new applications.

Added Protection (Choose 1 out of 4)

1. Professional Occupation Promotion

For insured as full-time accountant, indoor architect, actuarial, registered medical practitioner, lawyers and registered insurance agent or technical officer, 5% extra premium discount will be offered.

2. Child Support and Tuition Fund

A lump-sum HK\$100,000 benefit will be payable to insured person's dependent children aged 18 or below upon insured death arisen from accident.

3. Indemnity for School Activities and Travelling

An additional HK\$100,000 benefit will be payable to insured full-time student aged 25 or below if he suffers from accidental bodily death or major burns during the course of participating school activities or travelling by school bus.

4. Home Modification Expense

If insured person sustains bodily injury as a result of an accident which leads to permanent total disablement during the policy period, Liberty will reimburse for the actual expenses in renovating his principal home for the caring purpose, subject to a maximum amount of HK\$100,000.



Plan Classification

	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	
Accidental Death and Permanent Disability * Sum Insured must be lesser than 5 times of proven annual salary.	HKD 1,000,000	HKD 1,800,000	HKD 3,000,000*	HKD 5,000,000*	HKD 1,000,000	
Accidental Death						
Permanent Total Disability			100/ 1000/			
Major burns			10% - 100%			
Loss of toe(s) or finger(s)		5% - 70%				
Extra Indemnity Applicable to travelling in public conveyance, accidents happening in	HKD 500,000	HKD 1,000,000	HKD 1,500,000	HKD 2,000,000	HKD 500,000	
HKSAR related to falling object on pedestrian, landslide, flood, fire, explosion and innocent shot.	All above Accident Death and Permanent Disability Benefits are subject to a maximum an HKD7,500,000 in aggregate under any one period of insurance					
Temporary Total Disability (per week, max. to 52 weeks)	HKD 1,000	HKD 2,000	HKD 4,000	HKD 6,000	-	
Accidental Medical Expenses Sum insured per year	HKD 20,000	HKD 35,000	HKD 50,000	HKD 100,000	HKD 20,000	
Inclusive of: Chinese medication and treatment, bone-setting, acupuncture expenses, chiropractic and physiotherapy treatments.	Subject to HKD 180 per day and up to HKD 2,000 per year				r	
Hospital Cash	HKD 250	HKD 250	HKD 300	HKD 400	HKD 250	
	Ma	ximum to 182 days	and confined to pu	ublic hospitalization	only	
24-Hour Emergency Assistance Services			Free			

Annual Premium Per Insured Person (HKD)	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
Occupation Class 1	HKD 1,650	HKD 2,790	HKD 4,500	HKD 7,600	HKD 1,815
Occupation Class 2	HKD 2,300	HKD 3,935	HKD 6,410	HKD 10,780	
Occupation Class 3	HKD 3,875	HKD 6,725		<u>-</u>	<u>-</u>
Occupation Class 4	HKD 6,800	HKD 11,710	- III	-	-

Class of Occupation

HK residents aged 3 to 65 can be applied and renewable up to 75. Eligible benefit plans and premium will be subject to below occupation classification:

Class 1	Clerical and non-manual occupations e.g. accountant, architect, auditor, banker, clerk, clinic nurse, doctor, indoor sales representative, lawyer, physiotherapist, secretary, stock broker, teacher etc
Class 2	Occupations involving outdoor work or occasional manual work only e.g. factory supervisor, foremen, hairdresser, local domestic helper, property agent, salesman, supervision engineer, supervision civil engineer, surveyor, tailor, waiter (not bar, lounge or night club) etc
Class 3	Occupations involving skilful and slight manual work but not using heavy and hazardous machines e.g. baker, cook, fixed-stall hawker, hotel janitor, painter, supermarket worker, motor repair worker, watchman (unarmed) etc
Class 4	Occupations involving heavy manual work or hazardous nature e.g. air-conditioning repairman, butcher, carpenter, disciplinary squad, gas deliveryman, patrolman, tractor driver, truck driver (below 10 tons and not to China), etc
Class 5	Child aged 3 - 18 or 19 - 25 but under full-time education Housewife or not under employment

Please refer to Liberty for clarification on occupations not listed in above table.

Major Exclusions

Any injuries or death related to illness, disease, pregnancy, dental care, cosmetic surgery, mental disorder, self-inflicted acts, suicide and professional racing will not be covered. Consequence of any pre-existing condition, treatment of alcohol or drug addiction and accident arisen from serving in the disciplinary forces or other armed service are not covered as well.

