

# Products Liability 產品責任保險

## Application Form 投保書



### Introduction 引言：

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This form must be completed, dated and signed by an authorized representative of your Company (Proposer)

本投保書須由貴公司(投保公司)的授權負責人填寫、註明日期及簽署

- Type or print clearly.  
請以正楷清楚填寫。
- Answer ALL questions. If any questions or part thereof do not apply, please indicate "N/A" in the space.  
請回答所有問題。如有任何問題或本投保書任何部分不適用，請在空白處註明「不適用」。
- Provide any supporting information on a separate sheet using your letterhead and reference the applicable question number.  
如有任何補充資料，請另附帶有貴公司抬頭的信紙填寫，並註明相應的問題編號。
- Check Yes or No answers.  
請勾選「是」或「否」作答。
- Include updated products brochures (or products photo), laboratory testing report, user manual and certificate of QC accreditation  
請附上經更新的產品目錄(或產品圖片)、實驗室檢驗報告、使用說明書及質量控制認證證書

### Important Notice 重要提示：

Please refer to **Attachment 1** concerning your **Duty to Disclose** and the consequences of **Non-Disclosure**.

請參閱**附件1**，了解投保公司的**披露責任**及**違反披露責任**的後果。

## A. Company Details 投保公司資料

Name of Proposer 投保公司名稱：			
Website Address 公司網址：			
Proposer is 公司類別：	<input type="checkbox"/> Individual 獨資	<input type="checkbox"/> Partnership 合資	
	<input type="checkbox"/> Corporation 公司	<input type="checkbox"/> Joint Venture 合資公司	
Business of the Proposer is 投保公司業務性質：	<input type="checkbox"/> Manufacturer 製造商	<input type="checkbox"/> Distributor 經銷商	
	<input type="checkbox"/> Importer 進口商	<input type="checkbox"/> Exporter 出口商	
	<input type="checkbox"/> Others (please specify) 其他 (請詳列)：		
How long has the Proposer been in business? 投保公司從事本行業多久？			
Do you have a subsidiary, affiliate or representative office in the USA / Canada? 投保公司在美加地區是否有分公司、分支或代表處？	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否		
If Yes, please provide the below details 若是，請提供以下資料：			
Name of the Company 公司名稱：			
Address 地址：			
Relationship with the Proposer 請說明該公司和投保公司的關係			
Number of Employees 美加員工數目		Business Nature 業務性質	

## B. Risk Details 風險資料

- Have you acquired or merged with any other company in the last 10 years? If Yes, please provide details and product range of the acquired company.  
投保公司在最近10年有否與其他公司合併？若有，請提供細節和該公司的產品範圍。
- (a) Describe all products made / processed or distributed by you.  
請說明投保公司目前所生產／加工或銷售的所有產品。  
  
(b) How many years have you been manufacturing / producing this product(s)?  
投保公司製造／生產該產品有多少年？
- Describe any products that are no longer manufactured or distributed by you and when they were discontinued.  
請說明投保公司是否有已停止生產或銷售的產品以及在何時停止生產或銷售這些產品。

4. Please confirm if your products are  
請確認投保公司的產品是否：

<input type="checkbox"/> End Products 最後製成品	<input type="checkbox"/> Components, please advise the application for the end products: 零部件, 請說明這些零部件如何應用於最後製成品
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5. (a) Are there any new products proposed for introduction during the ensuring year?  
投保公司在保險年期間會否有任何新產品推出？

Yes 是  No 否

(b) If Yes, please provide list of products:  
若有, 請列出所有產品:

6. (a) Are all of your products designed by you?  
產品是否由投保公司自行設計？

Yes 是  No 否

(b) If No, please explain:  
若否, 請解釋:

7. Please give details of **products for which this insurance is required** with the respective annual turnover (in US\$) for the past 5 years as well as for the coming year for each of the following regions:  
請詳細列出**需要購買本保險的產品**以及過去五年和來年該等產品在以下各地區每年的銷售金額(美元)：

