

放審編號 CAW No. _____

投保人請以英文正楷填寫及在適當方格內加「✓」號。任何答案如有更改，敬請在旁簽署。The proposed Insured has to complete the form in English BLOCK LETTERS and please put a “✓” in the box as appropriate. Any changes to be made should be signed by the proposed Insured.

投保人資料 Details of the proposed Insured

1. 中/英文姓名 Name in Chinese/English (請先填寫姓氏 Surname first) _____		2. 香港身份證 / 護照號碼 HKID Card No. / Passport No. _____	
3. 投保人身份 Identity of proposed Insured <input type="checkbox"/> 業主 Homeowner (自住 Occupier) <input type="checkbox"/> 業主 Homeowner (出租 Rent out)		4. 投保家居住所面積(平方呎) Floor area of the Insured Home (in square feet) _____ <input type="checkbox"/> 建築面積 Gross Floor Area <input type="checkbox"/> 實用面積 Saleable Area	
5. 通訊地址 Correspondence Address 室 Room / Flat _____ 層數 Floor _____ 座數 Block / Tower _____ 大廈/屋苑名稱 Name of Building / Name of Estate _____ 街道號數及名稱 Number and Name of Street/Road _____ 地區 District _____ <input type="checkbox"/> 香港 HK <input type="checkbox"/> 九龍 KLN <input type="checkbox"/> 新界 NT			
6. 投保家居地址 ² (如與上述地址不同) Address of the Insured Home ² (if different from the above address)			
7. 聯絡電話 Contact No. (日/夜間 Day/Night)		8. 電子郵箱 Email	
9. 如家居樓宇/住所的樓齡超過 40 年，請填寫建築年份 If the age of the insured building /home is over 40 years, please state the year of built : _____			

投保計劃³及保費 Insured Plan³ and Premium (HK\$)

家居財物保障 HOME CONTENTS COVERAGE	投保家居住所面積 (平方呎) Floor Area of the Insured Home (in square feet)		全年正價保費 Original Annual Premium			選擇 Option 1 (推廣碼 Campaign Code: HFM01)	選擇 Option 2 - 首年優惠保費 ⁴ First-year Preferential Premium ⁴ (推廣碼 Campaign Code : HFM02)		
	建築面積 Gross Floor Area	實用面積 Saleable Area	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3	<input type="checkbox"/> 計劃 Plan 1	<input type="checkbox"/> 計劃 Plan 1	<input type="checkbox"/> 計劃 Plan 2	<input type="checkbox"/> 計劃 Plan 3
<input type="checkbox"/>	<=500	<=380	627	741	1,026	免首 6 個月保費 First 6 months Premium Waiver	313.5	370.5	513
<input type="checkbox"/>	501-750	381-570	855	1,026	427.5		513	684	
<input type="checkbox"/>	751-950	571-720	1,140	1,311	570		655.5	826.5	
<input type="checkbox"/>	951-1,250	721-950	1,482	1,653	741		826.5	1,054.5	
<input type="checkbox"/>	1,251-1,500	951-1,130	1,824	2,223	912		1,111.5	1,339.5	
<input type="checkbox"/>	1,501-2,000	1,131-1,500	2,166	2,622	1,083		1,311	1,596	
<input type="checkbox"/>	2,001-2,500	1,501-1,900	2,565	3,135	1,282.5		1,567.5	1,881	
<input type="checkbox"/>	>=2,500	>=1,900	另議 Quote separately				另議 Quote separately		
自選保障 OPTIONAL COVERAGE	家傭 Domestic Helpers (Employees' Compensation Insurance) 【不適用於業主(出 租)投保 not applicable to Homeowner (rent out)】		189.47 / 每名 (保費已包括 10.8%徵款 ⁵ Premium has already included 10.8% Levy ⁵)				<input type="checkbox"/> 103.97 / 每名 Each Person (保費已包括 10.8%徵款 ⁵ Premium has already included 10.8% Levy ⁵)		
							家傭人數 No. of Domestic Helpers _____ 名 Person		
						總保費 Total Premium			

保險期 Policy Period

- "現樓" Completed Buildings
由 From (日 D / 月 M / 年 Y) _____ 起計 6 個月(只適用於選擇 1) 或 1 年 (適用於選擇 2)
for 6 months (only applicable to Option 1) or 1 year (applicable to Option 2).
(首尾兩日包括在內及已繳付以後每個可調整保費的續保週年 Both dates inclusive and subject to the payment of further premiums to be adjusted, to be renewed on each anniversary thereof)
- "樓花" Uncompleted Buildings
(中銀集團保險之保險責任於接收到保單生效日期始起生效。 Insurance liability of BOCG Insurance will only takes effect upon receiving the policy effective date.)

