

GENERAL DETAILS 一般資料

Policy No. 保單號碼:		Insured Name 投保人姓名:	
Contact No. 聯絡電話:		Fax No. 傳真號碼:	
Email 電郵:		Effective Date of Required Amendment 更改項目生效日期:	

DETAILS OF AMENDMENT REQUIRED 所需更改資料

<input type="checkbox"/> Amend Insured Name 更正投保人姓名	<input type="checkbox"/> Amend Period of Insurance 更改保單承保期
<input type="checkbox"/> Amend Postal Address 更改通訊地址	<input type="checkbox"/> Amend Sum Insured 更改投保額
<input type="checkbox"/> Amend Insured Location 更改投保地址 Gross Floor Area 建築面積: _____ Year of Built 落成年份: _____ Address 地址: _____	
<input type="checkbox"/> Amend Insured Domestic Helper 更改投保家傭# Name 姓名: _____ Date of Birth 出生日期: _____ HKID No 香港身份證號碼 / Passport No. 護照號碼: _____ Position 職位: <input type="checkbox"/> Domestic Helper 家傭 <input type="checkbox"/> Gardener 園丁 <input type="checkbox"/> Chauffeur 司機 <input type="checkbox"/> Others (Please specify) 其他(請註明) _____ <input type="checkbox"/> Amend Insurance Plan 更改所選保障計劃# Change to 更改為 <input type="checkbox"/> 計劃 Plan I <input type="checkbox"/> 計劃 Plan II <input type="checkbox"/> 計劃 Plan III If domestic helper insured with Plan II or III* (applicable to Domestic Helper Insurance) or Plan B (applicable to Home Protector), please complete the following about the health condition of new domestic helper? 如已投保計劃II或III* (適用於家傭保險) 或計劃B (適用於家居保), 請填寫有關您家傭的健康狀況: 1. Is he/she receiving or contemplating any medical attention or surgical treatment or taking any medicine? 他/她是否正在接受或打算接受任何醫療護理或手術或服食任何藥物? <input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否 2. Has he/she ever been rejected or subject to special terms and conditions when applying for accident or medical insurance? 他/她曾否被拒投保意外或醫療保險, 或需附加特別項目或條件才受保? <input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否 <small>* 15-day waiting period is applicable under Surgical & Hospitalisation Expenses, Out-patient Benefits and Dental Expenses. 外科手術、住院費用、門診保障及牙科費用等候期為15日</small> If any of the above answer is "Yes", please give details. 如以上任何一項答案為“是”, 請詳細說明。	
*Please enclose domestic helpers' passport copy with the passport signature specimen. 請附上家傭護照副本及簽署式樣。	
<input type="checkbox"/> Others (Please give details) 其他事項(請在此詳述)	

Any amendment on the policy will not be automatically accepted by Allied World Assurance Company, Ltd ("the company"). In case that the Company accepts the amendment, respective endorsement will then be issued. 任何保單上更改項目, 需由Allied World Assurance Company, Ltd 世聯保險有限公司(「本公司」)個別審核評保。如本公司接受有關更改將會以批單形式通知投保人。

Signature of Policyholder 保單持有人簽署	Date 日期
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Personal Data Information Collection Statement (PICS)

Purpose of Collection

Allied World Assurance Company, Ltd (Hong Kong Branch) (collectively with the other subsidiaries of Allied World Assurance Company Holdings, Ltd, "Allied World") may collect and use your personal data for the purposes of conducting its insurance business, including:

so that we can provide you with and manage insurance products and services, including to consider and process your application; to vary, cancel or renew your insurance; to deal with and/or process any claims under your policy, including settlement, and to conduct necessary investigations; to complete due diligence and background checks that are either required by law or regulation or have been put in place by Allied World; to respond to your queries and administer your policy, including correspondence with you; to investigate fraud, misconduct or any unlawful act or omission in relation to your policy; so that we can comply with legal obligations; for research and statistical purposes; for marketing (including, where permitted by law, direct marketing) of other services provided by us; and/or any purpose directly related to the above.

In general, it is voluntary for you to provide Allied World with your personal data. However, if you do not provide sufficient information, Allied World may not be able to provide insurance services to you.

