

she takes care of my household work /  
i take care of her needs in rainy time



the domestic helper insurance that covers you and your maid

SmartHelper

### major product feature

#### medical expenses coverage

Provides comprehensive coverage of hospitalization & surgical (include day surgery), out-patient, and emergency dental expenses incurred by your domestic helper up to the limit specified in the summary of benefits.

#### personal liability **NEW**

Protect you against the legal liability arises from your domestic helper in respect of accidental bodily injury to third party or accidental loss of or damage to their property. We will pay up to \$100,000 per year.

#### repatriation expenses **ENHANCED**

If your domestic helper becomes medically unfit to continue employment or in the event of death in service, a benefit up to \$20,000 will be provided to cover the cost of repatriating him/her to the country of origin.

#### hospital cash subsidy

If your domestic helper is hospitalised as an in-patient for five or more consecutive days, you will receive a hospital cash subsidy of \$200 per day and up to \$6,000 per year.

#### fidelity protection **NEW**

This covers any financial loss resulting from fraud or dishonest acts committed by your domestic helper up to \$8,000 per year.

#### optional cover

##### supplementary medical (critical illness) benefit **NEW**

- Additional \$70,000 medical cover on top of the basic \$30,000 cover
- We will pay you the medical treatment expenses if your domestic helper is hospitalized due to a critical illness# provided that it does not exist prior to the first entry date of this optional cover

# List of covered critical illness:

- Stroke
- Coronary Artery By-pass Surgery
- Cancer
- Kidney Failure
- Major Organ Transplantation
- Multiple Sclerosis
- Aorta Surgery / Heart Valve Replacement
- Encephalitis
- Bacterial Meningitis
- Stones in the Urinary and Biliary Systems

#### special features

- No excess or waiting period will be applied, only the standard policy exclusions.
- A considerable premium discount if you opt for a 2-year period of insurance (applicable to Basic Cover only).
- An additional 10% premium discount if you insure more than one domestic helper under this Plan (applicable to Basic Cover only).
- If you change your domestic helper, coverage can be transferred to the new helper (notification required).

### summary of benefits

Basic Cover	Max. Limit Per Year (HK\$)
<b>(1) Employees' Compensation</b> Protect your legal liability as an employer under the Employees' Compensation Ordinance and Common Law	<b>\$100,000,000</b> per event
<b>(2) Hospitalization &amp; Surgical Expenses</b> a) Daily room and board expenses b) Surgical expenses c) Day Surgery	<b>\$30,000</b> \$350/day \$15,000/operation \$7,500
<b>(3) Out-patient Expenses</b> a) Out-patient visit b) Bonsetter	<b>\$4,000</b> \$200/visit/day \$500 (\$100/visit/day)
<b>(4) Emergency Dental Expenses</b> Include oral surgery, treatment of abscesses, X-rays, extractions of fillings	<b>\$2,500</b> (\$200/visit/day)
<b>(5) Personal Accident</b> Serious accidental injury or death during rest day in Hong Kong	<b>\$100,000</b>
<b>(6) Personal Liability</b> Third party liability arising out of negligence of your domestic helper	<b>\$100,000</b>
<b>(7) Repatriation Expenses</b> If your domestic helper is medically unfit to continue employment or in the event of death in service	<b>\$20,000</b>
<b>(8) Re-hiring Expenses</b> If your domestic helper is medically unfit to finish a contract or in the event of death in service	<b>\$10,000</b>
<b>(9) Hospital Cash Subsidy</b> If your domestic helper is hospitalized as an in-patient	<b>\$6,000</b> (\$200/day)
<b>(10) Loan Protection</b> For financial loan from you which cannot be repaid due to death of your domestic helper or his/her being medically unfit to continue employment	<b>\$10,000</b>
<b>(11) Fidelity Protection</b> Financial loss resulting from fraud or dishonest act committed by your domestic helper, including a) Costs of replacing main door lock/gate lock b) Unauthorized use of long distance calls	<b>\$8,000</b>  \$1,000 \$3,000
<b>Optional Cover</b>	
<b>(1) Supplementary Medical (Critical Illness) Benefit</b> Additional medical cover on top of the basic cover	<b>\$70,000</b>

### annual premium table

(Effective from 1 Aug 2009 until further notice)

#### basic cover

Period	One Overseas Domestic Helper	Two or More Overseas Domestic Helpers
1 year	\$680	\$630/helper
2 years	\$1,200	\$1,080/helper

#### optional cover

##### supplementary medical (critical illness) benefit

Age	Each Domestic Helper Per Year
18 – 45	\$438
46 – 64 (Renewal Only)	\$625

- N.B.
- Premium is inclusive of Levies.
  - The annual premium per local helper is \$300.
  - Minimum premium per policy is \$500.
  - All benefits and premiums are in Hong Kong Dollars.