註 Notes:

1. 「周全家居綜合險」按揭客戶計劃(“本計劃”)由中銀集團保險有限公司(“中銀集團保險”)承保。本計劃只適用於選用中國銀行(香港)有限公司(“中銀香港”)住宅物業按揭貸款服務(包括新置、轉按及加按貸款)的客戶。合資格客戶可獲首 6 個月免保費優惠(只適用於選擇 1)或首年保費 5 折(適用於選擇 2)及續保保費 85 折優惠。“Premier Home Comprehensive Insurance” Mortgage Customer Plan (“this Plan”) is underwritten by Bank of China Group Insurance Company Limited (“BOCG Insurance”). The Plan is only applicable to customers who select Bank of China (Hong Kong) Limited (“BOCHK”) residential property mortgage loan service (including new, refinancing and further advance loan), the eligible customers can enjoy first 6 months premium waiver (only applicable to Option 1) or 50% premium off in the first year (applicable to Option 2) and 15% off on renewal premium.
2. 投保家居地址必須為按揭貸款物業(包括自住/出租物業)的地址 The address of the Insured Home should be same as that of the mortgage property (including self occupied/rent out property)
3. 客戶只可於保單續保時更改投保計劃。 Customer can change the Insured plan only upon policy renewal.
4. 以上顯示的首年優惠保費為折扣後的保費。投保人若在首個保單年度取消保單，中銀集團保險將不會退回任何已繳保費。The first-year preferential premium shown above is the premium after discount, if the proposed Insured cancel the policy in the first policy year, BOCG Insurance will not refund any paid premium.
5. 由 2010 年 7 月 1 日起，政府徵款、恐怖活動保障費用及保險公司(僱員補償)無力償債管理局供款分別為保費之 5.8%、3%及 2%，並將不時作出修訂及不設折扣優惠。The Government Levy, Government Terrorism Facility Charge and Employees Compensation Insurer Insolvency Bureau Contribution as from 1 July 2010 are quoted at 5.8%, 3% and 2% of the respective premium and is subject to change from time to time. No discount will be applied to these charges.
6. 此投保申請不適用於網上投保。 This insurance application is not applicable to online enrollment.
7. 此投保書申請一經被接納後，您的保單將會每年自動續保。Once the application for this proposal form is accepted, your policy will be automatically renewed each year.
8. 中國銀行(香港)有限公司(“中銀香港”)以中銀集團保險的委任保險代理身份分銷本計劃。本計劃為中銀集團保險的產品，而非中銀香港的產品。Bank of China (Hong Kong) Limited (“BOCHK”) is an appointed insurance agent of BOCG Insurance for distribution of this Plan. This Plan is a product of BOCG Insurance but not BOCHK.
9. 對於中銀香港與客戶之間因銷售過程或處理有關交易而產生的合資格爭議(定義見金融糾紛調解計劃的金融糾紛調解中心職權範圍)，中銀香港須與客戶進行金融糾紛調解計劃程序；而有關本計劃的合約條款的任何爭議，應由中銀集團保險與客戶直接解決。In respect of an eligible dispute (as defined in the Terms of Reference for the Financial Dispute Resolution Centre in relation to the Financial Dispute Resolution Scheme) arising between BOCHK and the customer out of the selling process or processing of the related transaction, BOCHK is required to enter into a Financial Dispute Resolution Scheme process with the customer; however any dispute over the contractual terms of this Plan should be resolved between directly BOCG Insurance and the customer.

