



Mitsui Sumitomo Insurance (China) Company, Limited
 34F, Shanghai World Financial Center, 100 Century Avenue, Pudong New Area, Shanghai, China
 Tel: 021-6877-7800 Fax: 021-6877-7500

家庭财产及个人综合保险 [安居·乐行] 投保书
(Household Property and Personal Package Insurance Application Form)

1. 中介方 (Intermediary) _____

2. 投保人信息 (Information of Policy holder)

中文名 (Chinese) _____ 是否加入高尔夫保险 (选择加入请在左框内打勾确认)
 Golfer Insurance (Option)
 英文 (English) _____ 国籍 (Nationality) _____
 出生日期 (Date of Birth) _____ 护照号码 (Passport No.) _____

参保家庭成员明细 (The person(s) to be insured)

	姓名 (Surname, Given Names)	护照号码 (Passport No.)	是否加入高尔夫保险 Golfer Insurance (Option)
(A) 配偶 (Spouse)	_____	_____	<input type="checkbox"/>
(B) 父母 (Parent)	人 (Person(s)) (1). _____	_____	<input type="checkbox"/>
	(2). _____	_____	<input type="checkbox"/>
(C) 子女 (The number of dependent children)	人 (Person(s)) (1). _____	_____	
	(2). _____	_____	
(D) 家庭保姆 (Maid)	人 (Person(s)) _____	_____	

身份证号 (ID No.) _____

☆ 本保险仅限持有上海市·广东省·北京市居住证的人士及其家庭成员*加入。
 (Subject to the residence in Shanghai, Guangdong and Beijing, this policy provides the Insured and his family with coverage)
 * 被保险人家庭成员: 本保险所指被保险人家庭成员为与被保险人共同生活并在保险居所内长期居住的被保险人的配偶、父母及其子女。
 (The Family shall apply to his spouse, parents and dependent children with long term residing at the Insured's household)

3. 联系地址 (Mailing Address)
 请填写接收保单、通知书、变更说明等资料的地址。 _____

4. 住宅地址 (Home Location) _____ **Tel:** _____

5. 公司名 (Company) _____ **Tel:** _____

6. 职业 (Occupation) _____

7. 保险期间 (Period of Insurance) _____ Year _____ Month _____ Day(00:00) To _____ Year _____ Month _____ Day(24:00)

8. 承保区域 (Area of Cover)

- ◎ 家财险: 保单上所列明的住所内
 但是, 携带物品损失: 中国国内 (含香港、澳门、台湾) • 被保险人的母国
 Household Goods: The residence specified in the policy
 Personal Effects: China (including Hongkong-Macao-Taiwan) and the insured's native country
- ◎ 个人赔偿责任保险: 中国国内 (含香港、澳门、台湾) • 被保险人的母国
 Liability to third parties: China (including Hongkong-Macao-Taiwan) and the insured's native country
- ◎ 伤害保险: 保单上所列明的住所内
 Accident: The residence specified in the policy
- ◎ 高尔夫保险: 中国国内 (含香港、澳门、台湾) • 被保险人的母国
 Golfer: China (including Hongkong-Macao-Taiwan) and the insured's native country

9. 加入方案 (Plan selected)

