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JOURNEYSURE TRAVEL INSURANCE PLAN – CLAIM FORM

「智優遊」旅遊保障計劃-索償表格

Personal Details 個人資料		
Certificate / Policy No.: 保險證明 / 保單號碼		
Policyholder Surname: 投保人姓氏(英文)		
Policyholder Given Name: 投保人名字(英文)		
Insured person's Surname:	(Please skip Insured person's Surname and Given Name if the same as policyholder) (如與投保人相同, 不用填寫受保人姓氏及名字)	
受保人姓氏(英文)		
Insured person's		
Given Name: 受保人名字(英文)		
Contact Tel. No.: 聯絡電話號碼		
Email Address: 電郵地址		_ _
Correspondence Address: 通訊地址		
ZU BI VPC PL	Flat/Room 室 Floor 樓 Block/Tower 座	
	Name of Building/Estate 大廈/屋苑名稱	
	Number and Name of Street (or Village) 門牌號數及街道 (或鄉村) 名稱	
	District地區	
	Hong Kong 香港 Kowloon 九龍 New Territories 新界	

General Information 一般事	項																	
Period of Insured Journey 受保 From 由:		期 ((DI	D/MM	I/YYY	Y))						Т	o 至	:					
Any pursuing claims against and 有否就是次事件 / 損失向其他					y for t	this i	incide	ent /	loss?	•				YE: 是			NO 否	
If Yes, please state: 有·請列印	月																	
Name of Insurance Company 保險公司名稱																<u></u>		
				<u></u>											<u></u>			
Policy No. : 保單號碼				1							1			1		<u> </u>	<u> </u>	

Type of Claim and Required Documentation 索償項目及所需文件

Please ② and complete the relevant sections, submit the required document(s) with this form to Dah Sing Insurance. Dah Sing Insurance's Claims representative <u>may ask for additional document(s)</u> if necessary. 請 以及填妥相關部份·並連同所需之文件及此表格一併遞交至大新保險。如有需要·大新保險賠償部代表<u>可能會要求提供額外文件</u>。

Type of Claim 索償類別	Section 章節	Required Document(s) Checklist 所需文件清單
All types of claim 所有索償類別	1-7	Itinerary, boarding pass or travel ticket etc. that proves the date of departure and return 行程表、登機證、旅遊票據等證明出發及回程日期
Personal Accident Cover		Medical report 醫療報告
(incl. Accidental Death) 個人意外保障 (包括意外死亡)	1	Police report (if applicable) 警方報告 (如適用)
Medical Expenses Cover		Medical report 醫療報告
醫療費用保障	1	Medical expense receipt(s) & all relevant receipts 醫療費用收據及所有相關的收據
Compassionate Death Cash Benefit	1	Death certificate 死亡證
身故恩恤金	1	Police report (if applicable) 警方報告 (如適用)
		Medical report 醫療報告
Credit Card Protection	1	Death certificate 死亡證
信用卡保障	1	Police report (if applicable) 警方報告 (如適用)
		Credit card statement 信用卡月結單
		Receipt(s) or photo(s) of the lost or damaged item 遺失或損毀物件的收據或相片
		Repair quotation that states the cause of damage or confirmation of irreparable damage 寫明損壞原因或確認無法修復的維修報價單
Personal Belongings Cover 個人財物保障	2	Supporting document(s) and acknowledgement from operator of transportation for item damaged or lost in transit (if applicable) 物件在運送途中遺失或損毀而通知交通工具機構的證明文件及其發出的確認書 (如適用)
		Report(s) from Police, hotel or public authority (if applicable) 警方、酒店或公共機構報告 (如適用)
		Receipt(s) of transportation and/or accommodation expense (if applicable) 交通及 / 或住宿費用收據 (如適用)
Loss of Home Contents Cover	2	Receipt(s) or photo(s) of the lost or damaged item 遺失或損毀物件的收據或相片
家居物品保障		Police report 警方報告

Type of Claim and Required Documentation (cont.) 索償項目及所需文件(續)