聲明 Declaration

1. 本人明白本計劃只適用於選用中銀香港住宅物業按揭貸款服務(包括新置、轉按及加按貸款)的客戶。若本人不符合此資格，此投保申請將被取消。I understand that the plan is only applicable to customers who select BOCHK residential property mortgage loan service (including new, refinancing and further advance loan), if I do not fulfill this requirement, this application will be cancelled.
2. 本人明白本人必須填妥本投保書內的信用卡付款授權書或銀行的直接付款授權書。中銀集團保險才會接受本投保申請。I understand that I should complete the Credit Card Authorization Form or the Direct Debit Authorization Form enclosed in this Proposal Form, so that BOCG Insurance accept my insurance application.
3. 本人的投保家居住所樓齡不超過 40 年(已獲中銀集團保險批准除外)、只是用作住宅用途及位於香港特別行政區已落成的永久住宅大廈，且該住所及屋頂是用磚石或混凝土建造。**The age of my insured premises does not exceed 40 years (except having obtained the approval from BOCG Insurance), solely used for domestic purpose and in a permanent residential building that is constructed and situated in HKSAR and my insured premises is built and roofed with bricks, stone or concrete.**
4. 本人明白投保家居住所如連續空置 60 天以上者，在空置期間只承保因火災、電擊、雷擊、爆炸、地震、颱風、暴風、喉管爆裂或水浸所引致投保家居住所內的家居財物損失或損毀。I understand that if the insured premises is remained unoccupied for more than 60 consecutive days, the loss of or damage to home contents in the insured premises will not be covered except loss or damage caused by fire, lightning, thunderbolt, explosion, earthquake, typhoon, windstorm, bursting of pipes or flood during that period.
5. 本人謹此聲明，於本投保書之陳述乃真確無訛，可作為簽發保單之根據。本人亦明白如資料錯誤或不詳盡，本人及/或受保人之保障有失效之虞。I declare that the information stated in this Proposal Form is true and complete and will form the basis of this insurance. I also understand that if any information stated is untrue or incomplete, the cover for me or for the Insured Person(s) may be invalidated.
6. 本人謹此聲明，在過去投保任何家居財物、樓宇或個人物品保險時，不曾遭拒絕及/或被附加特別條款及/或繳付額外保費；及在過去兩年內，不曾申請任何相關索償。**I declare that I have never been declined and/or imposed special terms and conditions and/or paid additional premium in applying any Home Contents, Buildings or Personal Belongings Insurance, and have not made any relevant claims in the past 2 years.**
7. 本人謹此聲明，本投保書是在香港特別行政區內簽署，如有任何訛騙或資料失實，本人及/或受保人之保障有失效之虞。I declare that this Proposal Form is signed at HKSAR, in case of fraud or factual misrepresentation, the cover for myself and/or for the Insured Person(s) may be invalidated.
8. 本人同意中銀集團保險保留一切接納本投保書與否之權利。I agree BOCG Insurance reserves the right to accept or decline my application.
9. 本人明白必須繳付保費後，中銀集團保險對本人及/或受保人之保險責任始行生效。I understand that insurance liability of BOCG Insurance for myself and/or for the Insured Person(s) will only takes effect provided that premium has been paid.
10. 本人同意遵照中銀集團保險簽發的「周全家居綜合險」按揭客戶計劃保單及批單內所訂的條件及條款辦理相關的保險事宜。I agree to act in accordance with the terms and conditions stipulated in the policy and endorsement of “Premier Home Comprehensive Insurance” Mortgage Customer Plan issued by BOCG Insurance.
11. 本人明白此投保書一經批核，如在每個保單年度/保險期期滿前未有接獲中銀集團保險有關修改任何條款的續保通知，本人只須繳交下一個保單年度/保險期的保費，此保單便會每年自動續保。本人亦授權中銀集團保險從本人之銀行/信用卡戶口轉賬繳交「周全家居綜合險」按揭客戶計劃應繳付的保費、其後書所更改的保費以及每個新保單年度/保險期續保保費。I understand that once this application for insurance is accepted, the policy will be renewed automatically by paying the premium for the following policy year/period if I do not receive any notice of amendment on renewal terms from BOCG Insurance before the expiry date of every policy year/period. I also hereby authorize BOCG Insurance to effect payment transfer from my bank/credit card account for premium payment under the “Premier Home Comprehensive Insurance” Mortgage Customer Plan, subsequent revised premium by endorsement(s) and all renewal premiums for each new policy year/period.

收集個人資料聲明 Personal Information Collection Statement

本人明白本人提供的資料為中銀集團保險提供保險業務所需，並可能使用於下列目的：I understand that the information provided by me to BOCG Insurance is collected to enable BOCG Insurance to carry on insurance business and may be used for the purpose of :

