

For helper completed ERB related course **Application form Local Domestic Helper Insurance Scheme for ERB**

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「Smart Living」 (Not for Post-Natal Care)

- Included statutory required Employees' Compensation Insurance
- Employer may choose "EC only" or "Comprehensive EC" cover
- "Comprehensive EC" provided a better & peace of mind coverage. Cover included Employees' Compensation, Third Party Liability and Personal Accident Insurance.
- About application's information contained herein : (1) Transferred to Blue Cross (Asia-Pacific) Insurance Ltd. for the purpose to effect insurance and other related usage. (2) We shall obey to Personal Data (Privacy) Ordinance in relation to it's collection, holding, processing, use and / or transfer.
- Arranged by "Assurance Appraisal Ltd." & unwritten by "Blue Cross (Asia-Pacific) Insurance Ltd.".

		Option 1	Option 2
Coverage Item	Limit of Indemnity (HK\$)	EC only	Comprehensive EC
Employees Compensation Cover employer's legal liability under the Employees' Compensation Ordinance	\$100,000,000 any one occurrence	✓	✓
Third Party Liability To indemnify the legal liability for any accidental bodily injury or property damage in the course of business	\$1,000,000 any one accident & any one period	×	✓
Helper Personal Accident Cover accidental death & disablement	\$100,000	×	✓

		Insurance Fee(HK\$)			
Ree	Period	EC only		Comprehensive EC	
		One Helper	Two Helpers	One Helper	Two Helpers
	One month			\$100	\$180
No Minimum Include all Government's levies	Three months			\$140	\$252
	Six months			\$180	\$324
	One year	\$195	\$351	\$250	\$450
	Two years	\$351	\$632	\$450	\$810

Application Procedures						
er Payment System OUGH ATM (WITHIN Ink: FPS: 383 or 106538051						
: Fax (2579 0014) or 91) er payment methods						
 Cheque payable to 「Assurance Appraisal Ltd.」 Mail the cheque with completed form to us Address: Room 1007, Eastern Harbour Centre, 28 Hoi Chak Street, Quarry Bay, Hong Kong 						
ays upon our receipt bsite						
ays ı						

Fax: 2579 0014 Enquiry: 2597 9299 / 28870010 / 25644881 This leaflet is for reference & enrollment purpose. Please refer to policy(English) for exact terms and conditions. WhatsApp: 5481 9491

Please complete this f	orm in block letter and tick 「✓」 at the appropriate box
Employer Details	
Surname/ Last Name	First Name A surcharge \$30 for those using bank left r / counter insurance fee. A surcharge \$30 for those services or bank in incorrect insurance fee. If insured Domestic Power in the surance fee in the surance fee.
Mobile :	necessary rectification. Otherwise, you may have to bear legal consequence.
	3. Completed the related ERB course under Smart Living,
Domestic Helper Application Deta 1. You must inform us for a 2. Helper's age between 1	Smart Baby Care. 4. Upon receipt of your Application ny change of helper. a) Coverage needs to be confirmed by us; &
Full Name of Domestic Helper 1	·
Domestic Work Nature	☐ Mainly Domestic Work ☐ Elderly or Child Care ☐ Escort for outpatient ☐ Hospital Patient Care ☐ Discharged Patient Care
Full Name of Domestic Helper 2	
Domestic Work Nature	
Choice of Option	☐ EC only or ☐ Comprehensive EC
Choice of Period & Fee	☐ 1 month ☐ 3 months ☐ 6 months ☐ 1 year ☐ 2 years Total Insurance Fee: \$
Insurance Period	Fromdaymonthyear todaymonthyear No refund of Insurance Fee for 1, 3 or 6 months insurance period
Confirmation	

- 1. We hereby appoint Assurance Appraisal Ltd. as our exclusive Insurance Broker in handling the said insurance transaction.
- 2. Assurance Appraisal Ltd. is remunerated for its services by the receipt of commission paid by insurers. We agree to proceed with this insurance transaction shall constitute our consent to the receipt of commission by Assurance Appraisal Ltd.
- 3. Helper has completed the related ERB course under Smart Living, Smart Baby Care.

Signed by	Fmnlover	(1