Type of Claim 索償類別	Section 章節	Required Document(s) Checklist 所需文件清單
		Supporting document(s) from operator of transportation that prove the duration and reason of delay 交通工具機構簽發的證明文件證明延誤期間及原因
Travel Delay / Baggage Delay / Cruise Interruption Cover 行程延誤 / 行李延誤 /	3	Receipt(s) for group tour fees, transportation, accommodation and/or admission fees of overseas sport, musical or other performance events, clothing or toiletries (if applicable) 團體社行費、交通、住宿及 / 或海外運動、音樂會或其他表演入場費、衣物或梳洗用品的收據 (如適用)
中斷郵輪旅程保障		Supporting document(s) from travel agent, operator, hotel, airline, transportation operator or relevant organization proofing the refund or non-refundable amount (if applicable) 由旅行代理商、營運商、酒店、航空公司、交通工具機構或相關機構簽發的證明文件證明可退回或不可退回之金額 (如適用)
Trip Cancellation /		Receipt(s), bills or coupons for group tour fees, transportation, accommodation and/or admission fees of overseas sport, musical or other performance events 團體社行費、交通、住宿及 / 或海外運動、音樂會或其他表演入場費的收據、帳單或聯票正本
Trip Curtailment Cover 取消行程 / 縮短行程保障	4	Supporting document(s) from travel agent, operator, hotel, airline, transportation operator or relevant organization proofing the refund or non-refundable amount, and the non-attendance of such arrangement 由旅行代理商、營運商、酒店、航空公司、交通工具機構或相關機構簽發的證明文件證明可退回或不可退回之金額、及其缺席證明
		Medical report (if applicable) 醫療報告 (如適用)
Personal Liability Cover 個人責任保障	5	All associated documentation received 所有相關文件
		Receipt(s) from licensed rental agency 持牌汽車租貸公司的收據
Rental Vehicle Excess Cover 租車自負額保障	6	Rental agreement which shows the excess or deductible and the terms and conditions of the comprehensive motor insurance 註明租車自負額及汽車全保的條款及其保障範圍的租貸合約
		Claim report from rental agency 汽車租貸公司的理賠報告
Golfer "Hole-in-One" Cover	7	Signed score card or certificate by recognised golf course 由認可高爾夫球場簽發的成績記錄卡或證書
高爾夫球「一桿入洞」保障	,	Receipt for the cost of hospitality in any recognized golf course in the world 認可的高爾夫球場內的餐飲花費費用之單據

Section 1																					
Personal Accident Cover (incl. A	Accider	lental Death) / 個人意外保障 (包括意外死亡) / 醫療費用保障 /																			
Medical Expenses Cover /								/													
Compassionate Death Cash Be	nefit /				身故恩																
Credit Card Protection				fi	言用+	₹保障	章														
Claim Amount: 索償金額							患	病 /	Sickı 受傷 M/YY	日期		ıry									
Place of Sickness /Injury 患病 / 受傷地點	Щ				<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>	1	<u> </u>		<u> </u>		
				<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>		<u> </u>	<u> </u>			<u> </u>				
Diagnosis of Sickness / Nature of Injury:																					
所患疾病 / 受傷性質	Ш																				
When did the Sickness or Symptom first appear 首次出現疾病或病徵的日期 (DD/MM/YYYY)																					
How did you or the insured person get injured? 你或受保人如何受傷?																					
Overseas Hospitalisation / Compulsory Quarantine? 有否住院 / 強制隔離 ?				Y€								NO 否									
Date of Hospital Admission / Compulsory Quarantine (if applicable): 入院/強制隔離日期 (如適用) (DD/MM/YYYY)							Co (if 出	mpu appl 院 /	icable	Qua e): 隔離	ranti		Discha 月(如刻								
Time of Hospital Admission / Compulsory Quarantine (if applicable): 入院/強制隔離時間 (如適用) (HH:MM)			:				Co (if 出	mpu appl	icable 強制[Qua e):	ranti		Discha 引 (如注				:	:			
Required follow-up treatment in Hong Kong? 需要於香港覆診?					ES 是							NO 否									

