

本商品經本公司合格簽署人員檢視其內容業已符合保險精算原則及保險法令，惟為確保權益，基於保險業與消費者衡平對等原則，消費者仍應詳加閱讀保險單條款與相關文件，審慎選擇保險商品。本商品如有虛偽不實或違法情事，應由本公司及負責人依法負責。

Chubb PRODUCTS LIABILITY INSURANCE APPLICATION FORM

安達產物產品責任保險要保書

103.07.22 安達商字第 1030371 號函送保險商品資料庫

105.05.10 金管保產字第 10502048420 號函核准

Applicant's Instructions :

申請人注意事項：

1. Answer all questions.

請回答下列問題。

2. If space is insufficient to answer any questions fully, attach separate sheet.

若作答空間不夠，請另附其他紙張回答。

3. Application must be signed and dated by owner, partner or officer.

本問卷需公司所有人、合夥人、或部門主管簽章及註明填寫日期。

4. If the answer to any question is none, state NONE.

若回答問題的答案為無的話，請答"無"字。

5. Please do not complete application earlier than 45 days before submission to Insurance Company of North America, Taiwan Branch.

為保持資料正確性請於填妥後45天內交回本公司。

PLEASE TYPE OR PRINT

請以打字或正楷填寫

1. APPLICANT

要保人

a) Full Name : _____

全名：

b) Principal address : _____

住所地：

c) Subsidiaries or Divisions : _____

分支機構：

d) Individual () Partnership () Corporation () Other ()

獨資

合夥

公司

其他

e) Manufacturer () Wholesaler () Retailer ()

製造商

批發商

零售商

Insurance Company of North America Taiwan Branch

Importer () Exporter () Assembler ()
 進口商 出口商 零件組合商

f) Years in business under present name : _____

以目前公司名稱從事該行業之年數

g) Prior experience in this business under another name : _____

以前有無以他公司名稱從事該行業之經驗

h) Does Applicant have a subsidiary, affiliate or representative in the

USA/Canada?..... Yes___No___

被保險人在美國或加拿大是否有附屬公司，分公司或聯絡處？

If any, please give name(s) and address(s):

若有，請列出名稱及地址：_____

2. PRODUCTS AND SALES DATA

產品及銷售資料

Describe your products, Include and identify, those acquired via acquisition or merger, those planned for introduction in next 12 months, and those previously discontinued. Show number of years involved with each products; indicate which products you install, service or repair :

請敘述 貴公司之產品，在敘述中請包括並指明藉由併購或合併而取得之產品及在未來12個月內計劃生產之產品，以及可能中止生產之產品。請按產品及年度，分項說明 貴公司所生產、裝配及修理之產品。

a) List the turnover figures for the past 5 years as well as the estimated Turnover for the forthcoming year. Indicate the approximate percentage split in turnover per territory.

列出過去五年之銷售金額及預估年度預計投保之銷售金額，同時依下列不同地區填寫其所佔之比率。

<u>Year</u>	<u>Turnover</u>	<u>USA/Canada %</u>	<u>Japan/Australia/Europe</u>	<u>Others %</u>
年份	銷售金額(US\$)	美/加地區比率	% 日本/澳洲/歐洲比率	其他地區比率

Est(預估)

Act(實際)

Act(實際)

Act(實際)

Insurance Company of North America Taiwan Branch

Act(實際) _____

Act(實際) _____

Replacement parts are what percentage of total sales : _____%

可替換零件佔總銷售額之百分比率

Please indicate the approximate percentage of overall turnover for the year relating to each Insured product and the number of anticipated units.

請列出各產品佔投保銷售金額之比率及各單位量。

Products & Services (or Specific Categories) 產品和服務 (或特別項目)	Applicant Acts As A/An: 申請者是：					No. of Years for sale 經營此產 品幾年	% of Gross Sales 佔總銷售 額之%	Products Sold To 產品售予						
	M	W	R	I	MR			W	R	MR	C	O		
M - manufacturer 製造商	R - retailer 零售商					MR - manufacturer rep. 製造商代表								
W - wholesaler 批發商	I - importer 進口商					C - consumer direct 直接銷至消費者								
O - other (describe) 其它請說明:														

b) Suppliers and Distributors of your products.

產品之供應商及經銷商

- i. Do you hold them harmless or insure them?.....Yes _____ No _____
貴公司是否與供應商或經銷商訂立損害免責協議免除其法律責任或以保險承保其責任?
- ii. Do they hold you harmless or insure you?.....Yes _____ No _____
供應商或經銷商是否與 貴公司訂立損害免責協議免除 貴公司法律責任或以保險承保 貴公司責任?

