

Group Life insurance

Nowadays, employee benefits are widely adopted by companies as an employee retention tool. To attract candidates of high calibre, it is important to offer employee benefits including group life insurance that keep up with the market.

團體人壽保險

現今的商業市場，員工福利廣泛被企業視用為留住人才的工具。為了吸引高素質的人才，提供緊貼市場的員工福利包括團體人壽保險是絕對不可或缺。



Group Life insurance - Generali



Group life insurance is one of the most common benefits which employers offer to their employees. We offer a wide range of group life insurance products to accommodate the needs of companies of different sizes.

The insurance protects:

1. Total and permanent disablement
2. Accidental death and disablement
3. Living benefit / critical illness benefit
4. Employees both at work and during leisure time worldwide round-the-clock

團體人壽保險 — 忠利保險

團體人壽保險是十分普遍的員工福利由僱主提供給員工以作為一項附帶福利。我們提供保障範圍廣泛的團體壽險產品，以應付不同規模企業的需求。

保障包括：

1. 完全及永久傷殘
2. 意外死亡及傷殘
3. 生活保障金 / 危疾保障
4. 團體人壽保險計劃提供24小時全球保障，員工無論工作和消閒期間都可受到保障

Product Highlights

- Tailor-made plan
- Comprehensive cover for life, accidental death and dismemberment benefit, and permanent total disability benefit
- Flexible combination of the above benefits to cater for your employees' specific jobs nature
- Flexible choice of benefit either choose a fixed amount or simply a multiple of your employees' monthly salary
- Simple application process by submitting one application form for all employees. No supporting and identification documents is required
- No medical underwriting or questions for group of 6 or more employees under a specific sum insured
- No exclusion for death

產品亮點

- 方案度身訂造
- 提供人壽保險、意外身故及斷肢保障、永久傷殘保障等全面保障
- 您可按僱員的工作性質，靈活選擇合適的保障項目
- 提供彈性保額選擇，於計劃成立前可以選擇固定的投保額或按僱員月薪倍數釐定
- 投保手續簡易，只需遞交一份投保申請書，毋須附上任何身份或職位證明文件
- 凡僱員人數達6名或以上的投保申請而投保額不高於指定金額，則毋須醫療批核或回答健康狀況問題
- 人壽保障不設不保事項

Group Life Insurance

Information Required for Obtaining Quotation

Basic Eligibility

1. Full time permanent employees
2. Age limit of participation - aged of 18 to 64
3. Stationed in Hong Kong
4. Being employed by Hong Kong registered company
5. Compulsory participation (benefit by employer)

Brand New Case without any coverage of group insurance

1. Name of prospect _____
2. Business nature _____
3. Census with date of birth or age, gender,
benefit plan belongs to, monthly or annual
salary (if benefit is salary multiple) or sum insured _____
4. Benefit coverage (Term Life/ with riders- AD&D, TPD,
Critical Illness) _____
5. Benefit formula (flat amount/ salary multiple/ by formula) _____
6. Job nature (if any non-clerical staff) _____
7. Any employee who stationed outside H.K.
(please specify the exact location, total
number of employees and if under HK
employment contract) _____

Company with existing coverage of group insurance

1. Name of prospect _____
2. Business nature _____
3. Renewal date _____
4. Census with date of birth or age, gender,
benefit plan belongs to, monthly or annual
salary (if benefit is salary multiple) or sum insured _____
5. Benefit coverage (Term Life/ with riders- AD&D, TPD,
Critical Illness) _____

6. Benefit formula (flat amount/salary multiple)

7. Job nature (if any non-clerical staff)

8. Any employee who stationed outside H.K.
(please specify the exact location, total
number of employees and if under HK
employment contract)

9. Claim(s) incurred in last three years (if available), with the
information of cause of claim

重要事項：本表格並非保單，有關保單條款細則及不承保範圍，請投保人參閱接納投保書後或在投保人索取時提供的保單。

IMPORTANT NOTE : This form is not a policy of insurance. Please refer to the policy wordings including the applicable terms, conditions and exclusions which will be issued to applicant upon acceptance of this proposal or upon applicant's request.

團體人壽保險

團體壽險報價須知

基本申請資格

1. 全職僱員
2. 參與的年齡限制 - 年齡在 18 至 64
3. 長駐香港
4. 受僱於香港註冊公司
5. 強制參與（由僱主提供保障）

公司現時沒有任何團體壽險保障

1. 公司名稱
2. 業務性質
3. 投保僱員的出生日期或年齡的日期、性別、參與的保障計劃、每月或每年的工資（如果薪金倍數是用來計算賠償權益）或保額
4. 保障範圍（定期壽險 / 與附加條款-AD&D、TPD、危疾）
5. 計算賠償權益的方式（定額 / 薪金倍數 / 其他方式）
6. 工作性質（如有非文員）
7. 是否有駐守在香港以外的僱員（請註明確實的地點，員工總數如根據香港僱傭合約）

公司現時有團體壽險保障

1. 公司名稱
2. 業務性質

3. 續保日期
4. 投保僱員的出生日期或年齡的日期、性別、參與的福利計劃、每月或每年的工資（如果薪金倍數是用來計算賠償權益）或保額
5. 保障範圍（定期壽險 / 與附加條款-AD&D，TPD，危疾）
6. 計算賠償權益的方式（定額 / 薪金倍數／其他方式）
7. 工作性質（如有非文員）
8. 是否有駐守在香港以外的僱員（請註明確實的地點，員工總數如根據香港僱傭合約）
9. 過去三年的索賠紀錄（如有），請提供詳細資料

重要事項：本表格並非保單，有關保單條款細則及不承保範圍，請投保人參閱接納投保書後或在投保人索取時提供的保單。

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聲明 DECLARATION

本人 / 吾等聲明，本人 / 吾等已填報一切必要的資料，絕對正確，並無隱瞞或保留。本人 / 吾等明白本人 / 吾等提供的資料為泰山保險顧問有限公司提供保險業務所需，並可能使用於下列目的：i) 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；ii) 任何索償，或該等索償的調查或分析；iii) 行使任何代位權；及可能移轉予任何有關的公司，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。

I / We declare that the Statements and particulars given in this application are true and that I / We have not withheld any material information. The information provided by me / ourselves to Taishan Insurance Brokers Ltd. is collected to enable Taishan Insurance Brokers Ltd. to carry on insurance business and may be used for the purpose of: i) any insurance or financial related product or service or any alterations, variations, cancellation or renewal of such product or service; ii) any claim or investigation or analysis of such claim; and iii) exercising any right of subrogation; and may be transferred to any related company or any other company carrying on insurance or reinsurance related business or an intermediary or a claims or investigation or other service provider providing services relevant to insurance business for any of the above or related purposes.

支付經紀佣金 PAYMENT OF BROKER COMMISSION

泰山保險顧問有限公司（「該公司」）藉向保險公司收取的佣金，作為其所提供服務的酬金。閣下同意進行是項保險交易，即構成閣下同意該公司收取佣金。

Taishan Insurance Brokers Limited is remunerated for its services by the receipt of commission paid by insurers. Your agreement to proceed with this insurance transaction shall constitute your consent to the receipt of commission by the Company.

本人 / 投保人亦明白泰山保險顧問有限公司必須取得本人 / 投保人以上的同意，才可以處理本人 / 投保人之保險申請。

I / Proposed insured further understand that the above agreement is necessary for Taishan Insurance Brokers Limited to proceed with the application.

日期 Date

保戶簽署 Signature of Insured