Section 2					
Personal Belongings /	個人財物,				
Loss of Home Contents Co	ver 家居物品仍	元]			
Claim Amount: 索償金額		Date of L 損失 / 損 (DD/MM			
Place of Loss / Damage: 損失 / 損毀地點					
How did the loss / damage occur? 該損失 / 損毀如何發生?					
Nature of Claim 索償性質	Loss / Damaged Item(s) 遺失 / 損毀項目	Model No. 型號	Date of Purchase 購買日期 (DD/MM/YYYY)	Purchase Price 購入價	Repair / Replacement costs 維修 / 更換費用
Repair Replace 維修 置換 Repair Replace 維修 置換 Repair Replace 維修 置換					
Repair Replace 維修 置換 Repair Replace 維修 置換 Repair Replace					
維修 置換 Repair Replace 維修 置換					
	, hotel, operator of transporta 店、交通工具機構或公共機		ity?	Yes 有	No 沒有
Date of Report: 報案日期 (DD/MM/YYYY)			Time of Report: 報案時間 (HH:MM)	:	
Place of Report: 報案地點					
Reference No. of the Report: 報案編號					

Section 3

Travel Delay / Baggage Delay / Cruise Interruption Cover 行程延誤 / 行李延誤 / 中斷郵輪旅程保障

Claim Item(s) 索償項目		l Delay Cover _丁 程延誤	(Additio	nal T	erruption Cover ransport Expen 保障 (額外交為	se)
Flight no. and/or Tour Ref. no. 航班編號及 / 或行程編號						
Scheduled Date of Departure / Arrival 計劃離境 / 抵達日期 (DD/MM/YYYY)						
Scheduled Time of Departure / Arrival 計劃離境 / 抵達時間 (HH:MM)	:			:		
Actual Date of Departure / Arrival 實際離境 / 抵達日期 (DD/MM/YYYY)						
Actual Time of Departure / Arrival 實際離境 / 抵達時間 (HH:MM)	:			:		
Reason for Delay / Missed Departure 延誤 / 啟程誤點原因						
If "Others", please state 若"其他",請說明						
Additional Accommodation / Transportation Expense 額外住宿 / 交通費用						
Forfeited Travel Expenses 不能退回之旅遊費用				7	N/A 不適用	

Claim Item(s) 索償項目	Baggage Delay Cover 行李延誤	Cruise Interruption Cover (Excursion Tour Cancellation) 中斷郵輪旅程保障 (取消岸上觀光)
Flight no. and/or Tour Ref. no. 航班編號及 / 或行程編號		
Scheduled Date of Baggage Arrival 計劃行李抵達日期 (DD/MM/YYYY)		
Scheduled Time Baggage Arrival 計劃行李抵達時間 (HH:MM)	:	N/A
Actual Date of Baggage Arrival 實際行李抵達日期 (DD/MM/YYYY)		不適用
Actual Time of Baggage Arrival 實際行李抵達時間 (HH:MM)	:	
Reason for Delay / Excursion Tour Cancellation 延誤 / 取消岸上觀光原因	N/A 不溶用	
If "Others", please state 若" 其他",請說明	不適用	
Claim Amount 索償金額		

Section 4

Trip Cancellation / 取消行程 /
Trip Curtailment Cover 縮短行程保障

Claim Item(s) 索償項目	Trip Cancellation Cover 取消行程保障	Trip Curtailment Cover 行程縮短保障
Date of Travel Arrangement Made 訂妥行程日期 (DD/MM/YYYY)		
Original Date of Departure / Return 原定離境 / 回程 日期 (DD/MM/YYYY)		
Actual Date of Return 實際回程日期 (DD/MM/YYYY)	N/A 不適用	
Reason for Trip Cancellation / Curtailment 取消行程 / 行程縮短原因		
If "Others", please state 若" 其他",請說明		
Unused/Additional Accommodation/Transportation 未使用/ 額外住宿/ 交通費用		
Forfeited Travel Expenses 不能退回之旅遊費用		