If yes in either i, or ii, above, please explain and attach subject contract/agreement.

若第i項或第ii項之答案為"是"時，請加以說明並提供上述提及之合約書。

c) Do you purchase materials or components from others?.....Yes _____ No _____

貴公司是否向他人購買原料或零組件?

Insurance Company of North America Taiwan Branch

d) Do you import products or component parts?.....Yes____No____
貴公司是否進口成品或零件?

e) Do you export products or have foreign operations?.....Yes____No____
貴公司是否輸出產品或於國外提供服務?

f) Could any of your products or services be used on or in connection with :
貴公司之產品或服務是否用在下述項目或與下述項目有關?

1. aircraft/missile/aerospace?.....Yes____No____
航空飛行器/飛彈/太空方面?

2. watercraft or offshore?.....Yes____No____
水上或海上交通工具及離岸設施?

3. transportation/transit?.....Yes____No____
內陸交通運輸?

4. life support service?.....Yes____No____
維生、復健醫療設備或服務?

g) Do you make or handle any product that is explosive, flammable or poisonous
either by itself or in combination with other materials?.....Yes____No____
貴公司是否製造或經營產品本身或是與其他物質結合後會有害人體、易燃或易爆
之產品?

h) Could any of your products be classified as :
貴公司之產品是否歸類於下項產品

1. pharmaceuticals?..... Yes____No____
藥品

2. cosmetics?.....Yes____No____
化妝品

i) Are any of your products sold under another's name or label?.....Yes____No____
是否有產品以他人之名義或標示銷售(即 OEM 之產品)?

PLEASE EXPLAIN ALL OF THE ABOVE "YES" ANSWERS BELOW :

若上述答案為"是"時，請詳述之：

3. PRODUCT DESIGN

產品設計

a) Do you do your own design work?.....Yes____No____
產品是否由 貴公司自行設計?

Insurance Company of North America Taiwan Branch

- b) Do you maintain records of design changes and reasons justifying these changes?.....Yes ___ No ___
是否留存有關設計變更及設計變更理由之記錄?
- c) Are your designs subject to independent external review, testing or certification?.....Yes ___ No ___
貴公司之設計是否曾經由獨立外部機構審核、測試或給予合格證明?
If so, attach details and dates.
若是，請附明細及日期。
- d) Are your products designed, tested, labeled and manufactured :
產品之設計、測試、標示及製造是否符合：
- i. to meet or exceed all government and industry standards?.....Yes ___ No ___
政府及工業標準?
- ii. for optimum safety in spite of misuse or abuse?.....Yes ___ No ___
儘管誤用或濫用仍具良好的安全性?

4. PROCESSING

流程

- a) Do other assemble your products?...Yes ___ No ___
貴公司產品是否由他人裝配?
if assembly by others, do you supervise?.....Yes ___ No ___
若由他人裝配，是否由 貴公司監督?
- b) If installation by others, do you supervise or furnish instruction as to installation?.....Yes ___ No ___
若由他人安裝，是否由 貴公司監督或指示其安裝?
- c) If you maintain and service your products, attach a copy of your standard service contract.
若 貴公司對於產品提供維修或服務，請附 貴公司標準服務契約之影本。
- d) Who packages your products? _____
貴公司之產品由誰包裝?
Who designs your packaging? _____
貴公司之包裝由誰設計?
Who supplies the packaging materials? _____
貴公司包裝之材料由誰提供?
How are they packed when sold? _____
產品出售時如何包裝?

Insurance Company of North America Taiwan Branch

Is any sterile packaging involved? _____

是否有用到無菌包裝?

Do you package for others? _____

貴公司是否為他人包裝?

5. QUALITY CONTROL AND TESTING

品質管制及測試

a) Are written testing procedures followed?.....Yes _____ No _____

是否依循書面測試程序作業?

b) Do you have a quality control manager responsible only to top management?.....Yes _____ No _____

是否有品管控制經理直接對最高管理單位負責?

c) Supplies and components :

產品材料與零組件

i. Are they ordered to your specifications?..... Yes _____ No _____

是否按 貴公司所需之規格而訂購?

ii. Have you determined which ones are critical to the safety of your final product?.....Yes _____ No _____

能否判別那一部份之材料或零組件將影響到 貴公司產品的安全性?

iii. List those critical items, indicating whether testing is on a sample basis or on all units.....Yes _____ No _____

列出易發生危險之零組件並說明是否對該零組件採取抽樣或全盤測試?

iv. Are warranties obtained from all suppliers?.....Yes _____ No _____

是否所有供應商皆提供品質保證?

d) Final Products :

最終成品 :

1. Briefly describe tests applied before sales :

簡述產品售前測試 :

2. What percentage are tested?..... _____ %

測試產品所佔之百分比率?