Note: This brochure serves as a general guideline. Please refer to the Policy and Schedule for details of coverage. Should there be discrepancies between Chinese and English version, English version shall prevail.

In this brochure, 'you' and 'your' refer to the policy owner. 'Liberty', 'we', 'us' and 'our' refer to Liberty International Insurance Limited.

Personal Accident Protector is an insurance product provided and underwritten by Liberty International Insurance Limited, which is authorized and regulated by the Commissioner of Insurance of the Hong Kong SAR.

You should fully understand the product features and risks before purchasing this product. For more information, please contact your insurance adviser. To view our Privacy Policy, you can go to our website at www.libertyinsurance.com.hk. You may also ask us not to use your personal information for direct marketing purposes by writing to us. We will not charge you a fee for this.

Liberty International Insurance Limited is a 100% owned subsidiary company of Liberty Mutual Insurance Group. Boston-based Liberty Mutual Insurance Group, founded in 1912, is a diversified global insurer providing a wide range of insurance products. We rank 73rd on the Fortune 500 list of largest corporations in the U.S. based on 2015 revenue. Liberty Mutual Group employs over 50,000 people in 900 offices throughout the world helping people live safer, and more secure lives.

意外保險

保障範圍

1. 意外死亡及永久性傷殘

由發生意外起12個月內死亡或永久性傷殘,將按照保障賠償表中規定的百分率作一筆過賠償。

提供的額外保障:

- 二度和三度燒傷賠償
- 因被劫持而受傷或死亡的賠償
- 公共交通(包括公共巴士、計程車、輪船及商用飛機等)的額外 全球賠償
- 如果閣下在香港特別行政區遇到以下情況,將獲得額外賠償:
 - 在公眾街道上被高空墜物擊中
 - 遇到山崩、洪水、火災或爆炸
 - 在無犯罪的情況下被警察或罪犯無辜射中
- 如果受保人在因飛機失事或輪船沉沒失蹤一年後仍未找到,亦將 獲得賠償。

2. 暫時性完全傷殘

如果閣下暫時性完全傷殘,並喪失正常工作能力,利寶將支付「每週賠償」,最多52週,但須提交事故發生前3個月的工作證明。

如閣下為自僱人士,此保障於您因身體意外受傷而住院期間有效,並且以賠償額為50%計算。

3. 意外醫療費用

發生事故之12個月內,利寶將支付註冊醫生在發生傷害時所提供治療的實際費用。

利寶還將支付註冊中醫師及物理治療師的治療費用,每日最高賠償金額為180港元,全年以2,000港元為上限。

4. 住院現金

如果閣下因意外而在香港特別行政區公立醫院接受住院治療, 由住院的第2天起,我們將向閣下支付住院現金,最長保障期 可達182天。

5. 免費全球緊急支援服務

如果閣下在世界各地旅行,利寶將為閣下提供免費的24小時緊急支援服務,例如醫療服務轉介、醫療救援、遺體運送及住院期間的醫療費用開支。

保障賠償表

意外死亡及永久性傷殘

保障項目	保額賠償	百分率			
1. 意外死亡	100				
2. 永久性完全傷殘	100				
3. 全身癱瘓	100				
4. 永久性精神失常	100				
5. 單目或雙目完全失明	100				
6. 喪失一肢或以上	100				
7. 喪失語言能力及失聰	100				
8. 雙耳失聰	75				
9. 單耳失聰	15				
10. 喪失語言能力	50				
	50				
11. 完全及永久喪失每隻眼睛的晶狀體 12. 喪失腳趾	30	70			
甲) 所有	20	0/			
	7.5				
乙) 每隻大腳趾的兩節關節 13. 喪失掌骨	7.0	770			
甲) 第一或第二節 乙) 第三、第四或第五節		3% 2%			
	2.	70			
甲) 所有關節	30	0/			
乙) 第一節關節	15 15				
15. 腿骨或膝蓋骨折裂而不能復原					
16. 任何一腿畸短五厘米或以上	10 右手	% 左手			
17. 喪失四指及拇指	70%	50%			
18. 喪失四指	40%	30%			
19. 喪失食指、中指、無名指或尾指	4.50/	100/			
甲) 三節關節	15%	10%			
乙) 兩節關節	10%	7.5%			
	7.5%	5%			
00 四季性傷	二世院傷	二三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三			
20. 嚴重燒傷	1000/	1000/			
身體表面有50%或以上面積被燒傷	100%	100%			
身體表面有30%或以上面積被燒傷	50%	100%			
身體表面有20%或以上面積被燒傷	40%	100%			
身體表面有10%或以上面積被燒傷	20%	75%			
身體表面有5%或以上面積被燒傷	10%	50%			



