



家傭靈活保  
Domestic Worker Protector

Enquiry Hotline 客戶熱線 : 3666 7033

Basic Plan (Section 1 only)	Extra Care (Section 1-6)	Super Care (Section 1-11)
Section	Coverage	Limit In HK\$ / Year
1	Employees' Compensation Protects you as the employer against liabilities under Employees' Compensation Ordinance when the Domestic Worker sustains bodily injury by accident or disease arising out of and in the course of employment.	\$100,000,000
2	24-Hour Accident Insurance Protects the Domestic Worker against accidental injury and death both during and not during his/her course of duties for : a) Accidental Death & Dismemberment b) Emergency Medical & Dental Expenses	\$120,000 \$20,000
3	Hospitalization & Surgical Expenses Protects the employer against his/her contractual liability for the Hospitalization & Surgical charges incurred if the Domestic Worker is confined to any licensed hospital in Hong Kong on the recommendation of a registered medical practitioner. a) Daily Hospital Income (Max. 40 days) b) Surgical	\$30,000 \$350/day \$16,000
4	Repatriation Expenses Protects the employer against his/her contractual liability to repatriate the Domestic Worker back to his/her country of origin in the event of death or certified medical unfitness for continual employment. a) Upon medical unfitness b) On the remains upon death	\$3,000 \$15,000
5	Personal Effects Protects loss of or damage to covered personal properties of the Domestic Worker at the place of employer's residence.	\$3,000
6	Fidelity Coverage Protects the employer against the financial loss arising from a dishonest act committed by the Domestic Worker.	\$4,000
7	Clinical Expenses Protects the employer against his/her contractual liability for the Clinical Expenses incurred if the Domestic Worker visits any registered medical practitioner in Hong Kong in the event of sickness or accidental injury. Max. HK\$150 per visit per day.	\$4,000
8	Dental Expenses Protects the employer against his/her contractual liability for the Dental Expenses incurred if the Domestic Worker visits any registered dentist in Hong Kong. Covers oral surgery, treatment of abscesses, X-rays, extractions or filings as a result of dental disease. Reimburses two-thirds of dental expenses incurred by the insured domestic worker.	\$2,000
9	Domestic Worker Liability Protects the Insured &/or Domestic Worker against legal liability in respect of (a) accidental bodily injury or (b) accidental damage to property of third party, occurring due to the negligence of the Domestic Worker while in the course of and arising out of his/her employment with the insured, within the territory of Hong Kong during the Period of Insurance. a) Accidental bodily injury b) Accidental damage to property	\$30,000 \$5,000
10	Replacement Expenses Protects the employer against financial loss of replacing the Domestic Worker in the event the Domestic Worker is certified by a registered medical practitioner as being medically unfit to complete the term of employment with the insured.	\$6,000
11	Temporary Worker Subsidy Protects the employer against financial loss of employing a temporary worker, in the event the Domestic Worker is hospitalized for more than one day. HK\$250 per day, max. 30 days per year	\$7,500

1) Major Exclusions : Cancer, heart disease, all injuries or sickness arising out of the pre-existing conditions will be excluded under Section 2, 3, 4 & 7. Cancer and heart disease exclusion under Section 3 & 4 will be deleted if "Cancer & Heart Disease Endorsement" is adopted

2) Waiting period for Section 3, 7 & 8 : The first 14 days from inception of the Policy

3) Deductibles for Section 3b), 5 & 6 : HK\$200 per claim

4) Age Limit : 18-60 (above 60, subject to approval and loading)

5) Extra Care and Super Care will only be available for domestic workers recruited from outside Hong Kong under an Employment Contract

6) This brochure is a brief summary. Please refer to the policy for coverage, terms and conditions