3. Are records of results quality control tests kept so that you can identify at a later date what tests you applied to a given products at a given time?.....Yes _____ No _____

Insurance Company of North America Taiwan Branch

是否有存留測試結果報告以便日後確定測試之項目及時間?

4. How far back do your records go? (give date).....
所做之紀錄可回溯到多久以前(請說出日期)

5. If your products are manufactured do the specification of your customers do they test the product upon receipt?.....Yes _____ No _____
如果產品是依客戶要求之規格製造，是否客戶於收貨時做產品測試?

6. Do you receive an acceptance sign-off from your customer?Yes _____ No _____
是否由客戶簽字驗收?

6. Instructions/Warnings/Advertisings/Warranties

產品說明/警告事項/產品廣告/產品保證

a) Are hazards inherent in the final product, and warnings against foreseeable misuse and abuse made known to the ultimate user by :
貴公司以下列何種方式警示最終使用者產品因為誤用、濫用所可能發生之潛在危險?

1. warning labels at the point of hazard?.....Yes _____ No _____
在產品危險之部位警告標示之?

2. written instructions?.....Yes _____ No _____
提供文字說明?

3. other means?(attach details).....Yes _____ No _____
其他方式(請說明)?

b) Are warnings/instructions in English?.....Yes _____ No _____
警告事項或產品說明是否以英文書寫?(如有使用其他語言文字者，請說明之。)

c) Are instructions, warnings, labels, and advertising texts subject to review, to assure that they are complete and understandable to the ultimate user, and avoid overstatement relative to safety, or omissions relative to hazards by :
產品說明、警告事項、標籤及廣告內容是否經由下列有關單位審核，以確定最終消費者完全了解，避免對產品安全性做誇大或遺漏之說明?

i. legal counsel?.....Yes _____ No _____
法律顧問?

ii. top management?...Yes _____ No _____
最高管理階層?

iii. other? (attach details).....Yes _____ No _____
其他(附明細)?

d) Do you expressly disclaim or limit warranties for your products?Yes _____ No _____
貴公司是否明示限制保證或拒絕保證 貴公司之產品?

e) Are all warranties and/or disclaimers reviewed by U.S. legal counsel? Yes _____ No _____

Insurance Company of North America Taiwan Branch

所有產品保證及/或拒賠聲明是否都經美國的法律顧問審核?

f) Do you provide any specific training or instructions for the ultimate user in the proper use of your product?..... Yes ___ No ___

貴公司是否有提供最終使用者正確使用本產品之指導或訓練?

If yes, please describe. _____

若有，請敘述。

g) Are salesmen and distributors made aware of your desire to be informed of cases where your product is used for a purpose for which was not designed?..... Yes ___ No ___

配銷商或售貨員是否了解須通知 貴公司任何產品使用不當之案件。

7. LOSS PREVENTION

損失防阻

a) Have your products ever been subject to inquiry or investigation relative to product safety by any governmental agency?..... Yes ___ No ___

貴公司之產品是否曾因其安全性被政府機關要求調查?

If yes, attach details. _____

若為"是"，請附詳細資料說明之。

b) Do you have a written products recall plan?..... Yes ___ No ___

是否有不良產品回收書面計劃?

If yes, please attach.

若為"是"，請附件。

c) Have you ever voluntary/mandatory recalled products because of a potential product safety hazard?..... Yes ___ No ___

是否有產品因潛在安全性危險之考量曾而自願或被強制回收?

If yes, attach details and indicate percent of recovery.

若為"是"，請說明詳情及回收比率(%)

d) Has your management issued a written policy statement on product safety which has been communicated to all employees?..... Yes ___ No ___

貴公司主管是否曾對於產品安全性有一書面說明並告知所有員工?

If yes, please attach.

若為"是"，請附件。

e) Do you have a written products safety program for which specific individuals have responsibility for implementation?..... Yes ___ No ___

貴公司是否有貴產品使用安全之文字說明書好讓使用人能確實遵守?

If yes, attach copy or outline.

Insurance Company of North America Taiwan Branch

若為"是"，請附影本或簡述之。

f) Explain how you can identify your products and parts from similar competitors products and parts :

請說明 貴公司如何能從其他廠商之類似產品中辨認出自己之產品

g) Can you determine, based on available records for all products you have sold :
根據已售產品現有之資料， 貴公司能否確定下項：

(1) when any given product item was manufactured?.....Yes ___ No ___
任何指明產品項目之製造日期?