Personal Liability Cover Please furnish us with all do		人責任		alatin	og to	tha t	hird ı	aarty	claim	n and	DO I	NOT :	mako	anv	offer	orn	romis	o or	admi
any liability to the third par 請將由第三者發出的所有家	<u>ty</u> .															OI P	TOTTIS	ie oi	aum
Claim Amount: 索償金額						-	Date d 事故章 DD/N	ğ生E		:									
Place of Incident: 事故發生地點																			
争以贫土地和																			
How did the loss / damage occur? 該損失 / 損毀如何發生?																			
Name of the Third Party: 第三者的姓名																			
为																			
Contact Detail of the Third Party: 第三者的聯絡資料																			

Section 6 Rental Vehicle Excess Cover	r	租車	車自負	負額(保障																			
Claim Amount: 索償金額								_			_	_	_	_	_	_	_		_	_			_	
Date of Incident: 事故發生日期 (DD/MM/YYYY)									Time 事故				H:M	M)				:						
Place of Incident: 事故發生地點																			<u></u>					
		<u></u>	<u> </u>	<u> </u>	<u></u>	<u></u>	<u>_</u>			<u>_</u>			<u></u>	<u> </u>					<u></u>		<u>_</u>	<u>_</u>		
How did the loss/damage occur 該損失 / 損毀如何發生 ?	?																							
Section 7 Golfer "Hole-in-One" Cover	,	高爾	爾夫取	; Г-	一桿ノ	入洞」	保障	章																
Claim Amount: 索償金額																								
Date of Achievement: 獲取成就日期 (DD/MM/YYY)) <u> </u>								Date 慶祝	e of C 記日期				YY)										
Place of Hospitality: 接待地點	L	<u></u>																	<u></u>					
		<u>_</u>					<u></u>	<u>_</u>		<u> </u>									<u></u>				<u>_</u>	
Claim Settlement Method		賞方																				61		
If the direct credit is rejecte this claim form instead with 如自動轉帳被拒絕或不成功	out f	furth	ner no	tice.																nce /	Addre	ess †∏	led	n on
By Direct Credit (Clai 自動轉帳(僅限於家								元))															
Bank Name 銀行名稱																			<u> </u>					
			<u> </u>												1				<u></u>					
Account Holder Name 戶口持有人姓名 (英文)		<u> </u>					<u></u>												<u></u>					
							<u>L</u>												<u></u>					
Account Number 銀行戶口號碼			Code 編號				anch 分行																	
(Note: The Account Holder must be	the at	hove-	mentic	ned l	nsured	l Persor		戶	nt Nui 口號码	碼		- 沭長	3保人	١										
*If Insured Person is below Age 18,															18歳,	,以上	資料需	鲁由	其父 f	母或監	護人士	真寫.		
By Cheque (10 – 14 v 支票(於賠償審批5									3 chec	que a	fter	claiı	m se	ttlen	nent	арр	rova	lis	com	plete	ed)			