Potential Transferees

Data held by Allied World relating to you will be kept confidential but Allied World may, for the purposes set out above, transfer your personal data to:

other insurers; reinsurers; intermediaries; insurance associations, federations or similar organisations; related companies; our advisers, service providers and agents; external claims data collectors and verifiers; parties that have an insurance scheme in place under which you purchased your policy; parties involved in claims investigation and management; government and statutory agencies; and/or as otherwise required or allowed by law, in each case both within and outside of the Hong Kong Special Administrative Region.

Marketing and Promotion

Treating you as a valued customer, Allied World and its group companies may use the personal data, including name and contact details, collected from you for the purposes of direct marketing of Allied World and its group companies' general insurance products, services or offers and for sending you the promotional materials or updates of such products, services or offers when they become available.

Allied World will not use your personal data for direct marketing if you have indicated objection to such use by ticking the opt-out box on the proposal form. You may also, at any time, request Allied World to cease the use of your personal data for direct marketing purposes, by informing Allied World's Compliance Officer at the contact information set out below.

Access Requests and Corrections

You have the right, subject to applicable law, to request access to and correction of any personal data concerning yourself held by Allied World. Requests can be made to the Compliance Officer of Allied World Assurance Company, Ltd, by mail to Suite 2201, 22/F One Island East, Taikoo Place, 18 Westlands Road, Quarry Bay, Hong Kong or fax to +852 2968 5111, or email to hkcompliance@awac.com.

個人資料資訊收集聲明 (PICS)

收集目的

Allied World Assurance Company, Ltd 世聯保險有限公司 (香港分行) (與 Allied World Assurance Company Holdings, Ltd 的其他子公司統稱「Allied World 世聯」) 為營運其保險業務之目的可能會收集和使用閣下的個人資料，包括：

以便本公司為閣下提供保險產品及服務並予以管理，包括考慮及處理閣下的保險申請；更改、取消或更新閣下的保險；應對及/或處理閣下保單的索賠，包括賠償及作出必要的調查；完成法律或法規要求或 Allied World 世聯實施的盡職審查和背景調查；回應閣下的查詢以及管理閣下的保單，包括與閣下通訊；調查與閣下保單相關的詐欺、不當行為或任何非法行為或不作為；以便本公司能遵守法律上的要求；用於研究和統計目的；用於營銷（包括在法律允許的情況下直接促銷）本公司提供的其他服務；及/或與上述直接有關的任何目的。

一般而言，向 Allied World 世聯提供個人資料屬自願性質。雖然如此，如閣下未能提供足夠資料，Allied World 世聯可能無法為閣下提供所需的保險服務。

潛在資料轉移

Allied World 世聯會確保持有的個人資料保密，但本公司可能會基於上述目的將閣下的個人資料轉移予：

其他保險公司；再保公司；中介機構；保險業組織、聯會或類似組織；關連公司；本公司的顧問、服務提供者和代理人；本公司以外的索賠資料收集者及核查人員；閣下於已設有保險計劃購買保單時的各方；參與索賠調查以及管理的各方；政府和法定機構；及/或任何相關的法律或規則要求或允許的人士，以上各項適用於香港特別行政區境內及境外。

市場推廣

閣下貴為 Allied World 世聯的尊貴客戶，本公司及其集團公司可能會透過閣下為直接促銷所提供的個人資料（包括姓名及聯絡資料），向閣下推廣本公司及其集團公司的一般保險產品、服務或優惠，以及為閣下提供該等產品、服務或優惠的市場推廣資料和最新消息。

若閣下已於投保書上選擇拒絕本公司利用閣下的個人資料進行直接促銷並表示不願接收任何市場推廣資料和最新消息，Allied World 世聯將不會使用閣下的個人資料作直接推廣用途。閣下亦可隨時透過下述聯絡方式通知本公司的合規主任並行使其選擇權拒絕本公司利用閣下的個人資料進行直接促銷。

查閱個人資料要求及更改個人資料

在符合適用法律的情況下，閣下有權要求查閱及更改 Allied World 世聯所持有任何有關閣下的個人資料。有關申請可循下列途徑向本公司的合規主任提出：郵寄至香港鰂魚涌太古坊華蘭路 18 號港島東中心 22 樓 2201 室，或傳真至+852 2968 5111，或電郵至 hkcompliance@awac.com。