#### period of insurance

Your choice of either 1 or 2 years.

#### age limit

**Basic Cover:** Applicable for domestic helper who is 18 – 60 years old on his/her first entry to this plan, and renewable up to 64 years old.

**Optional Cover:** Applicable for domestic helper who is 18 – 45 years old on his/her first entry to Supplementary Medical (Critical Illness) Benefit, and renewable up to 64 years old.

#### eligibility

- a) This Plan is available for overseas domestic helpers who are employed under an Employment Contract as governed by the Immigration Ordinance (Chapter 115).
- b) Only Employees' Compensation Section will be available for local helpers.

#### major exclusions

Some of the exclusions under this Plan are:

- Suicide or intentional self injury
- Venereal disease or insanity, AIDS
- Pregnancy or childbirth
- Acts committed under the influence of drugs or alcohol
- Strike, riot, civil commotion
- Injury due to war, nuclear weapons, radioactivity, terrorism
- Any acts violating the law
- Pre-existing medical conditions

NB: Please refer to the policy for complete details. A specimen policy can be made available upon request.

### AXA: a world leader in financial protection

#### AXA Group in 2008

- 91 billion euros in consolidated revenues
- 981 billion euros in assets under management
- 135,000 employees and distributors worldwide working to deliver the right solutions and top quality service to our customers
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  - Provide health and personal protection coverage for their families or employees
  - Manage their personal or corporate assets
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#### AXA General Insurance Hong Kong

- One of the top general insurers in Hong Kong
- Over 170 years of local experience in Asia
- Over 200 professional, well-trained and caring staff
- Wide range of SMART products for individual and business needs

#### motor

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#### personal accident

#### business package

#### liability

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To apply or for more details, please contact your agent or broker, or you can contact us on

**2523 3061**

[www.axa-insurance.com.hk](http://www.axa-insurance.com.hk)



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 Email: axahk@axa-insurance.com.hk  
 Website: www.axa-insurance.com.hk

# 投保書 Proposal Form

## 「卓越」優傭樂家庭僱傭保險

SmartHelper Domestic Helper Insurance

請以英文正楷填寫，並在適當的空格內填上  Please fill in this form in English block letters and tick the boxes where appropriate

### 投保人資料 PROPOSER DETAILS

投保人姓名 - 姓 Name of Proposer - Surname		名 Given Name		性別 Sex
香港身份證號碼 HKID Card No	出生日期 (日/月/年) Date of Birth (dd/mm/yyyy)	婚姻狀況 Marital Status <input type="checkbox"/> 單身 Single <input type="checkbox"/> 已婚 Married	職業 Occupation	工作性質 Job Nature
住宅地址 Residential Address				<input type="checkbox"/> 香港 HK <input type="checkbox"/> 九龍 KLN <input type="checkbox"/> 新界 NT
通訊地址 (如與上述地址不同) Correspondence Address (If different from above mentioned address)				<input type="checkbox"/> 香港 HK <input type="checkbox"/> 九龍 KLN <input type="checkbox"/> 新界 NT
手提電話 Mobile No	公司電話 Office Tel	住宅電話 Home Tel	電郵地址 Email	

### 投保細則 INSURANCE COVER

\* 本保單由 \_\_\_\_\_ 日 dd / 月 mm / 年 yyyy 起有效，為期  一年 One year  兩年 Two years  
 Policy to commence on \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ for the period of

\* 此保單所提供的保障，必須在本公司確定接納投保後，及收受保費後，才能正式生效。  
 The liability of the Company does not commence until this proposal has been accepted by the Company and the premium is received.

### 僱傭資料 DOMESTIC HELPER DETAILS

	僱傭 Domestic Helper (1)	僱傭 Domestic Helper (2)	僱傭 Domestic Helper (3)
1) 姓 Surname			
2) 名 Given Name			
3) 性別 Sex			
4) 香港身份證或旅遊證件號碼 HKID Card or Passport No			
5) 出生日期 (日/月/年) Date of Birth (dd/mm/yyyy)			
6) 原居國家 Country of Origin			
7) 職位 Position	<input type="checkbox"/> 家傭 Helper <input type="checkbox"/> 園丁 Gardener <input type="checkbox"/> 其他 (請註明) Others (please specify) _____	<input type="checkbox"/> 家傭 Helper <input type="checkbox"/> 園丁 Gardener <input type="checkbox"/> 其他 (請註明) Others (please specify) _____	<input type="checkbox"/> 家傭 Helper <input type="checkbox"/> 園丁 Gardener <input type="checkbox"/> 其他 (請註明) Others (please specify) _____

### 自選保障 OPTIONAL COVER

8) 是否選擇投保附加醫療(嚴重疾病)保障? Select to insure Supplementary Medical (Critical Illness) Benefits?	<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No	<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No	<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No
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若空位不敷應用，請另加紙張填寫。Should there be insufficient space, please continue on a separate sheet.