1. 處理及審批本人的保險申請或本人將來提交的保險申請; processing and evaluating my insurance application and any future insurance application I may make ;
2. 執行本人保單的行政工作及提供與本人保單相關的服務; administering my insurance policy and providing services in relation to my insurance policy;
3. 分析或調查、處理及支付本人保單有關的索償; analysis or investigating, processing and paying claims made under my insurance policy;
4. 發出繳交保費通知及向本人收取保費及欠款 invoicing and collecting premiums and outstanding amounts from me;
5. 任何與保險有關的產品或服務的任何更改、變更、取消或續期; any alterations, variations, cancellation or renewal of any insurance related product or service;
6. 就以上用途聯絡本人; contacting me for any of the above purposes;
7. 中銀集團保險行使任何代位權; exercising any right of subrogation by BOCG Insurance;
8. 其它與上述用途有直接關係的附帶用途; other ancillary purposes which are directly related to the above purposes; 及 and
9. 遵循適用法律、條例及業內守則及指引。 complying with applicable laws, regulations or any industry codes or guidelines.
10. 中銀集團保險亦可因應上述用途將本人及/或受保人的個人資料移轉予下列各方: BOCG Insurance may disclose my and/or the Insured Person(s)'s personal data for the above purposes to the following classes of transferees:
 - a. 就上述用途，向中銀集團保險提供行政、通訊、電腦、付款、保安及其它服務的第三方代理、承包商及顧問 (包括：醫療服務供應商、緊急救援服務供應商、電話促銷商、郵寄及印刷服務商、資訊科技服務供應商及數據處理服務商); third party agents, contractors and advisors who provide administrative, communications, computer, payment, security or other services which assist us to carry out the above purposes (including medical service providers, emergency assistance service providers, telemarketers, mailing houses, IT service providers and data processors);
 - b. 處理索賠個案的理賠師、理賠調查員及醫療顧問; in the event of a claim, loss adjudicators, claims investigators and medical advisors;
 - c. 追討欠款的收數公司或索償代理; in the event of default, debt collectors and recovery agents;
 - d. 保險資料服務公司及信貸資料服務公司; insurance reference bureaus or credit reference bureaus;
 - e. 再保公司及再保經紀; reinsurers and reinsurance brokers;
 - f. 本人的保險經紀 (若有) ; my insurance broker (if I have one);
 - g. 中銀集團保險的法律及專業業務顧問; BOCG Insurance's legal and professional advisors;
 - h. 中銀集團保險的關連公司(以《公司條例》內的定義為準); BOCG Insurance's related companies (as that term is defined in the Companies Ordinance);
 - i. 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」)及其會員，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; any association, federation or similar organization of insurance companies ("Federation") and its members 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;
 - j. 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; any member(s) of the "Federation" by the "Federation" for any of the above or related purposes;
 - k. 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的公司，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目的; 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;
 - l. 保險索償投訴局及同類的保險業機構; the Insurance Claims Complaints Bureau and similar industry bodies; 及 and
 - m. 法例要求或許可的政府機關。 government agencies and authorities as required or permitted by law.

本人在此授權中銀集團保險可向「聯會」從保險業內收集的資料中查閱及/或核對本人及/或受保人任何資料。BOCG Insurance is hereby authorized to obtain access to and/or to verify any of my and/or the Insured Person(s)'s data with the information collected by the Federation from the insurance industry.

此外，經本人同意，中銀集團保險可能會以其它方式使用及披露本人及/或受保人的個人資料。Moreover, BOCG Insurance may also use and disclose my and/or the Insured Person(s)'s personal data otherwise with my consent.

本人有權查閱及要求更正由中銀集團保險持有有關本人及/或受保人的個人資料。如有需要，可向中銀集團保險法律與合規部提出 (電話：2867 0888，傳真：3906 9939)。I have the right to obtain access to and to request correction of any personal information concerning myself and/or the Insured Person(s) held by BOCG Insurance. Requests for such access can be made to BOCG Insurance's Legal and Compliance Department (Tel: 2867 0888 / Fax: 3906 9939).

接收推廣訊息指示 Receive Direct Marketing Materials Instruction

本人不欲中銀集團保險使用本人的個人資料經以下渠道作直銷推廣 (請以“√”選擇渠道): I **do not wish** BOCG Insurance to use my personal data in direct marketing via the following channel(s) (please use“√”to select the channel(s)):

- 電子推廣郵件 Promotion Email 電話短訊 SMS 直銷郵件 Direct Mailing 電話直銷 Telephone Call

如您遞交此投保書而沒有在以上任何方格內以“√”號顯示您的選擇，即代表您並不拒絕中銀集團保險任何形式的直銷推廣。If you return this Proposal Form without ticking any of the above boxes, it means that you do not wish to opt-out from any form of direct marketing of BOCG Insurance.