額外保障

1. 無索償折扣

如果閣下於利寶承保期間全年並未報告、呈交或提出任何索償,利寶會將意外死亡及永久性傷殘的投保額按年免費增加原投保額的5%,最多可連續累積5年。

2. 個人財物損壞

如果閣下的衣物及/或個人財物在引致住院的同一意外中遭受損壞,利寶將賠償有關損壞,賠償金額最高達3,000港元,每次索賠需自負首250港元。

3. 殮葬費用

如果閣下在保單年度因意外死亡,利寶將賠償實際的殮葬、火葬及喪葬費用,賠償金額最高達20,000港元。

4. 危險活動保障

我們的個人意外保險現已承保各類危險活動,包括滑雪、滑雪板、滑水、浮潛、漂流、降落傘、空中漫遊、高山遠足、 吊索跳等。

5. 家庭投保折扣

如果閣下與閣下的直系親屬(包括配偶、父母、祖父母、兄弟姐妹及年齡在21歲或以下的子女)同時投保,所有新投保申請均可享有額外10%的保費折扣。

附加保障(請從以下4項中選擇1項)

1. 專業性職業推廣優惠

若受保人為全職會計師、室內建築師、精算師、註冊醫生、律師及註冊保險代理,可享有5%的額外保費折扣優惠。

2. 子女撫養及教育基金

若受保人因意外死亡,我們將向受保人年齡在18歲或以下受供養的子女付出100,000港元的一筆過賠償。

3. 學校活動及出行賠償

若年齡在25歲或以下的受保人在參加學校活動或乘搭校車時意外死亡或嚴重燒傷,我們將向其支付額外100,000港元的賠償。

4. 家居改裝費用

若受保人在保單期間因意外而引致永久完全傷殘,利寶會賠償為便於照顧受保人而需改裝其主要居所設施所產生的實際開支,最高金額為100,000港元。



計劃類別

	計劃 1	計劃 2	計劃 3	計劃 4	計劃 5
意外死亡及永久性傷殘 * 必須證明投保額少於5倍年薪。 意外死亡 永久性完全傷殘	1,000,000 港元	1,800,000 港元	3,000,000 港元*	5,000,000 港元*	1,000,000 港元
嚴重燒傷			10% - 100%		
喪失腳趾或手指	5% - 70%				
額外賠償 適用於二度/三度嚴重燒傷、乘坐公共 交通工具、在香港特別行政區上發生與	500,000 港元	1,000,000 港元	1,500,000 港元	2,000,000 港元	500,000 港元
行人路上的高空墜物、山崩、洪水、 火災、爆炸及被無辜射擊有關的事故。	在任何一個保險期內,上述意外死亡及永久性傷殘賠償的最高總賠償額為7,500,000港元				
暫時完全傷殘 (以每週計,最長52週)	1,000 港元	2,000 港元	4,000 港元	6,000 港元	
意外醫療費用 每年投保額	20,000 港元	35,000 港元	50,000 港元	100,000 港元	20,000 港元
包括:中醫治療、跌打、針灸治療費用、 脊椎治療及物理治療。	每日最高180港元,以全年2,000港元為上限				V
住院現金	250 港元	250 港元	300 港元	400 港元	250 港元
		最長182	天並只限於在公立	醫院住院	
24小時緊急支援服務			免費		

每位受保人的每年保費(港元)	計劃 1	計劃 2	計劃 3	計劃 4	計劃 5
第一類職業	1,650 港元	2,790 港元	4,500 港元	7,600 港元	1,815 港元
第二類職業	2,300 港元	3,935 港元	6,410 港元	10,780 港元	
第三類職業	3,875 港元	6,725 港元			
第四類職業	6,800 港元	11,710 港元			-

職業類別

年齡介乎3至65歲的本港居民均可適用並可續保至75歲,符合條件的保障計劃及保費將受以下職業類別之規限:

第一類	文職及非體力勞動職業 例如會計師、建築師、審計師、銀行家、文員、診所護士、醫生、室內推銷員、律師、物理治療師、 秘書、股票經紀、教師等
第二類	從事戶外工作或只須偶然從事體力勞動工作之職業 例如工廠管工、工頭、髮型師、本地家傭、地產代理、推銷員、工程師管工、土木工程師管工、測量師、 裁縫、服務員(非酒吧、酒廊或夜總會類)等
第三類	從事技術性及輕度體力勞動工作但無須使用重型及危險機械之職業 例如麵包師傅、廚師、固定攤檔小販、酒店門衛、油漆工人、超市員工、汽車維修、看守員 (非武裝)等
第四類	從事高度體力勞動工作或具有危險性之職業 例如冷氣機維修員、屠夫、木匠、紀律部隊、天然氣送貨員、巡邏員、拖拉機駕駛員、貨車司機 (10噸以下及不運貨至中國)等
第五類	年齡介乎3至18歲或19至25歲但就讀全日制學校之人士 目前尚未就業人士或家庭主婦

如屬不包括在上述分類之職業類別,請向利寶查詢。

主要不保範圍

任何與生病、疾病、懷孕、牙齒保健、美容手術、精神病、自身蓄意行為、自殺及專業競賽有關的受傷或死亡將不受保障。任何投保前已存在疾病、酒精或藥物成癮治療及因在紀律部隊服役或其他武裝服役而引起的事故亦不受保障。

註:本手冊僅為一般性簡介,僅供參考之用。有關承保之具體內容,以保單所載為準,如中文譯本與英文有異,以英文文本為準。

在本小冊子,"你"及"你的"是指保單持有人。"利寶"、"我們"及"我們的"是指利寶國際保險有限公司。

本個人意外保險是一個由利寶國際保險有限公司提供及核保的保險產品,並得到香港保險業監理處授權及監管。

你應該在購買本產品前完全了解產品性質及風險。如想了解更多資訊,請聯絡你的保險中介人。

如要瀏覽私隱條例,你可到我們的網站www.libertyinsurance.com.hk。如不想我們用你的個人資料作市場推廣用途,你亦可以用書面聯絡我們。我們不會因此而向你收費。

利寶國際保險有限公司是利寶互助保險集團的全資附屬公司。利寶互助保險集團於1912年在美國波士頓成立,是一間多元化的國際保險公司。按2015年的收入計算,我們成功打入美國《財富》雜誌「美國最大型公司500強」之第73位。我們在全球900多間分行共僱用了超過50,000名員工。「助您生活無憂」是我們在世界各地經營的方針。

Underwritten by Liberty International Insurance Ltd. 由利寶國際保險有限公司承保。

○ Telephone No. 電話□ (852) 2892 3888□ Fax. No. 傳真□ (852) 2577 9578





Individual Personal Accident Protector Application Form 個人意外保險投保表格

(Please tick appropriate box and complete in English block letters)(請✓適用方格及以英文正楷填寫)

Details of Applicant 投	保人資料			
□ One of Insured Person(s) 其中一位	立受保人 🗆 Policy	rholder 保單持有人		
Applicant Information 申請人詳情				
Applicant's Name 投保人姓名:□ M	1r. 先生 □ Ms. 女士	Surname 姓:	Given Nam	ne 名 :
H.K.I.D. Card No 香港身份証號碼:_	D	ate of Birth: 出生日期]:DD日/	_MM月 /YY年
Telephone 電話:		_ Email Address 電郵	地址:	·
Correspondence Address 通訊地址	:			
Flat/Room 室 Floor 樓	Ł Bloci	k 座 Bu	ilding 大廈	
Estate name/Street no. & name/Lot ı	10. 屋苑名稱/街名及	及門牌/地段:		
		District 地區	(HK/KL	N/NT 香港/九龍/新界)
Period of Insurance 承保期:From 由]:DD日/	MM月 /YY年	To 至:DD日/_	MM月 /YY年
Details of Insured Perso	n(s) 受保人詳	情		
Spouse aged 65 or below and all unmarried ch have more than 2 children, please provide det 此申請可包括閣下年齡在65歲或以下的配偶 加紙填寫。	tails on a separate sheet.			
Relationship with Applicant 與申請人關係	Applicant 申請人	Spouse 配偶	Child (1) 子女(1)	Child (2) 子女(2)
Surname 姓	As above 同上			
Given Name 名	As above 同上			
Gender (M/F) 性別 (男/女)	As above 同上			
Date of Birth (dd/mm/yy) 出生日期 (日/月/年)	As above 同上	region, se		
I.D. No/ Passport No./Birth Cert. No. 身份證號碼/護照號碼/ 出生證明書號碼	As above 同上		,	
Occupation and Title (if applicable) 職位及職銜 (如適用)				
Height (cm/feet) 身高 (厘米/尺)				
Weight(Kg/lb) 體重 (公斤/磅)				
Occupation Class 1 2 3 4 職業分類 1 2 3 4	Class	Class	Class 5	Class 5
Name of Beneficiary (Relationship) 受益人姓名 (關係)	()			()