基本計劃：保障範圍只適用於第1項

優越計劃：保障範圍只適用於第1-6項

卓越計劃：保障範圍適用於第1-11項

項目	保障範圍	每年最高賠償額 (港幣)
1	僱員賠償保障 保障僱主對受聘家傭因工傷亡之勞工法例賠償及應履行之法律責任。	\$100,000,000
2	二十四小時人身意外保障 賠償家傭因工或非因工在意外中導致之傷亡，包括： a) 意外身故或斷肢 b) 因意外受傷導致之醫療及牙齒整理費用	\$120,000 \$20,000
3	住院及手術費用賠償 保障僱主如要履行家傭合約上所需支付之住院及手術費。 a) 每天住院入息賠償 (最多40天) b) 手術費用賠償	\$30,000 每天\$350 \$16,000
4	送返原居地費用 賠償僱主因家傭逝世或健康不宜繼續受聘而需送返遺體或其本人往原居地之費用。 a) 因健康不宜繼續受聘 b) 遺體送返	\$3,000 \$15,000
5	家傭財物保障 賠償家傭之財物在僱主居所及承保範圍內引致之損失。	\$3,000
6	家傭誠信保障 保障僱主因所聘之家傭作出不忠實之行為而招致財物有所損失。	\$4,000
7	門診保障 保障僱主因家傭在港因意外 / 疾病而由註冊醫生應診之實際門診費用。 每天每次最高賠償為港幣150元。	\$4,000
8	牙醫費用保障 保障僱主因家傭在港因牙疾而由註冊牙醫應診之實際費用。例如口腔手術、膿腫治療、X-光照射、拔牙或補牙。 因受保家傭牙患所引致之醫療費用，可獲實際支出之2/3賠償。	\$2,000
9	家傭法律責任保障 保障投保人及或其家傭於在港工作期間內因疏忽而引致的第三者身體受傷或財物損失之金錢索償。 a) 第三者意外身體受傷 b) 第三者意外財物損失	\$30,000 \$5,000
10	轉換家傭保障 保障僱主因家傭健康不宜繼續受聘而需轉換僱傭所須之費用。	\$6,000
11	臨時傭工津貼保障 保障僱主因家傭暫時住院(需住院超過1天)而需另聘臨時家傭替代的費用。 每天最高賠償為港幣250元，最長每年30天。	\$7,500

1) 主要不保項目：癌症，心臟病或受保前已存在之所有損傷或疾病均不在2, 3, 4 及7項目之受保範圍內。但若選取“癌症及心臟病保障”，則3及4項目不保事項之癌症及心臟病部份將被刪除

2) 保障項目3, 7 及 8：等候期為保單生效日期之首14天

3) 保障項目3(b), 5 及 6：每宗賠償的自負額為港幣200元

4) 投保年齡 18-60 (六十歲以上須經審核及批准)

5) 優越計劃及卓越計劃只適用於有簽署海外僱傭合約之家庭傭工

6) 本小冊子僅供參考之用，所有內容及有關之保障範圍及條款，概以保單為準

# Domestic Worker Protector Proposal Form 家傭靈活保投保表格

## Information of Domestic Worker 家傭資料

Full Name of Domestic Worker 家傭姓名：

Surname 姓 \_\_\_\_\_ Given Name 名 \_\_\_\_\_

Date of Birth 出生日期：\_\_\_\_\_ MM月/ \_\_\_\_\_ DD日/ \_\_\_\_\_ YY年

Passport or HKID Card No. 護照或香港身份證號碼：\_\_\_\_\_

(Please attach with Passport / HKID Card Copy 請附上護照/香港身份證副本)

Sex 性別： Female 女性  Male 男性

Nationality 國籍： Philippines 菲律賓  Thailand 泰國  Indonesia 印尼

Others 其他 - (Please State 請註明) \_\_\_\_\_

Nature 性質： Full-time 全日  Part-time 兼職

Duties 工作： Domestic works 一般家務  Chauffeur\* 司機

Others 其他：\_\_\_\_\_

\*Subject to special rating / extra premium 需附加額外保費

## Please answer the following question 請回答下列問題：

Has your domestic worker ever been refused and/or required special terms and/or additional premium for any accident or illness insurance?  Yes 是  No 否

閣下之家傭曾否被拒絕接受投保意外或疾病保險，或被附加特別條件或要求繳付額外保費？

(If your answer is "Yes", please give details on separate sheet. 如問題之答案為“是”者，請另加紙說明。)

## Please “✓” the appropriate box 請在適當的方格加上✓號

	Basic Plan 基本計劃 (Section 1 only 保障項目1)	Extra Care 優越計劃 (Section 1-6 保障項目1-6)	Super Care 卓越計劃 (Section 1-11 保障項目1-11)
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1 Year 一年保費  HK\$256+HK\$29 Levy = HK\$285(min)  HK\$358+HK\$22 Levy = HK\$380(min)  HK\$658+HK\$22 Levy = HK\$680(min)