以上代表您現在對是否接收直銷推廣資料的選擇，亦取代任何您之前已告知中銀集團保險的選擇。請注意，您以上的選擇適用於根據中銀集團保險的「資料政策通告」上所載的產品、服務及/或標的。請您參考該通告上有關中銀集團保險擬用於直銷推廣的個人資料種類。The above represents your present choice whether or not to receive direct marketing materials and replaces any choice communicated by you to BOCG Insurance prior to this application. Please note that your above choice applies to the direct marketing of the classes of products, services and/or subjects as set out in the Data Policy Notice of BOCG Insurance. Please also refer to the said Notice on the kinds of personal data which may be used in direct marketing.

將個人資料披露給本集團公司作直接促銷指示 Instruction to disclose personal data to the Group companies for direct marketing

為改善及提供更全面的服務予中銀集團保險的客戶，中銀集團保險可能會將您的個人資料提供予「本集團」*其他成員及其他人作其包括財務、保險、信用卡、證券、商品、投資、銀行及相關服務和產品及授信的直銷推廣（請您參考中銀集團保險的「資料政策通告」上有關中銀集團保險擬提供之直銷推廣的個人資料種類，該資料擬提供予甚麼類別的人士，以及該資料擬就甚麼類別的產品、服務及/或標的而使用。）若您不欲中銀集團保險提供您的個人資料予以上人士作以上用途，請您在這方格上以“✓”號表示。To improve and provide more comprehensive services to our customers, BOCG Insurance may provide your personal data to other members of the Group* and any other persons for their use in direct marketing of financial, insurance, credit card, securities, commodities, investment, banking and related services and products and facilities and so forth. (Please refer to the Data Policy Notice of BOCG Insurance on the kinds of personal data which may be transferred to in direct marketing, the classes of persons to which your personal data may be provided to, and the classes of products, services and/or subjects in relation to which the data is to be used.) Please tick“✓”this box if you **do not wish** BOCG Insurance to provide your personal data to the above persons for the above purposes.

*「本集團」指中銀集團保險及其控股公司、分行、附屬公司、代表辦事處及附屬成員，不論其所在地。附屬成員包括中銀集團保險的控股公司之分行、附屬公司、代表辦事處及附屬成員，不論其所在地。The “Group” means BOCG Insurance and its holding companies, branches, subsidiaries, representative offices and affiliates, wherever situated. Affiliates include branches, subsidiaries, representative offices and affiliates of BOCG Insurance holding companies, wherever situated.

本人確認同意本投保書內之所有部份，包括但不限於上列之聲明及收集個人資料聲明。 I confirm my agreement to all sections in this Proposal Form, including but not limited to the above Declaration and Personal Information Collection Statement.

投保人簽署 Signature of proposed Insured

香港 H.K./

簽署地及日期 Signed Place and Date

本投保書在未被同意受保前，中銀集團保險不負任何責任。
The BOCG Insurance has no liability whatsoever before the application for insurance in this Proposal Form is accepted.

繳付保費方法 Payment Method

信用卡付款 Payment made by credit card

銀行戶口自動轉賬 Bank Account Autopay

5,000 中銀信用卡獎賞
積分 5,000 BOC Credit
Card Reward Gift Points

由即日起至 2017 年 12 月 31 日期間（「推廣期」），投保人於推廣期內以中銀信用卡成功登記直接付款授權服務以支付「周全家居綜合險」按揭客戶計劃首個保單年度及續保保費，可額外獲享一次過 5,000 中銀信用卡獎賞積分。From now to 31 December 2017 (“Promotion Period”), proposed Insured may enjoy a one-off extra 5,000 BOC Credit Card Reward Gift Points upon successful registration for BOC Credit Card Direct Debit Authorization Service for premium payment of first policy year and renewal of “Premier Home Comprehensive Insurance” Mortgage Customer Plan.

提示：借定唔借？還得到先好借！ Reminder: To borrow or not to borrow? Borrow only if you can repay!

信用卡付款授權書 Credit Card Authorization Form

Visa Master 中銀銀聯雙幣信用卡(必需由香港發出) BOC CUP Dual Currency credit card (Must be issued in Hong Kong)

持卡人姓名 Cardholder's Name	香港身份證號碼 HKID Card No.	信用卡戶口號碼 Credit Card Account No.	信用卡到期日 (月/年) Credit Card Expiry Date (M/Y)
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本人茲授權「中銀集團保險有限公司」從本人的信用卡戶口每年支付「周全家居綜合險」按揭客戶計劃應繳保費金額，直至另行通知。I hereby authorize and direct “Bank of China Group Insurance Company Limited” to debit the premium due from my credit card account for “Premier Home Comprehensive Insurance” Mortgage Customer Plan on a yearly basis until further notice.

