<u>Head Office</u> Tel: 2876 0000 Fax: 2876 0111 <u>Kowloon Branch</u> Tel: 2384 0071 Fax: 2782 1435 <u>Yuen Long Branch</u> Tel: 2473 0332 Fax: 2473 1099

Shop Basic Policy

"Shop Basic Policy" is the essential insurance plan for shops.

Coverage		Annual Premium
1.	Fire Protects the shop facilities and inventory against damage or loss from causes such as fire and other insured perils provided in the policy.	(For each \$100,000 Sum Insured) HK\$100
2.	Employees' Compensation Protects the Insured against legal liability if employee sustains bodily injury or death arising out of his/her employment	(For every employee in the shop) HK\$200

^{*} The precise terms and conditions that apply are given in the Policy.

Note: If the total sum insured of shop facilities and inventory or the number of employees in the shop increases, the premium will be adjusted accordingly. If the annual salary (including other income) of any employee in the shop exceeds HK\$120,000 or employees always need to work outside the shop, the premium will be quoted separately.

If you need the following insurance or other coverage, please make enquiries to us:

- 1. Money Insurance
- 2. Plate Glass Insurance
- 3. Burglary Insurance
- 4. Building Insurance
- 5. Public Liability Insurance

For enquiries, please call our

Enquiry Hotline : 2876 0121

Fax Hotline : 2876 0111

SHOP BASIC POLICY PROPOSAL

Name of Company : (Chinese)			
(English)			
Insured Address :			
Nature of Business :	Tel N	0.:	
Period of Insurance : From	То		
Please complete the following:			
A. Fire			
Business Decorations, Furniture, Fixtures & Fittings, Machinery Plant & Equipment and Trade Utensils			
2. Stock and Materials in trade		HK\$	
Total Sum Insured : HK\$			
B. Employees' Compensation (Optional)			
Categories of Employees	No. of Persons	Estimated Annual Salary and other Income	
1. Clerical and Management Staff		1.	
2. Shop Attendants		2.	
3. Outdoor Sales		3.	
4. Delivery Workers		4. 5.	
5. Drivers 6. Others (Please enceify ich nature)		5. 6.	
6. Others (Please specify job nature) Total:		hK\$	
Total.	i	III	
Decla	aration of Proposer		
 We do hereby declare that: the insured premise is being used as a shop. we agree that if at the time of loss or damage, the Sum Insured b shall be calculated proportionally. we have never been refused any similar insurance or had any s insurance claim within the past 12 months. the above answers are true and correct and agree that this declara Limited. we agree that no insurance is in force until this proposal has been we have read and agreed the policies and practices of The Pacific 	special terms and condition ation shall form the basis of accepted by the said Compa	is imposed on my renewal, and have never made any similar f the contract between us and The Pacific Insurance Company, any.	
Signature of Proposer and Company Chop		Date	
Name of Signatory:	Title	Title :	
E	asy Application		
Simply complete this proposal form and	d send to our Compan	y together with a crossed cheque.	
Premium Payable : HK\$	•	Cheque No. :	
Name of Bank :			
(Payable to The Pacific Insurance Company, Limited)			