2 Years 二年保費  HK\$442+HK\$50 Levy = HK\$492  HK\$649+HK\$39 Levy = HK\$688  HK\$1,189+HK\$39 Levy = HK\$1,228

“Cancer & Heart Disease Endorsement” (Section 3 & 4) - Only applicable to Extra Care & Super Care Plan

“癌症及心臟病保障” (保障項目3及4) - 僅適用於優越計劃及卓越計劃

1 Year Premium 一年保費 - HK\$250

2 Years Premium 二年保費 - HK\$450

## Effective Date 有效日期：

From 由 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (MM月/DD日/YY年)

(Back-dating is unacceptable 不可追溯保單生效日期)

## Information of Employer 僱主資料

Full Name of Employer 僱主姓名：

Surname 姓 \_\_\_\_\_ Given Name 名 \_\_\_\_\_

HKID Card / Passport No. 香港身份證/護照號碼：\_\_\_\_\_ ( \_\_\_\_\_ )

Occupation 職業：\_\_\_\_\_

Tel. No. 電話號碼：(Residence 住宅) \_\_\_\_\_

(Office 辦公室) \_\_\_\_\_

(Mobile 手提電話) \_\_\_\_\_

Email 電郵地址：\_\_\_\_\_

Mailing Address 聯絡地址：\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HK 香港島  KLN 九龍  NT 新界  Outlying Island 離島

Place of employment 僱工受保地址：\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(if different from above 如與上述地址不同)

HK 香港島  KLN 九龍  NT 新界  Outlying Island 離島

## Payment Method 保費付款方法

Please ✓ the appropriate box 請在適當的方格加上✓號

Payment by Cheque 支票付款

Cheque No. 支票號碼：\_\_\_\_\_

Bank 銀行：\_\_\_\_\_

Cheque should be crossed and made payable to “Chartis Insurance Hong Kong Limited” 劃線支票抬頭請註明「美亞保險香港有限公司」

Payment By Credit Card 信用卡付款

Credit Card Payment Authorization Form 信用卡付款授權書

 VISA Card VISA 卡   MasterCard 萬事達卡

Card No. 信用卡號碼：\_\_\_\_\_

Expiry Date 信用卡屆滿日期：\_\_\_\_\_ (MM月/YY年)

Card Holder's Name 信用卡持有人姓名：\_\_\_\_\_

Card Holder's Signature 信用卡持有人簽署：\_\_\_\_\_

Date 日期：\_\_\_\_\_

I hereby authorize and request Chartis Insurance Hong Kong Limited to charge my VISA/ MasterCard account for the premium stated on this proposal form.

本人茲授權並要求美亞保險香港有限公司從本人之VISA/ MASTER 卡戶口內支付本申請書所註明之保費。

## Declaration 聲明：

I declare and agree on behalf of myself and any person or persons who may have or claim any interest in any insurance on this proposal form the following:

本人現聲明並代表本人及任何有權或聲稱有權就本投保表格要求保險賠償的人士同意下列各項：

1. In the event of differences between the English and Chinese version of this Proposal Form, the English version shall prevail. It is also understood that the insurance policy relevant to this proposal form is issued in English version only and will be binding upon this Proposal being accepted and approved.

本人同意如本文之譯本於意義上遇到任何爭論時，一概以英文版本為準；本人同時明白保險契約只會以英文發出，並會於本申請獲接納及核實時生效。

2. I agree that Chartis Insurance Hong Kong Limited (hereinafter called “Chartis Hong Kong”), the general agent of American Home Assurance Company, Hong Kong Branch reserves its right to accept or reject my application for insurance. If the Proposal Form is accepted and approved by Chartis Hong Kong, the policy will become effective.

本人同意美亞保險香港有限公司(以下簡稱為「美亞保險」)作為美安保險公司香港分行之總代理，保留一切接納申請與否之權利；並明白申請一經美亞保險接納及批核後，保障立即生效。

3. All my declarations made herein, together with all information provided by me are full, complete and true and shall constitute the basis of the contract between the parties thereto. I understand that benefits will not apply to treatment arising from any existing diseases, injuries, ailments or conditions which have been diagnosed, aware of and/or existed, treated prior to the first day of this insurance. Any failure to comply with this paragraph may render any policy issued hereunder void.