聲明(只適用於投保人首次成功登記中銀信用卡直接付款授權服務以支付此保險計劃之費用) **Declaration** (only applicable to the proposed Insured who have successfully registered for BOC Credit Card Direct Debit Authorization Service to settle premium payment for this insurance plan for the first time)

- 本人明白/同意中銀集團保險有限公司可向中銀信用卡(國際)有限公司傳送本人所遞交的相關個人資料以作誌賬額外 5,000 中銀信用卡獎賞積分之用；I understand/agree that Bank of China Group Insurance Company Limited will transfer my submitted relevant personal information to BOC Credit Card (International) Ltd. for crediting the extra 5,000 BOC Credit Card Reward Gift Points;
- 本人明白/同意有關「額外 5,000 中銀信用卡獎賞積分優惠」(「本優惠」)的條款及細則。I understand/ agree with the terms and conditions of “Extra 5,000 BOC Credit Card Reward Gift Points Promotion (“Promotion Offer”)”.
- 本人明白/同意中銀集團保險有限公司及中銀信用卡(國際)有限公司保留隨時修改、暫停或取消優惠推廣及修訂其條款與細則的酌情權而毋須事先通知。如有任何爭議，中銀集團保險有限公司及中銀信用卡(國際)有限公司保留最終決定權。I understand/agree that Bank of China Group Insurance Company Limited and BOC Credit Card (International) Ltd. reserve the rights to change, suspend or terminate the Promotion and to amend the relevant terms and conditions at any time at its sole discretion without prior notice. In case of any dispute(s), the decision of Bank of China Group Insurance Company Limited and BOC Credit Card (International) Ltd. shall be final.

若信用卡持有人並非投保人，請填寫以下資料。 If Cardholder is not the proposed Insured, please fill in the following information.

- 與投保人關係 Relationship with the proposed Insured: _____
- 代投保人支付保費原因 Reason for paying premium on proposed Insured's behalf: _____

本人同意及承擔上述投保人之全數應繳之「周全家居綜合險」按揭客戶計劃保費金額，本人亦明白如因終止保單而產生的任何退費會以支票方式給予投保人。I hereby confirm to pay the premium due of “Premier Home Comprehensive Insurance” Mortgage Customer Plan for the above proposed Insured. I also understand that any refund premium due to policy cancellation will be given to the proposed Insured by cheque.

(先生/太太/女士) Mr/Mrs/Ms _____ 香港身份證號碼 HKID Card No. _____

持卡人簽署 Cardholder's Signature (須與信用卡簽署式樣相同 should be the same as the specimen signature on Credit Card)	X	聯絡電話號碼 Contact Phone No.	日期 Date (日 D/月 M/年 Y)
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S.V.

直接付款授權書 Direct Debit Authorization Form

收款之一方 (受益人) Name of Party to be Credited ("The Beneficiary")	銀行編號 Bank No.	分行編號 Branch No.	收款賬戶號碼 Account No. to be Credited
Bank of China Group Insurance Company Limited	0 3 0	5 5 0	1 0 2 8 2 1 0 8

- 本人/吾等現授權本人/吾等之下述銀行·(根據受益人及/或代理行不時給予本人/吾等銀行之指示)自本人/吾等之賬戶內轉賬至上述賬戶。惟每次轉賬金額不得超過以下指定之限額。I/We hereby authorize my/our below named Bank to effect transfers from my/our account to the above account in accordance with such instructions as my/our Bank may receive from the beneficiary and/or its banker and/or its banker's correspondent from time to time provided always that the amount of any one such transfer shall not exceed the limit indicated below.
- 本人/吾等同意本人/吾等之銀行毋須證實該等轉賬通知是否已交予本人/吾等。I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us.
- 如因該等轉賬而令本人/吾等之賬戶出現透支(或令現時之透支增加)·本人/吾等願共同及各別承擔全部責任。I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfer(s).
- 本人/吾等同意如本人/吾等之賬戶並無足夠款項支付該等授權轉賬·本人/吾等之銀行有權不予轉賬·且銀行可收取慣常之收費·並可隨時以一星期書面通知取消本授權書。I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorized, my/our Bank shall be entitled, in its discretion, not to effect such transfer in which event the Bank may make the usual charge and that it may cancel this authorization at any time on one week's written notice.
- 本授權書將繼續生效直至另行通知為止或直至下列到期日為止 (以兩者中最早之日期為準)。This authorization shall have effect until further notice or until the expiry date written below (whichever shall first occur).
- 本人/吾等同意·本人/吾等取消或更改本授權書之任何通知·須於取消/更改生效日最少兩個工作天(但不包括星期六)之前交予本人/吾等之銀行。I/We agree that any notice of cancellation or variation of this authorization which I/we may give to my/our Bank shall be given at least two working days (except Saturdays) prior to the date on which such cancellation/variation is to take effect.