## 投保人聲明 DECLARATION

請細閱下列各項條文及投保人須知，然後在指定空位內簽署。本人聲明

Please read the following statements and Important Notes to Proposer carefully and sign in the space provided. I declare that

- 本人從未遭受任何保險公司拒絕受理投保、續保或取消本人的保單或要求提高保費及附加特別條件始允承保。  
No insurer has ever cancelled, declined, refused to renew or imposed special terms or conditions on any policy held by myself.
- 本人已填報一切重要的有關資料，絕無隱瞞或保留，並同意將本投保書和聲明作為與安盛保險有限公司和本人所訂合約的根據，並以保單上各條款為準則。  
I have not withheld any material information and accept that this proposal and declaration shall be the basis of, and be incorporated in, the contract between AXA General Insurance Hong Kong Limited and myself.

投保人簽署 Proposer's Signature  
(請勿於空白投保書上簽署 Do not sign a blank form)

日期 Date  
(日 / 月 / 年 dd/mm/yyyy)

## 付款方法 PAYMENT METHOD

本人選擇以下列方式繳交保費港幣  
I wish to pay my premium HK\$

元正  
by

支票抬頭請填「安盛保險有限公司」Cheque payable to **AXA General Insurance Hong Kong Limited**

VISA 咭  萬事達咭 MasterCard

信用咭號碼 Credit Card No \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ 信用咭有效期至 Credit Card Expiry Date \_\_\_\_\_ 月 mm \_\_\_\_\_ 年 yyyy

持咭人姓名 Cardholder's Name \_\_\_\_\_

本人授權安盛保險有限公司從本人上述的信用咭賬戶支取有關保險保單的保費。  
I hereby authorize AXA General Insurance Hong Kong Limited to charge my above credit card for the insurance premiums of this insurance policy.

持咭人簽署 Cardholder's Signature

日期 (日 / 月 / 年) Date (dd/mm/yyyy)

## 投保人須知 Important Notes to Proposer

- 閣下必須在其知悉範圍內提供所有有關會影響保險公司於接納或釐定此保單條文的資料，如對應透露的資料有任何疑問，請即向本公司或閣下的保險代理/經紀查詢。我們建議閣下將有關的資料作記錄(包括信件副本)，以備日後作參考之用。為確保閣下的利益，閣下應如實呈報所有有關資料，否則此保單將可能無法提供閣下所需的保障，甚至可能會導致此保單無效。  
Any other facts known to you which are likely to affect acceptance or assessment of the insurance cover you are requesting must be disclosed. Should you have any doubt about what you should disclose, do not hesitate to ask us or your insurance agent/broker. We recommend you keep a record (including copies of letters) for your future reference of any additional information given. Providing correct answers and making sure we are informed is for your own protection, as failure to disclose such information may mean that your policy will not provide you with the cover you require and may even invalidate the policy altogether.
- 收集個人資料聲明  
閣下提供的資料，為本公司提供保險業務所需，並可能使用於下列目的：
  - 任何與保險或財務有關的產品或服務，或該等產品或服務的任何更改、變更、取消或續期；
  - 任何索償、或該等索償的調查或分析；及
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  - 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；
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  - 或透過「聯會」移轉予任何「聯會」的會員，以達到任何上述或有關目的。此外，在此授權安盛保險有限公司由「聯會」從保險業內收集的資料中查閱及/或核對閣下任何資料。  
閣下有權查閱及要求更正由安盛保險有限公司持有有關閣下的個人資料，如有需要，可向本公司的個人資料(私隱)條例監察主任提出。  
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The information you provide to us is collected to enable us to carry on insurance business and may be used for the purpose of:
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  - any claim or investigation or analysis of such claim; and
  - exercising any right of subrogationand may be transferred to:
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  - any members of the "Federation" by the "Federation" for any of the above or related purposes.Moreover, AXA General Insurance Hong Kong Limited is hereby authorized to obtain access to and/or to verify any of your data with the information collected by the Federation from the insurance industry. You have the right to obtain access to and to request correction of any personal information concerning yourself held by our Company. Requests for such access can be made to our Personal Data (Privacy) Ordinance Compliance Officer.
- 本公司致力發展及改良產品的質素，務求滿足閣下個人保險上的需要。作為本公司的寶貴客戶，我們會時刻為閣下提供新產品及服務的最新消息。倘若閣下日後不希望收到此等資料，請來信通知本公司。Our Company is committed to developing products to meet your personal insurance requirements. As you are a valued customer of our Company, we will keep you informed of new products and services when they become available. If you do not want to receive this information either now or in the future, please write and tell us.

[註：本中文簡譯，概以英文原文為準]