

聲明書 DECLARATION

本公司所出具之保險內容，符合「境外僱用非我國籍船員許可及管理辦法」規定：

The contents of the insurance issued by the company comply with the provisions of the "Regulations on the Authorization and Management of Overseas Employment of Foreign Crew Members":

- 實支實付型醫療險 (A)：包括住院醫療實支實付 (A1) 及傷害醫療實支實付 (A2)，保額合計不低於新臺幣 30 萬元，給付範圍包括門診及住院，於被保險人因疾病或意外傷害事故住院或門診治療時，依條款約定之範圍項目及給付限額予以給付。

Medical reimbursement insurance (A): Including inpatient medical care reimbursement (A1) and injury medical care reimbursement (A2). The total sum insured shall not be less than NT\$300,000. The scope of insurance benefits includes outpatient and hospitalization. In the event that the insured is hospitalized or in outpatient treatment due to illness or accidental injury, payment shall be made in accordance with the coverage scope and payment limits stipulated in the terms and conditions.

- 一般身故險 (B)：保額不低於新臺幣 150 萬元，在保險期間內被保險人若因疾病或意外傷害事故「死亡」時，依條款約定給付前開保額之身故保險金。

General death insurance (B): The sum insured shall not be less than NT\$1.5 million. In the event of the "death" of the insured due to sickness or accidental injury during the period of insurance, the death benefit of the above sum assured will be paid in accordance with the terms and conditions.

特此聲明

立聲明書人

The undersigned declares hereof.

公司名稱 Compy Name	承保範圍 Coverage	蓋章 Stamp
	(例)A+B (Example)A+B	
	(例)A (Example)A	
	(例)B (Example)B	

中 華 民 國 年 月 日
Date: (Year) (Month) (Day)