本人謹此聲明上述填報及其他本人提供之資料均為完整無缺及全為事實，並同意此等資料將構成本人與美亞保險所訂保險合約之基本條件；本人明白凡因投保當時及之前已診斷、已知、曾治理及/或已患之疾病、損傷或其他狀況而引致之醫療需要，一律不予賠償。如有違反此項聲明，任何關於本申請書之保險合約將會作廢。

4. I hereby declare and agree on behalf of myself and any person or persons, firm or corporation, who may have or claim any interest in any insurance on this application that, any personal information collected or held by Chartis Hong Kong (whether contained in this Proposal Form or otherwise obtained) is provided and may be held, used, or disclosed by Chartis Hong Kong to any selected third party (within or outside of Hong Kong, including reinsurance and claims investigation companies and industry associations/ federations) for the purposes of processing this application and providing subsequent services for this and other financial products and services, direct marketing, and data matching, and to communicate with me for such purposes. I understand that (i) I am duly authorized to release my and the insured's information and will fully indemnify Chartis Hong Kong for any losses, damages, or claims that might result from the release of such information and (ii) I have the right to obtain access to and to request correction of any personal information held by Chartis Hong Kong concerning me and the insured. Such requests can be made to Data Privacy Officer at G.P.O. Box 456, Hong Kong.

本人現聲明並謹代表本人及任何有權或聲稱有權就本申請書要求保險賠償的人士，同意下列聲明：美亞保險可保留、使用或透露美亞保險所收集或保留之任何有關本人的個人資料（在此投保表格內所載或從其他途徑取得），給予與美亞保險有關的人士、機構或任何被選定的機構（在本港或海外的，包括再保險及賠償調查公司及有關的工業協會/協會），用作處理本產品及其他財務產品及服務有關的申請及提供其後的服務、直接促銷及資料核對等用途，及因此等用途與本人或有關人士等聯絡。本人明白到(i)本人已正式獲授權以發放本人及受保人之資料；倘若發放有關資料時可能導致的損失、損害或要求賠償，本人將必須負上全部的賠償責任及(ii)本人有權向美亞保險查閱及申請改正所有與本人及受保人的個人資料。有關的申請可來函香港郵政總局信箱456號個人資料管理員辦理。

Signature of Employer 僱主簽名 \_\_\_\_\_ Date 日期 \_\_\_\_\_

For office use only 公司專用
Producer Name
Producer Code
Producer Contact Tel. No.

PL03-12/09

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Chartis Insurance Hong Kong Limited  
Operations Department  
46/F, One Island East, 18 Westlands Road,  
Island East, Hong Kong

*Chartis* is a world leading property-casualty and general insurance organization serving more than 40 million clients in over 160 countries and jurisdictions. With a 90-year history, one of the industry's most extensive ranges of products and services, deep claims expertise and excellent financial strength, *Chartis* enables its commercial and personal insurance clients alike to manage virtually any risk with confidence.

*Chartis* is the marketing name for the worldwide property-casualty and general insurance operations of Chartis Inc.

*Chartis* 是全球產物及意外保險業界的領導品牌，業務廣佈全球逾160個國家和地區，服務逾4,000萬客戶。*Chartis* 擁有90年的悠久歷史，提供完善多元化的產物及意外保險服務，以深厚的理賠專業經驗以及雄厚的財務實力，使企業及個人客戶有信心管理其風險。

*Chartis* 是 *Chartis Inc.* 旗下廣佈全球之產物及意外保險事業單位的品牌。

This insurance plan is underwritten by American Home Assurance Company, Hong Kong Branch through its general agent, Chartis Insurance Hong Kong Limited. 此保障計劃由美安保險公司香港分行承保，並由其香港總代理美亞保險香港有限公司提供。



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This brochure provides only a summary of the policy benefits. Coverage under the policy shall be subject to the terms, conditions and exclusions of the policy. A copy of the policy is available from Chartis Insurance Hong Kong Limited. 本單張謹提供保單摘要，有關保單承保範圍及除外責任條款請參看保單條款及細則。如需要保單條款及細則，歡迎向美亞保險香港有限公司索取。