(a) USA / Canada 美加地區

Products 產品	Upcoming Yr (estimated) 來年(估計)	Current Yr 本年度	First Prior Yr 前第一年度	Second Prior Yr 前第二年度	Third Prior Yr 前第三年度	Fourth Prior Yr 前第四年度

(b) Australia & New Zealand 澳紐地區

Products 產品	Upcoming Yr (estimated) 來年(估計)	Current Yr 本年度	First Prior Yr 前第一年度	Second Prior Yr 前第二年度	Third Prior Yr 前第三年度	Fourth Prior Yr 前第四年度

(c) Europe 歐洲

Products 產品	Upcoming Yr (estimated) 來年(估計)	Current Yr 本年度	First Prior Yr 前第一年度	Second Prior Yr 前第二年度	Third Prior Yr 前第三年度	Fourth Prior Yr 前第四年度

(d) Rest of the World 世界其他地區 (美加、澳紐及歐洲以外地區)

Products 產品	Upcoming Yr (estimated) 來年 (估計)	Current Yr 本年度	First Prior Yr 前第一年度	Second Prior Yr 前第二年度	Third Prior Yr 前第三年度	Fourth Prior Yr 前第四年度

8. (a) Is the turnover declared in Question (7) the total company sales turnover?  
在問題(7)所提供的金額是否投保公司的總銷售金額?  Yes 是  No 否

(b) If No, please provide the following details about the declared turnover (in US\$) (please continue on a separate sheet of paper, if insufficient space).  
若否, 請提供以下關於銷售金額 (美元) 的詳情。(如空位不夠, 請另附紙張繼續填寫)。

Products Insured 投保產品	Name of Buyer 買方名稱	Estimated Forthcoming Period 未來一年的估計銷售金額	Actual Expiring Period 過去一年的實際銷售金額

9. (a) Are there contractual agreements e.g. hold harmless agreements entered into with importer or product purchasers that go beyond the typical purchase order agreement?  
投保公司是否與進口商或產品採購商簽訂超出一般商品買賣合約中免除對方賠償條款的合約?  Yes 是  No 否

(b) If Yes, please describe and provide a copy:  
若是, 請描述及提供相關文件複印本:

(c) Do you require "Vendors Liability" coverage for your buyers?  
投保公司是否需要為買方投保「銷售者責任」保險?  Yes 是  No 否

(b) If Yes, please provide details of buyers  
若是, 請提供買方的資料

Name of buyers 買方名稱:

Address 地址:

10. (a) Describe your quality control procedures, including any internal and external testing conducted on the product(s). Please include all external testing reports with respect to product safety.  
請投保公司描述有關產品質量控制措施, 包括任何內外部機構對有關產品的檢驗。請附上所有與產品安全有關的外部機構檢驗報告。

(b) If no quality control program is in place, how is the product quality determined?  
若沒有產品質量控制措施, 投保公司怎樣確定產品質量?

11. Do you have any QA / QC accreditations? If yes, please provide copy of certificates:  
投保公司是否擁有任何質量保證 / 質量控制認證? 如有, 請提供證書複印本:

<input type="checkbox"/> ISO9001	<input type="checkbox"/> Member of ICTI 國際玩具業協會會員	<input type="checkbox"/> GMP	<input type="checkbox"/> HACCP	<input type="checkbox"/> Others (please specify): 其他 (請詳列):
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12.	Are records being kept to trace all products? 所有的產品是否有保存銷售記錄?	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
13.	Are there any instructions provided with the product? If Yes, please attach copies. 產品有否提供使用說明書?如有,請附上複印本。	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
14.	Are warnings and labels satisfying applicable standards affixed to the product so that potential users will understand the hazards associated with using the product? If Yes, please attach copies. 產品有否附上符合適用標準的警告和標籤,讓潛在使用者明白與使用產品有關的危害?如有,請附上複印本。	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
15.	(a) Are any product warranties supplied with the product? 產品是否提供產品保養證書?	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否