Benefits Required 投保選	擇				
Personal Accident Plan 意外保險計劃 (1, 2, 3, 4, 5)	Plan	Plan	Plan 5	Plan 5	
Annual Premium 每年保費	HKD	HKD	HKD	HKD	
Total Premium 總保費		HKD			
Added Free Protection (Choose 1 out of 4) 附加保障 (請從以下4項中選擇1項) 1. Professional Occupation Promotion 專業性職業推廣優惠 2. Child Support and Tuition Fund 子女撫養及教育基金 3. Indemnity for School Activities and Travelling					
學校活動及出行賠償 4. Home Modification Expense 家居改裝費用					
Insurance Details 投保資	米 斗				
				Yes 是	No 否
1. Did you stay in Hong Kong for more 間多於六個月?	than six months withir	n the past one year	? 在最近一年,逗留香港	寺	
2. Are you self employed? If "Yes", pleas 詳述職業性質。	se state occupation na	ature. 閣下是否為	自僱人仕?如果"是",	青	
3. Do you engage in any hazardous sp activities or duties. 閣下是否從事有危	oorts, activities or dut 險的運動或體力活動	ies? If "Yes", please ?如果"是",請	specify the name of spor 詳述該運動或活動之名稱	o	
4. Has any insurance company ever definsurance policy, required an incread please specify the reason. 閣下是否明特別條款?如果"是",請詳述原	sed rate or imposed s 曾被其他保險公司拒	pecial terms on yo	our insurance policy? If "Ye	s",	
5. Will this insurance be additional to c insured of HK\$4M or above? If "Yes", 保險而總保障額相等或大於港幣四百	olease provide copy of	policy schedule. 图	es with a total aggregate su 閣下是否有購買其他個人意		
6. Do you suffer from any illness, mer condition affecting mobility, sight, sphysical impairment, defects or def響行動、視覺、說話能力及聽覺?如	speech and/or hearing ormities. 閣下是否有信	g? If "Yes", please s E何病況、精神疾病	pecify the name of diseaso	1	
7. Have you sustained any surgical and years which have prevented you from longer than 7 days? If "Yes", please sy 在過去五年內,是否曾接受外科到如果"是",請詳述原因。	om following your oc pecify the nature of ac	cupations, busines cident and the me	ss or pursuits for a period edical attention needed. 閣	of 下	

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

Liberty International Insurance Limited (referred to hereinafter as the "Company") recognizes its responsibilities in relation to the collection, holding, processing, use and/or transfer of personal data under the Personal Data (Privacy) Ordinance (Cap. 486) (the "Ordinance").

利寶國際保險有限公司(以下簡稱『本公司』)根據『個人資料(私隱)條例』(香港法例第486章)(以下簡稱『條例』)就收集、持有、處理,使用和/或轉移個人資料承擔有關責任。

Purpose 目的

The personal data of customers (including but not limited to policy owners, insureds and beneficiaries) collected or held by the Company may be used, stored, processed, transferred or disclosed or shared for the following obligatory purposes:

本公司所收集或持有的客戶個人資料(包括但不限於保單持有人,受保人及受益人),可能會使用、存儲、處理、轉移、或披露或分享致以下各強制性的目的:

- Processing and determining insurance applications, insurance claims and providing ongoing insurance services; 處理和確定保險申請書、理賠,及持續提供保險服務;
- Processing requests for payment and for direct debit authorization; 處理付款事宜和直接付款授權書;
- 3. Managing, investigating and analyzing any claim, action and/or proceedings brought against the customers, and to exercise the Company's rights as more particularly defined in applicable policy wording, including but not limited to subrogation rights;
 管理、調查和分析任何索償事宜、訴訟和/或針對客戶的訴訟,以及行使本公司根據保險條款賦予的權利,包括但不限於代位權;
- Compiling statistics or using for accounting purposes; 從事統計資料或用於會計事務;
- 5. Conducting research, insurance surveys and analysis for the purpose of product design and development; 從事研究、保險調查及開發產品和設計之分析;
- 6. Meeting disclosure requirements of any local or foreign law, regulations, codes or guidelines binding on the Company, its parent and affiliated companies("Liberty Mutual Group of Companies")
 履行任何對本公司、母公司和附屬公司(『利寶互助保險集團公司』)具有約束力的本地或海外法律、法規、守則或指引之披露要求;
- 7. Complying with the legitimate requests or orders of the courts of Hong Kong Special Administrative Region and regulators including but not limited to the Insurance Authority, Hong Kong Federation of Insurers, auditors, governmental bodies and governmental-related establishments binding the Liberty Mutual Group of Companies;

遵守香港特別行政區的法院命令和包括但不限於保監處,香港保險業聯會,核數師,政府機構和政府成立之相關監管機構對利寶互助保險集 團公司具有約束力的合法要求;

- 8. Enabling an actual or proposed assignee of the Company to evaluate the transaction intended to be the subject of the assignment; 協助本公司的實質或建議受讓人評估有關之轉讓交易;
- 9. Conducting identity and/or credit checks and/or debt collection; 從事核實身份和/或信貸審查和/或追收債務;及
- 10. Conducting medical or health reference checks for relevant insurance products; and 為相關保險產品進行具參考用途之醫療或健康調查;
- 11. Facilitating the Company's authorized service providers to provide services to the Company and/or customers for the above purposes 協助本公司所授權之服務供應商向本公司和/或客戶提供上述目的之服務;

Please note that if you do not provide us with your personal data, we may not be able to issue your policy, process claims or provide insurance products or services to you or process your request.

如閣下不向我們提供個人資料,我們未必能夠簽訂保單、處理索償、提供保險產品、服務或處理您的要求。

Direct Marketing 直接營銷

Certain personal data of customers collected or held by the Company, in particular, names and contact information such as telephone number, email address and postal address may be used by the Company and/or the Liberty Mutual Group of Companies to provide marketing materials and conduct direct marketing activities (including but not limited to promoting, marketing or selling of the Company, Liberty Mutual Group of Companies or co-branded insurance or financial or investment related products or services by electronic or other means) in relation to insurance and/or financial products and services of the Company, the Liberty Mutual Group of Companies and/or other financial services providers. Please tick the box at the bottom of this PICS if you do not consent to receive such marketing communications.

本公司所收集或持有的客戶個人資料,特別是姓名和聯繫資料,如電話號碼、電子郵件地址和郵政地址,可能會用以提供本公司和/或利寶互助保險集團的公司的營銷材料,並進行有關本公司、利寶互助保險集團公司的保險及/或金融產品及服務和/或其他金融服務供應商的直接營銷活動(包括但不限於通過電子或其他手段促銷,推廣或銷售本公司、利寶互助保險集團公司或聯營公司有關保險或財務或投資產品或服務)。如果你不同意接收有關直銷通訊,請於本個人資料收集聲明下方口標上/號。

In the absence of any "opt-out" request from the customer, the Company shall treat the application and continuation of his/her policy(ies) held with the Company as an indication of no objection to the Company's use of such personal data for this voluntary marketing purpose.

如客戶沒有"選擇退出"的要求,其保險申請書及於本公司持有之保單持續生效將被視為不反對本公司將其個人資料使用於此自願性的營銷目的。

Transfer of personal data 個人資料之轉移

Your personal data held by the Company will be kept confidential but may be shared with the following parties, within or outside of Hong Kong:本公司所持有的個人資料將予以保密,但可能會與以下香港境內或境外人士分享:

- 1. Any Liberty Mutual Group of Companies, or any other company carrying on insurance or reinsurance related business, or an intermediary; 任何利寶互助保險集團公司,或任何其他從事與保險或再保險業務有關的公司,或中介人;
- Any agent, contractor, banker or third party service provider who provides administrative, telecommunications, computer, payment, banking or other services to the Company in connection with the operation of its business;
 任何為本公司業務操作提供行政,電訊、電腦、付款、銀行或其他服務的代理人、承包商、銀行或第三方服務供應商;
- 3. Third party service providers including legal advisors, investigators, loss adjusters, reinsurers, medical and rehabilitation consultants, emergency assistance companies, medical doctor panel groups, medical advisory consultants, surveyors, specialists, repairers, accountants and data processors; 第三方服務供應商包括法律顧問、調查員、公証行、再保險公司、醫療和康復顧問、緊急救援公司、網絡醫生集團、醫療意見顧問、測量師、專家、維修人員、會計師和數據處理員;
- 4. Credit reference agencies, and in the event of default, any debt collection agencies or companies carrying on claim or investigation services; 信貸資料服務機構,在違約情況下,任何債務追收機構或辦理索償理賠或調查服務公司;
- 5. Any person to whom the Company is under an obligation to make disclosure under the requirements of any law binding on the Company or any of its associated companies for the purposes of any regulations, codes or guidelines issued by governmental, regulatory or other authorities with which the Company or any of its associated companies are expected to comply;

 本公司或任何聯營公司在遵守由政府,監管機構或其他當權者推行的法規、守則或指引及履行法律責任時需要向其披露之任何人士;
 - Any person pursuant to any order of a court of competent jurisdiction; 根據有司法管轄權的法院命令受權之任何人士;
- 7. Any actual or proposed assignee of the Liberty Mutual Group of Companies or transferee of the Liberty Mutual Group of Companies' rights in respect of the policy owners;
 利寶互助保險集團公司的實質或建議受讓人或利寶互助保險集團公司與保單持有人相關權利的承讓人;
- 8. Companies within the Liberty Mutual Group of Companies; 利寶互助保險集團公司旗下的公司;
- 9. Providers of risk intelligence for the purpose of customer due diligence or anti-money laundering screening; 為客戶盡職調查或打擊清洗黑錢的篩選之風險智能供應商;
- 10. Other banking/financial institutions, commercial or charitable organizations with whom the Company maintains business referral or other arrangements for marketing communication if "no objection" is provided; and 如客戶沒有"選擇退出"的要求,與本公司保持業務轉介或其他安排上之其他銀行/金融機構、商業或慈善組織作為直銷通訊用途;及
- 11. Third party marketing service providers and insurance intermediaries for marketing 第三方營銷服務供應商和保險中介機構作為直銷通訊用途。

Access and correction of personal data 查閱及更正個人資料

According to the Ordinance, all policyholders have the right to of access to, correct and/or change any of their own personal data held by the Company by contacting the Company's Personal Data Privacy Officer at:

根據條例的規定,所有保單持有人可聯絡本公司之個人資料私隱主任查閱、更正和/或更改自己的個人資料:

Liberty International Insurance Limited, 13/F Berkshire House, 25 Westlands Road, Quarry Bay, Hong Kong 利寶國際保險有限公司,香港鰂魚涌華蘭路25號栢克大廈13樓

In accordance with the Ordinance, a reasonable fee may be charged by the Company for the processing of any data access request. 根據條例的規定,本公司在處理個人資料查閱申請時可向客戶收取合理的費用。

П	Please tick here if you do not consent to receive marketing communications.
Ш	Please tick here if you do not consent to receive marketing communications. 如你不同意接收有關直銷通訊,請標上 🗸 號

Declaration 聲明

I hereby declare and agree that 本人謹此聲明及同意:

- 1. The Information and answers given in <u>Pages 1-2</u> are true to the best of my knowledge and belief and I have not withheld information likely to affect the acceptance of this application;
 - 本人於第一至二頁中所提供的資料及填報的內容就本人所知及所信均屬真確無訛。本人並無隱瞞任何資料致使可能影響本申請會否獲得接納;
- 2. This application and declaration shall be the basis of the insurance contract between me and Liberty International Insurance Limited. I further agree to accept Liberty's Policy terms and conditions, exclusions and conditions to be expressed therein, endorsed thereon or attached thereto. 本投保申請書將會作為我與利寶國際保險有限公司訂立保險契約之依據。我亦接受利寶保單之條款,及所附之除外責任和背書。

I further confirm my agreement to all sections in this application form including <u>Personal Information Collection Statement (PICS</u>). 本人更確認同意本申請書內之所有部分,包括<u>個人資料收集聲明</u>。

Applicant's Si	gnature 投保。	人簽署		Date 日期(D	D日/MM月/YY年)
				 /	/