本人/吾等之銀行及分行名稱 My/Our Bank Name and Branch	銀行編號 Bank No.	分行編號 Branch No.	本人/吾等之賬戶號碼 My/Our Account No.
本人/吾等在結單/存摺上所紀錄之名稱 My/Our Name(s) as record on Statement/Passbook	*每次/月付款之限額 *Limit for Each Payment/Month		到期日 (參閱下列附註各點) Expiry Date (See Notes Below) 日 Day 月 Month 年 Year
債務人之姓名 (若非賬戶持有人) Name of Debtor (if other than Account Holder)	債務人參考 (必填之欄 - 請參閱下列附註各點) Debtors' Reference (Compulsory Field-See Notes Below)		
本人/吾等在結單/存摺上所紀錄之地址 My/Our Address as record on Statement / Passbook	聯絡電話 Telephone No.	本人/吾等之簽名 My/Our Signature(s) 日期 Date	
以下由銀行填寫 For Bank Use Only	核對印鑑 Signature(s) Verified		

* 請刪去不適用者。Please delete whichever is not appropriate.

請以英文正楷填寫。Please write in block letters.

附註 NOTES :

1. 如 台端付款之數額每次可能不相同·則請將最高者定為每次付款之最高限額。If the amount of your payments are likely to vary each time, set the Limit for Each Payment at the maximum amount you would expect to pay at any one time.
2. 本直接付款授權書將於「到期日」一欄中所填寫之日期自動撤銷。如 貴戶意欲直接付款授權書無限期有效 (或直至 貴戶予以撤銷為止)·則請將該欄留空。This Direct Debit Authorization will be cancelled automatically on the date included in the box marked "Expiry Date". If you wish the Direct Debit Authorization to have effect indefinitely (or until cancelled by you) please leave box blank.
3. 請保證 貴戶在此授權書內之簽名·與銀行賬戶所簽者完全相同。Please ensure that you sign the form in the usual way that you would sign on your Bank Account.
4. 在債務人之參考欄內·請將 貴戶與受款人一方之關係·略予說明·例如學生編號、抵押合約號碼等。In the box marked "Debtor's Reference" enter the identifying reference between yourself and the party to be credited i.e. Student No., Mortgage Agreement No., Rental Agreement No., etc.
5. 當 "每次/月付款之限額" 一欄未有填上時·債務銀行可酌權就轉賬金額設下一個限額。The debtors' bank may set an internal limit when the "Limit for Each Payment/Month" is not specified.
6. 如果轉賬金額超過債務銀行所定限額·除預先安排外·債務銀行會保留權利不予以轉賬。The debtor's bank reserves the right to reject the payment exceeding the maximum limit specified by the debtor's bank unless prior arrangements have been made.

銀行代理必須填寫以下欄位 (Bank staff must complete the below box)

銀行代理專用 For Bank use only	
經辦編號 Staff No.	保險中介人編號 Agent No.
經辦姓名 Staff Name	經辦單位編號 Unit No.
經辦聯絡電話 Staff Contact No.	CIN 號碼 CIN No.
客戶填妥及簽署此投保書及其中一項付款授權書後，請銀行代理按其選擇繳付保費方法，向中銀集團保險遞交以下文件及提供以下資料。 After client has completed and signed this application form and one of the payment authorization form, in accordance with the selected payment method, the Bank staff should submit the following documents and provide the information below to BOCG Insurance.	
<input type="checkbox"/> 以信用卡付款 Payment by Credit Card 申請號碼 TX No. _____ (1) 於第 4 頁已簽署的「信用卡付款授權書」正本 The original copy of duly signed “Credit Card Authorization Form” in page 4 ; (2) 此投保書 This proposal form.	<input type="checkbox"/> 以銀行戶口自動轉賬 Payment by Bank Account Autopay 申請號碼 TX No. _____ (1) 於第 5 頁已簽署的「直接付款授權書」正本 The original copy of duly signed “Direct Debit Authorization” in page 5 ; (2) 此投保書 This proposal form.