(b) If Yes, please describe:  
如是,請描述:

16.	What is the normal life span of the product(s)? 產品的正常壽命是多長時間?
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17.	(a) Has any insurance company cancelled or refused to renew your products liability coverage? 是否有保險公司取消或不予續保投保公司的產品責任保險?	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
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(b) If Yes, please provide details:  
如是,請詳細說明:

18.	(a) Have there been any reported incidents or claims filed for any of your products over the last five years? 產品在過去五年有否涉及產品責任的已呈報事故或索償?	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
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(b) If Yes, please provide the following details including the number of incidents, claims amount and description of incident(s) for each year.  
Please also provide details of any alleged incidents, even if no payments were made:  
若有,請提供以下詳情,包括每年的事故數量、賠償金額及事故詳情。另請提供所有聲稱發生事故的詳情,即使沒有作出任何賠償。

Year 年度	Claims Amount (US\$) 賠償金額 (美元)	Incident Details 事故詳情

19.	(a) Please advise if there has ever been any voluntary or mandatory recall of any of your products? 投保公司有否出現過自願或強制收回產品的情況?	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
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(b) If Yes, please provide details:  
如有,請詳細說明:

20.	Please provide the Limit of Liability required for insurance coverage: 請提供所需投保的責任保險限額:
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### C. Declaration

I/We undersigned, declare that to the best of my/our knowledge and belief the statements set forth herein are true and correct, and agree that these statements shall form the basis of and be incorporated into any contract of insurance which may be conducted between the Proposer and Chubb Insurance Hong Kong Limited.

我／我們聲明本投保書及其隨附的任何文件中所載的陳述、詳情及資料在各方面均屬真實準確，且並無錯誤陳述、隱瞞或遺漏陳述任何其他重大事實。  
我／我們同意，本投保書連同任何其他所獲提供之資料或文件，均會構成任何保險合約的基礎。

### D. Disclosure Statement

The following disclosure statement is only applicable in situations where an insurance broker is used to purchase/place a policy. The applicant understands, acknowledges and agrees that, as a result of the applicant purchasing and taking up the policy to be issued by Chubb Insurance Hong Kong Limited (Chubb), Chubb will pay the authorized insurance broker commission during the continuance of the policy including renewals, for arranging the said policy. Where the applicant is a body corporate, the authorized person who signs on behalf of the applicant further confirms to Chubb that he or she is authorized to do so. The applicant further understands that the above agreement is necessary for Chubb to proceed with the application.

以下公開聲明僅適用於透過保險經紀購買／遞交保單的情況下使用。  
申請人明白、確知及同意，安達保險香港有限公司(安達)會就申請人購買及接受其簽發的保單，於保單有效期內(包括續保期)向負責安排有關保單的獲授權保險經紀支付佣金。假如申請人為法人團體，代表申請人簽署的獲授權人員須向安達確認他／她已獲該法人團體授權。  
申請人亦明白安達必須取得申請人以上的同意，才可以處理其保險申請。

### E. Signature 簽名

Signature with Company Chop:  
投保公司負責人簽名並加蓋公司印章：

Name of Company Representative:  
投保公司負責人姓名：

Title:  
投保公司負責人職銜：

Date:  
簽署日期：

## Attachment 1 附件1

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### **Your Duty of Disclosure 披露責任:**

Before you enter into a contract of general insurance with an insurer, you have a duty to disclose to the insurer every matter that you know, or could reasonably be expected to know, is relevant to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms. 在與保險公司訂立保險合約前，閣下有責任向保險公司披露有關任何會影響保險公司考慮可否接受投保或投保條款的已知悉或預期應該知悉的所有資料。 You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate a contract of general insurance. 閣下在續保、延保、改保或恢復保險合約前亦對保險公司負有提供有關資料的披露責任。

Your duty however does not require disclosure of any matter:

然而，閣下並無責任披露以下資料：

- That diminishes the risk to be undertaken by the insurer.  
有關減低保險公司承保風險的資料。
- That is of common knowledge.  
屬普通常識。
- That your insurer knows or, in the ordinary course of its business, ought to know.  
保險公司已知悉，或於其日常業務營運中應該知悉的資料。
- As to which compliance with your duty is waived by the insurer.  
屬已獲保險公司豁免披露責任的資料。

It is important that all information provided in support of your application for insurance is understood by you and is correct, as you will be bound by your answers and by the information provided by you. If you do not understand any part of this notice, you should obtain independent advice. 閣下須了解本投保書所填寫的所有資料，且須確保有關資料準確無誤，因閣下會受所提供的資料約束。若閣下不明白投保書的任何部份，應在簽署投保書前諮詢獨立意見。

Your duty of disclosure continues after your application for insurance has been completed up until the contract of insurance is entered into. 閣下須於填寫本投保書後至訂立保險合約期間繼續履行披露責任。

### **Consequences of Non-Disclosure 違反披露責任:**

If you fail to comply with your duty of disclosure, Chubb may be entitled to reduce its liability under the contract in respect of a claim or may cancel the contract.

若閣下未能遵守披露責任，保險公司或有權自起始日期起解除合約。

If your non-disclosure is fraudulent, Chubb may also have the option of avoiding the contract from its beginning.

若有關違反披露責任的行為涉及欺詐，保險公司可選擇自合約生效日起解除保險合約，並保留閣下已就本保險合約支付的任何保險費。

### **Change of Risk or Circumstances 風險或情況變動:**

You should advise Chubb as soon as practicable of any change to your normal business as disclosed to Chubb prior to entering into the contract of insurance. This includes every change materially affecting the facts or circumstances existing at the commencement of this insurance, or at any subsequent renewal date.

倘閣下於本投保書所披露的日常業務出現任何變動（例如更改地址、收購事項及新的海外業務），閣下應於實際可行的情況下盡快通知保險公司。

### **Subrogation 代位權:**

Where you have agreed with another person or company, who would otherwise be liable to compensate you for or contribute towards any loss or damage which is covered by the Policy, that you will not seek to recover such loss or damage or contribution from that person, Chubb will not cover you, to the extent permitted by law, for such loss or damage or contribution.

若閣下已經與本須就本保單承保的任何損失或損害作出賠償的另一名人士或公司協議，同意閣下將不向該人士追償有關損失或損害，保險公司在法律容許的情況下將不會就有關損失或損害為閣下提供保障。

## About Chubb in Hong Kong 關於安達香港

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Chubb is the world's largest publicly traded property and casualty insurer. With both general and life insurance operations, Chubb has been present in Hong Kong SAR for more than 90 years via acquisitions by its predecessor companies. Its general insurance operation in Hong Kong SAR (Chubb Insurance Hong Kong Limited) is a niche and specialist general insurer. The company's product offerings include Property, Casualty, Marine, Financial Lines and Consumer Lines designed for large corporates, mid-sized commercial & small business enterprises as well as retail customers. Over the years, it has established strong client relationships by being consistent and responsive, by offering marketing leading claims services and innovative products, and providing market leadership built on financial strength.

安達為全球最大的上市財產及責任保險公司，經營一般保險及人壽保險業務，透過收購其前身公司，已立足香港特別行政區超過 90 年。安達香港的一般保險業務（安達保險香港有限公司）為大型及中小企業客戶、以及個人客戶設計及提供特定的保險產品，包括財產險、責任險、海上險、金融險和個人保險服務。多年來，安達憑著其雄厚財務實力及市場領導地位，開創新的保險產品，提供優質理賠服務，建立長遠穩健的客戶關係，與時並進。

More information can be found at [www.chubb.com/hk](http://www.chubb.com/hk).

如欲獲取更多資料可瀏覽 [www.chubb.com/hk](http://www.chubb.com/hk)。

## Contact Us 聯絡我們

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