(2) to whom it was sold, and the date of sale?..... Yes ___ No ___
產品銷售之對象及出售日期?

(3) who supplied parts and supplies going into the final products?....Yes ___ No ___
最終成品之零組件及材料的供應商?

h) Do you maintain copies of old instruction or operation manuals and advertising material?.....Yes ___ No ___

貴公司是否有存留舊的產品說明、操作手冊或廣告資料?

i) Accident procedure :
處理意外事故之程序：

(1) Do you have a written procedure for obtaining information about product complaints, accidents and injuries involving your products?.....Yes ___ No ___
貴公司是否有書面程序來受理產品所致之申訴抱怨、意外事故及體傷案件?

(2) Have you made distributors aware of your desire for prompt notice of all complaints, accidents and injuries involving your product?. Yes ___ No ___
經銷商是否了解須立即通知貴公司所有有關產品所致之申訴抱怨、意外事故及體傷案件?

(3) Does your procedure provide for examining and preserving any allegedly defective product with the results of such examination record?.....Yes ___ No ___
貴公司處理程序是否提供瑕疵品之檢驗及存留瑕疵品和其檢驗結果?

(4) Do reports on complaints, accidents, injuries, and the examination of products involved go to the person responsible for product safety?.....Yes ___ No ___

Insurance Company of North America Taiwan Branch

客戶申訴抱怨、意外事故、體傷案件及出險產品檢驗報告是否會送交負責產品安全之人員?

(5) Are results used for improving the product/process procedures?Yes ___ No ___
處理的結果今後是否會用於產品與製造過程之改進?

8. INSURANCE REQUESTED

要求之保險

a) Limits desired : \$ _____

所要求之保險金額：

b) Deductible desired : \$ _____

所要求之自負額：

c) Present insurer : _____

目前之保險公司：

d) Has any insurer ever cancelled, restricted or refused to renew your liability insurance?.....Yes ___ No ___

是否有保險公司註銷、限制或拒絕續保 貴公司之產品責任保險?

If yes, please attach.

若為"是"，請附件說明。

e) Proposed effective date for this insurance : _____

本保險預訂之生效日期：

9. CLAIM HISTORY - 5 years or more

損失紀錄 - 最近五年或更久以前

a) Is there any known or reported loss not yet notified Chubb? Yes ___ No ___

貴公司是否有任何已知之損失尚未通知本公司?

If yes, please proceed the above questions.

若為"是"，請將上述損失通報本公司。

(1) Total aggregate losses, from the ground up, including defense costs :

請依年份列出全部累積損失，包括訴訟費用在內：

Policy Period	No. of Claim	Total Amounts Paid BI(體傷) PD(財損)	Amount in Reserve BI(體傷) PD(財損)	Total Insured	Date Eval.
保險期間	出險次數	全部賠付金額	未結案預估賠款	總額	評估日期

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

(2) Individual losses valued \$5,000.- or more from the ground up, including defense

Insurance Company of North America Taiwan Branch

costs :

請依年份列出美金\$5,000.-以上之索賠案件，包括訴訟費用在內。

<u>Date of Occurrence</u>	<u>Product Involved</u>	<u>Year Mfgd.</u>	<u>Describe Occurrence & Injury or Damage</u>	<u>Amount Paid & Reserve</u>	<u>Date Eval.</u>
事故發生日期	出險產品	製造年度	簡述損失事故	已付及預估賠款	評估日期

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

b) Are you aware of any other incidents which may result in any type of potential claims against you?Yes_____No___

是否知道有任何其他可能牽涉到的損害賠償請求事故?

If yes, give details.

若為"是"，請述說之。

Additional Explanation To The Questions Designated

其餘附加之說明。

I/We declare that the statements and particulars in this proposal are true and that I/We have not misstated or suppressed any material facts. I/We agree that this proposal, together with any other information supplied by me/us shall form the basis of any contract of insurance effected thereon. I/We undertake to inform insurers of any material alteration to these facts whether occurring before or after completion of the contract of insurance.

謹此聲明上列陳述事項及說明均屬事實且對重要事項無不實陳述及隱匿，並同意此要保書及所附文件均構成因此所訂保險契約之一部份，並同意無論在保險契約訂定前後，若重要事項有變更，應通知保險公司。

本人(要保人)已受告知並瞭解所投保商品之重要內容及投保須知等相關事宜。

Insurance Company of North America Taiwan Branch

Date _____
日期 _____ 授權簽署人(Authorized Signature)

■ 以下由保險公司及保險經紀人/代理人填寫：

核保人 簽章		保險經紀/代 理簽署人簽章		保險業務員	
				登錄字號：	簽章：