Personal Information Collection Statement ("PICS") 個人資料收集聲明

- 1. Purpose: Your personal data are collected by Dah Sing Insurance Company Limited ("Company") for the purpose of: **目的:** 大新保險有限公司(以下簡稱「本公司」)為以下目的收集閣下之個人資料:
- (i) processing, administering, implementing and effecting the requests indicated in this document or any documents that you may submit to the Company from time to time; 處理、管理、落實及實行閣下提交予本公司的本文件或不時提交的任何其他文件中所表明的申請;
- (ii) providing all services related to this document (and the relevant insurance policy), including (but without limitation) promoting and improving such services or related services provided by the Company or its subsidiaries and affiliates; 提供與本文件(和有關保單)相關的一切服務.包括(但不限於)推廣及改善本公司或其子公司及關聯公司提供的有關本次申請的服務或相關服務;
- (iii) communicating with you in relation to administrative purposes; 就行政目的與閣下聯絡;
- (iv) investigating, processing and paying claims made under your insurance policy; 調查、處理及繳付閣下保單的索償申請;
- (v) co-operating with any investigation and meeting any disclosure requirements imposed by any legal, regulatory, governmental, tax, law enforcement or other authorities, or regulatory or industry bodies within or outside the Hong Kong Special Administrative Region ("HKSAR"), or the Personal Information Protection Law of the People's Republic of China ("PIPL") where applicable; 依照在香港特別行政區境內或境外任何法律、監管、政府、稅務、執法或其他機關,或監管機構或行業組織,或《中華人民共和國個人信息保護法》(「個人信息保護法」)的要求,配合調查及作出披露;
- (vi) transferring your personal data to any federation or similar organisation of insurance companies ("Federation") and any members of the Federation to carry out its regulatory functions and/or in the interest of insurance industry or any members;將閣下的個人資料發送給任何保險公司聯會或類似組織(以下簡稱「聯會」)以及聯會的任何成員・以供其履行其監管職能及 / 或為保險行業或聯會的任何成員的合理利益所需的其他職能;
- (vii) statistical or actuarial research; and 統計或精算研究;及
- (viii) other ancillary purposes which are directly related to the purposes set out above. 其他直接與以上目的相關的目的。
- 2. Transfer: Personal data provided by you to the Company will be kept confidential but, subject to your separate consent (insofar as the PIPL is applicable to the Company's process and / or use of your data), it may be transferred to parties mentioned below for the aforementioned purposes:

 **** **轉移:** 閣下提供的個人資料將保密處理,但若個人信息保護法適用於本公司處理和 / 或使用閣下的資料,僅在獲得閣下的單獨同意的情況下,會因以上所述之目的將此等資料轉移給以下各方:
- (i) any related company(ies), including subsidiaries or affiliates of the Company; 本公司的任何成員公司·包括附屬公司及聯屬公司;
- (ii) any other unrelated company engaging in the business of insurance, financial services intermediaries or reinsurance; 任何其他從事保險、金融服務中介團體或再保險相關業務的非本公司成員公司;
- (iii) financial service intermediaries that are authorised by the Company for the distribution of products and services provided by the Company; 獲本公司授權以分銷本公司所提供之產品及服務的金融服務中介團體;
- (iv) claims, investigation or other services provider providing services relevant to your insurance policies;提供與閣下的保單有關的索償、調查或其他服務的提供者;
- (v) relevant industry association and Federation that exist or are formed from time to time; 現有或不時成立的相關行業協會及聯會;
- (vi) any person (including agent, contractor or third-party service provider) who provides administrative, telecommunication, computer, payment, data processing or other services in connection with the operation of the Company's business and provision of products and services to you; 就本公司之營運及向閣下提供之產品及服務而為本公司提供相關的行政、電訊、電腦、付款、數據處理或其他服務的任何人士(包括代理商、承包商或第三方服務提供者);
- (vii) any legal, regulatory, governmental, tax, law enforcement or other authorities, or regulatory or industry bodies within or outside HKSAR; 於香港境內或境外任何法律、監管、政府、稅務、執法或其他機關.或監管機構或行業組織;
- (viii) any third-party in connection with a transfer or a potential transfer of all or part of the business of the Company and some of the transferees may be located within or outside HKSAR; 與本公司業務的轉讓或擬議轉讓有關的任何第三方,當中部分受讓方或位於香港境內或境外;
- (ix) any third party service providers using the Company's Application Programme Interfaces in accordance with your instructions to the Company or third party service providers engaged by you, for the purposes notified to you by the Company or third party service providers and/or as consented by you in accordance with the Personal Data (Privacy) Ordinance ("Ordinance"); and 使用本公司應用程式介面的第三方服務供應商(根據閣下向本公司或閣下使用之第三方服務供應商所發出的指示).以作本公司或第三方服務供應商所通知閣下的用途及/或閣下根據《個人資料(私隱)條例》(「條例」)所同意的用途;及

Personal Information Collection Statement ("PICS") (cont.) 個人資料收集聲明(續)