承保内容 (Items Covered)	免赔金额 (Deductible)	保险金额 (Sum Insured) Unit: RMB			
		安居计划 Plan 1	安康计划 Plan 2	安心计划 Plan 3	安享计划 Plan 4
个人财物 & 家财 (Personal belongings & Household contents)	① 一般风险: 400 ② 水损: 400 或者损失额的 10%, 以高者为准 ③ 手机/电脑/数码相机: 1,000 或者损失额的 30%, 以高者为准	50,000	100,000	150,000	200,000
		但单件物品的价格以下列金额为限。(Limits of liability per article are as follows)			
贵重品 (High risk Items)	400	10,000	20,000	30,000	60,000
携带物品 (Personal Effects)	400	但单件物品的价格以 5,000 元为限。(Limits of liability per article: 5,000)			
现金 (Cash)	400	5,000	10,000	但单件物品的价格以下列金额为限。(Limits of liability per article are as follows)	
基础部分 (家财) Basic Coverage (Home Property)	0	2,000			
		2,000 per accident		5,000 per accident	
		半损 (损失额占保险金额 30% 以上): 10,000/一次事故 (定额给付) Half Loss (30% or more of the sum insured): 10,000 per accident (fixed amount)			
		全损 (损失额占保险金额 80% 以上): 25,000/一次事故 (定额给付) Total Loss (80% or more of the sum insured): 25,000 per accident (fixed amount)			
		以家财的保险金额为限/一次事故 Limits of liability: Sum Insured of Household Goods per accident			
		损失金额的 10% 为限/一次事故 Limits of liability: 10% of the loss per accident			
		5,000 per accident			
		2,000/一次事故/累计 (per accident/the sum total)			
		10,000 the sum total		20,000 the sum total	
		地震损失慰问金 (Earthquake Allowance)	0	实际赔付 (限额: 1,000/一日) Actual loss (Limits of liability: 1,000 per day)	
损失防止费用 (Loss Prevention Cost)	400	实际赔付 (限额: 4,000/一次事故; 2,000/单件物品) Actual loss (Limits of liability: 4,000 per accident; 2,000 per article)			
清理残骸费用 (Removal of Debris)	0	实际赔付 (限额: 2,000/一次事故/累计) Actual loss (Limits of liability: 2,000 per accident/the sum total)			
修理附带费用 (Extra charges for repair)	0				
门锁更换费用 (Locks & Keys)	0				
临时住所费用 (Short Term Accommodation)	0				
访客个人财物损失 (Visitor's belongings)	400				
护照·身份证重置费用 (Passport replacement fee)	0				



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基础部分 (赔偿责任) Basic Coverage (Liability)	第三者赔偿责任 (Liability to Third Parties)	400	1,000,000/一次事故/累计 Limits of liability: 1,000,000 per accident/the sum total			
	承租人赔偿责任 (Tenant's Liability)					
	邻居赔偿责任 (Liability to Neighbors)		火灾 (Fire)	(在上述限额内) 500,000/一次事故/累计 Limits of liability: (within the above limit of liability) 500,000 per accident/the sum total		
			火灾以外 (Other Accidents)			
	紧急救助费用 (First aid expense)		实损赔付 (限额: 10,000/一次事故; 50,000/累计) Actual loss (Limits of liability: 10,000 per accident; 50,000/the sum total)			
自行车赔偿责任 (Bicycle Accident Liability)	50,000/一次事故/累计 50,000 per accident/the sum total					
①基础保费 (固定部分) (Fixed Premium)			950	1,200	1,550	1,800
基础部分 (伤害部分) Basic Coverage (Accident)	伤害保险 (死亡、残疾 保险金) Accidental Death and Disability at home	被保险人 (Insured)	100,000/定额给付(lump sum payment)			
		家属 (Family)	100,000/定额给付(lump sum payment)			
		家庭保姆 (Maid)	50,000/定额给付(lump sum payment)			
	住院·门诊慰问金 (仅针对被保险人及其家属) Sympathetic Payment for Accident allowance		2,000/人 (定额给付) 2,000 per person (fixed amount)			
②基础保费 (变动部分) (Variable Premium)			被保险人及家庭成员保费 (每人) (Per person in the Named Insured's household)	50	家庭保姆保费 (每人) (Per Maid)	30
可选部分 (高尔夫 保险) Optional Coverage (Golfer)	高尔夫道具保险 (Golf equipments)	300	20,000			
	一杆进洞保险 (Hole in one or Albatross)	0	15,000/一次事故/累计 15,000 per accident/the sum total			
	个人赔偿责任保险 (Liability)	300	5,000,000/一次事故/累计 5,000,000 per accident/the sum total			
③可选保费 (Premium for Optional Coverage)			450			
保费构成 (Premium Calculation)			基础保费①+基础保费②+可选保费③ (选择加入的情况下) Premium ① and ② are standard coverage; ③ is optional			
加入方案 (Plan Selected)			Plan 1 <input type="checkbox"/>	Plan 2 <input type="checkbox"/>	Plan 3 <input type="checkbox"/>	Plan 4 <input type="checkbox"/>
请在投保之前致电保险公司业务咨询电话021-68777899或向保险公司业务人员询问保险合同各项规定, 并听取保险公司业务人员的说明。						
我/我们就此宣告以上所填报资料真实无误并同意此调查表将成为我/我们和保险公司之合约的基础 I/We declare the information given above to be correct and agree that this questionnaire shall form the basis of the contract between me/us and the Insurer.						
投保人签名 Applicant's Signature:			日期: Date:			