

火 險 投 保 書
FIRE INSURANCE PROPOSAL FORM

POLICY NO.: _____

投保人名稱
Name of Insured _____

過戶
Mortgagee(s) _____

保屋宇
On Building _____

保裝修
On Fixtures & Fittings _____

保傢俬
On Furniture _____

保電器
On Electrical Appliances _____

保衣箱
On Clothing _____

保貨物
On Goods _____

保機器
On Machinery _____

保
On _____

合共保險金額
Total Sum Insured _____

保險處所
Situation _____

幾層幾等
No. of Stories & Construction _____

佔用性質
Occupation _____

起保日期 由 _____ 至 _____ 保期
Date of Commencement: From _____ To _____ Period _____

投保人之通訊地址
Address of the Insured _____

電話 _____ 備註
Tel. _____ Rms. _____

有否向其他公司投保 公司名稱 保額
Is it insured by other Insurer? _____ Name of Insurer _____ Sum Insured _____

本人茲聲明敘述各項均屬確實並同意本投保單作為雙方訂立契約之根據。本投保單在未經公司接受允保以前不生效力。保險費應在保險公司發出有關收據時即時繳交，倘其在起保日期之日起計三十天內仍不繳交保費時，則有關保險合約即告失效。本保險並不包括由“恐怖行動”所造成的直接或間接損失。

I/We hereby declare that all the particulars of this proposal are true, and I/We agree that this Proposal shall be the basis of Contract between myself/ourselves and CHINA TAIPING INSURANCE (MACAU) CO., LTD. The Insurance will not commence until this proposal has been accepted by this company. The premium will be payable to the Company on demand. The contract will be cancelled after 30 (thirty) days from the date of commencement during such period the Insured does not pay the premium. This insurance does not cover any loss, damage, cost or expense directly or indirectly caused by, resulting from or in connection with any act of terrorism.

日期 _____ 投 保 人
Date _____ Proposer's Signature _____

FOR OFFICE USE ONLY

Rate _____ Extra Perils _____

Warranties _____ Excess _____

Agent _____ Int. Rms. _____