(x) your insurance agents, intermediaries or referrer. 閣下的保險代理人或中介人或介紹人。
Such information may be transferred to a place outside Hong Kong. Insofar as the PIPL is applicable to the Company's process and/or use of your

personal data, the Company will obtain your separate consent in relation to such international transfers. 該等資料可轉傳至香港以外的地方。若個人信息保護法適用於本公司處理及/或使用閣下的個人資料,本公司將徵求閣下針對該等跨境傳輸活動的單獨同意。

A. Insofar as the PIPL is applicable to the Company's process and / or use of your personal data, the Company will, prior to sharing your personal data with third parties, notify you of the name and contact details of the recipients, the purposes and means of processing and provision of your personal data, and the types of personal data to be provided and shared, and obtain your separate consent to the sharing of your personal data. The foregoing data recipients will use the personal data to the extent necessary for the specific purposes set out in this document and store the personal data for the minimum length of time required to fulfil the purposes, or insofar as the PIPL is applicable to the Company's process and / or use of your personal data, in accordance with the PIPL. 若個人信息保護法適用於本公司處理及 / 或使用閣下的個人資料·本公司將在和第三方共享閣下的個人資料前·告知閣下接收方的姓名和聯繫方式、處理和提供閣下個人資料的目的和方式·以及將要提供和分享個人資料的種類·並徵求的對共享其個人資料的單獨同意。前述的個人資料接收方將僅為實現本文件下規定的具體目的所需的範圍內使用個人資料·並在實現目的所需的最短時間內保存個人資料·或(若個人信息保護法適用於本公司處理及 / 或使用閣下的個人資料)按照個人信息保護法的要求。

B. Some of the data collected by the Company may constitute sensitive personal data under the PIPL. The Company will only process sensitive personal data if strict protection measures are put in place and there is sufficient necessity to justify the processing. Insofar as the PIPL is applicable to the Company's process and / or use of your personal data, such sensitive personal data will be processed with your separate consent. 本公司收集的部分資料可能構成個人信息保護法下的「敏感個人信息」,而只有在採取了嚴格的保護措施且在處理行為具備充分必要性的前提下,本公司才會處理敏感個人信息。若個人信息保護法適用於本公司處理及 / 或使用閣下的個人資料,該等敏感個人信息將在獲得閣下的單獨同意後才進行處理。

3. Access: You have the right to ascertain what type of personal data the Company holds, whether the Company holds your personal data and, if so, the right to request access to and correction of any such personal data. Insofar as the PIPL is applicable to the Company's process and / or use of your personal data, you have the right to request the Company to delete your personal data, and / or to object to certain uses of your personal data, and / or to request an explanation of the rules governing the processing of your personal data, and / or to ask the Company to transfer personal data that you have provided to the Company to a third party of your choice under circumstances as provided under the PIPL, and / or to withdraw any consent for the collection, processing or transfer of your personal data (you should note that withdrawal of your consent may result in the Company being unable to provide you with insurance services), and / or to have decisions arising from the Company's automated decision making ("ADM") processes explained and to refuse to such decisions being made solely by ADM. Such request can be made to the Data Protection Officer of the Company at 2703, 27/F, Island Place Tower, 510 King's Road, North Point, Hong Kong. In accordance with the terms of the Ordinance and (insofar as the PIPL is applicable to the Company's process and / or use of your personal data) as permitted under the PIPL, the Company has the right to charge a reasonable fee for processing a request to access your personal data.

查閱: 閣下有權查明本公司持有個人資料的類別、本公司是否持有閣下的個人資料,如持有,閣下有權要求查閱本公司持有涉及 閣下的個人資料以及對該等資料作出更正。若個人信息保護法適用於本公司處理及/或使用閣下的個人資料,閣下有權要求本公司刪除閣下的個人資料,反對以某種特定方式使用閣下的個人資料,及/或要求對處理閣下個人資料的規則進行解釋說明,及/或滿足個人信息保護法的要求的情況下,要求本公司將閣下向本公司提供的個人資料轉移給閣下選擇的第三方,撤回對收集、處理或轉移閣下個人資料的同意(閣下應注意,閣下撤回閣下的同意可能導致本公司無法向閣下提供保險服務),及/或要求對自動化決策過程中產生的決策進行解釋,以及拒絕接受僅由自動化決策技術作出的決定。閣下可向本公司的資料保障主任提出此等要求,其地址為香港北角英皇道510號港運大廈27樓2703室。根據條例及(若個人信息保護法適用於本公司處理及/或使用閣下的個人資料)個人信息保護法允許的情況下,本公司有權為處理閣下的個人資料查閱要求而收取合理費用。

