



中国人民保險(香港)有限公司

The People's Insurance Company of China (Hong Kong), Ltd.

香港干諾道中 148 號粵海投資大廈 15 字樓

15/F, Guangdong Investment Tower, 148 Connaught Rd., Central, Hong Kong.

TEL : (852) 2517 2332 FAX: (852) 2540 6260 / (852) 2540 6377

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火險投保書

FIRE INSURANCE APPLICATION

日期 :

Date: _____

保戶名稱
Name of Insured :

過戶
Mortgagee(s)/

Lien Holder(s) :

保險地址
Risk Situation :

保險期限
Period : _____ 個月, 由 _____ 至 _____ 起訖日期包括在內
Month(s) From _____ To _____ both dates inclusive.

建築樓高層
Construction : The Building is _____ storied of 三合土建築(框架結構) Cement Concrete Built 磚牆, 鐵/石棉瓦屋頂 Brick Wall, Metal/Asbestos Roof 其他 Others _____

用途
Occupation : _____

投保財產
PROPERTY INSURED
行業
Business : _____

- 1) 房屋(溝渠及地基除外)
Building/Flat(excluding drains & foundations)..... HK\$ _____
- 2) 裝修 傢俬
Fixtures & Fittings, Furniture..... _____
- 3) 衣服 行李(珠寶首飾除外)
Clothing & Personal Effects (Excluding Jewellery)..... _____
- 4) 機器及零件(工模除外)
Machinery & Accessories (Excluding Moulds of any kind)..... _____
- 5) 貨品, 包括製成品, 半製成品及製造中
On Stocks Incl. Manufactured, Unmanufactured & In Process..... _____
- 6) 其它
Others..... _____

投保總額
TOTAL AMOUNT INSURED: HK\$ _____

擬投保險別 : (請在適當方格內劃上“v”號)

Perils Proposed to Cover: (Please mark a “v” in the appropriate box provided below)

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> 火險
Fire Only | <input type="checkbox"/> 01A 飛機墜毀險
Aircraft Damage | <input type="checkbox"/> 02A 叢林山火險
Bush Fire | <input type="checkbox"/> 03B 地震險
Earthquake Fire Shock & Flood |
| <input type="checkbox"/> 火險及附加險
Fire and Extra Perils | <input type="checkbox"/> 04A 爆炸險
Explosion | <input type="checkbox"/> 05B 車輛碰撞險
Vehicle Impact (by any vehicle) | <input type="checkbox"/> 06A 罷工暴動險
Riot & Strike |
| <input type="checkbox"/> 財產險
Property Risks | <input type="checkbox"/> 06 A-G 罷工暴動及惡意破壞險
Riot & Strike & Malicious Damage | <input type="checkbox"/> 07A 自燃險
Spontaneous Combustion | <input type="checkbox"/> 08A 自動滅火花灑漏水險
Sprinkler Leakage |
| <input type="checkbox"/> 財產一切險
Property All Risks | <input type="checkbox"/> 09B 颱風或風暴險包括及引致之洪水險
Typhoon & Windstorm (including Flood) | <input type="checkbox"/> 09C 颱風, 風暴或洪水險
Typhoon & Windstorm & Flood | <input type="checkbox"/> 10A 水箱水管爆裂或溢水險
Water Tanks, Apparatus & Pipes |

電話
Telephone : _____

通訊地址
Address : _____

投保人簽名及公司蓋章
Applicant's Signature and Co. Chop

此欄由本公司專用 FOR OFFICE USE ONLY

Code : _____

Person in Charge: _____

Rate : _____

Remarks: _____

Policy No: _____