保險公司專用 For Office use only		
保單編號 Policy No.	經辦人 Handled By	覆核人 Checked By

額外 5,000 中銀信用卡獎賞積分優惠(「本優惠」)的條款及細則**Terms and Conditions of “Extra 5,000 BOC Credit Card Reward Gift Points Promotion” (“Promotion Offer”)**

- 推廣期由即日起至 2017 年 12 月 31 日。
The Promotion Period starts from now to 31 December 2017.
- 推廣期內，投保人須成功登記中銀信用卡直接付款授權服務以支付「周全家居綜合險」按揭客戶計劃首個保單年度及續保保費，及其保單之生效日期必須為推廣期內，方可獲享一次過額外 5,000 中銀信用卡獎賞積分(「合資格客戶」)。
The proposed Insured may enjoy a one-off Extra 5,000 BOC Credit Card Reward Gift Points upon successful registration for the BOC Credit Card Direct Debit Authorisation Service for premium payment of first policy year and renewal of “Premier Home Comprehensive Insurance” Mortgage Customer Plan during the Promotion Period. Also, the effective date of the proposed Insured’s policy must be within the Promotion Period (“Eligible Customers”).
- 本優惠只適用於印有  標誌及在香港發行的中銀信用卡，惟不適用於中銀長城國際卡、美金卡、中銀採購卡、中銀預付卡、私人客戶卡、Intown 網上卡、中銀「易達錢」以及已參與現金回贈計劃的客戶。
The Promotion Offer is only applicable to BOC Credit Cards bearing  logo issued in Hong Kong, while Great Wall International Credit Card, USD Card, BOC Purchasing Card, BOC Prepaid Card, Private Label Card, Intown Card, BOC Express Cash Card are excluded. Cardholders who have participated in the cash rebate plan will not be entitled to the Promotion Offer.
- 成功申請直接付款授權服務後，額外 5,000 中銀信用卡獎賞積分將於 10 個星期內記入合資格客戶的信用卡賬戶。
Upon successful registration for the Direct Debit Authorisation Service, the extra 5,000 BOC Credit Card Reward Gift Points will be credited to the Eligible Customers’ credit card accounts within 10 weeks.
- 合資格客戶的信用卡賬戶必須正常、有效及信用狀況良好。如合資格客戶已取消其信用卡賬戶、違反持卡人合約條款、有欠款逾期未還或有不良記錄，將不會獲享額外 5,000 中銀信用卡獎賞積分。任何涉及欺詐成份、已取消或已退款的交易款項均不會被視作有效交易，亦沒有資格獲享額外 5,000 中銀信用卡獎賞積分。
The status of the Eligible Customers’ credit card accounts should be normal, valid and in good standing. Should the Eligible Customers have cancelled their credit card accounts, breached the Card User Agreement or have overdue/bad records in their credit card accounts, the extra 5,000 BOC Credit Card Reward Gift Points will not be awarded. Any fraudulent, unauthorised, cancelled, or unposted transactions will not be considered as valid transactions and will not be eligible for the extra 5,000 BOC Credit Card Reward Gift Points.
- 如客戶有任何舞弊或欺詐行為，中銀信用卡(國際)有限公司(「卡公司」)會即時撤銷其參與本優惠的資格並取消其信用卡。卡公司有權在毋須事先通知的情況下從該信用卡賬戶直接扣除相等於已記入獎賞積分的金額及 / 或採取法律行動。
Acts of fraud and deception will result in the forfeiture of Cardholder’s eligibility to enjoy the Promotion Offer as well as the cancellation of BOC Credit Cards. BOC Credit Card (International) Limited (the “Company”) reserves the right to debit directly from the credit card accounts an amount equivalent to the value of credited Reward Gift Points without prior notice and / or take legal actions.
- 卡公司保留隨時修改、暫停或取消本優惠及修訂其條款與細則的酌情權而毋須事先通知。
The Company reserves the right to change, suspend or terminate the Promotion Offer and to amend the relevant terms and conditions at any time at its sole discretion without prior notice.
- 如有任何爭議，卡公司保留最終決定權。
In case of any dispute(s), the decision of the Company shall be final.
- 此條款及細則的中、英文版本有任何歧異，一概以英文版本為準。
In case of any discrepancy(ies) between the Chinese and English versions of these terms and conditions, the English version shall prevail.