Amendment to the PICS 個人資料收集聲明的修訂

The Company reserves the right to, at any time with or without notice, amend the PICS publishing such amendments on the website of the Company. However, the Company may (but is not obliged to), in addition to the aforesaid, notify you in writing of such amendment. Should there be any amendment to the PICS, such amendment will become effective with immediate effect. 本公司保留權利可隨時且在無須通知的情況下通過在本公司的網站上發佈修訂本個人資料收集聲明。然而,雖然如上所述,本公司可能(但沒有義務)以書面形式知會閣下相關修訂。任何有關個人資料收集聲明的修訂將在刊登後即時生效。

Declaration & Authorisation 聲明及授權

- 1. I/we hereby declare that the information given above is true and correct to the best of my/our knowledge and believe that all material facts affecting the assessment of this claim have been disclosed.
 - 本人/我們聲明在本表格內所填報的資料均盡本人/我們所知為屬實及正確,並確信已披露所有足以影響評估本索償的重要事項。
- 2. I/we have been duly authorised by the person mentioned in this form to make the following declarations for and on his/her behalf. 本人 / 我們已獲列於本表格上的人士授權代他 / 她作出以下聲明。
- 3. I/we have read the PICS and agreed that all personal information about me/us collected by the Company may be held and disclosed within or outside Hong Kong.
 - 本人/我們已細閱個人資料收集聲明並同意所有 貴公司所收集有關本人/我們的個人資料可在香港或香港以外地區持有及披露。
- 4. I/we understand that providing the personal data requested on this form is mandatory, and failure to provide all the requested data may mean the Company is unable to process my/our claim.
 - 本人 / 我們明白提供本表格上要求的個人資料是必需的·未能提供所需資料可導致 貴公司不能處理本人 / 我們的申請。
- 5. I/we understand that I/we have the right to seek access to and to request correction of any personal information about me/us held by the Company by writing to the Data Privacy Officer of the Company at 2703, 27/F Island Place Tower, 510 King's Road, North Point, Hong Kong.

 本人/我們明白本人/我們有權查閱及更正任何 貴公司持有有關本人/我們的個人資料·並以書面形式通知 貴公司的資料私隱主任(地址為香港北角英皇道510號港運大廈27樓2703室)。
- 6. I/we hereby agree to authorise any regulator or authority as required or permitted by law, police, Fire Services Department, insurance companies, any hospitals, physicians, medical practitioners, or other organizations, institutions or persons, that have any records or knowledge of me/us to disclose such information to The Company or its representative any and all information with respect to the accident and/or my/our loss. I/we also authorise The Company or its representative to utilise such information and the like for the purpose of assessing my/our claim. A photocopy of this authorisation shall have the same legal effect as the original; and;

本人/我們現同意授權任何法定的監督或管理機構、警方、消防處、保險公司、任何醫院、醫療專業人士、內外科醫生、或其他組織、機構或人士、凡知道或持有任何本人/我們之紀錄者. 向 貴公司或其代表提供任何一切本人/我們於上述意外及/或本人/我們於上述損失有關的資料記錄。本人/我們亦授權 貴公司或其代表可就本人/我們索償的事宜而處理上述資料。本授權書的副本跟正本具有同等法律效力;及

7. I/we understand the issuance or completion of this Claim Form does not constitute admission of liability or guarantee payment of the claim on behalf of The Company.

本人/我們明白此索償表之發出及填寫並不代表 貴公司確認責任或保證賠償。

In the event of any discrepancy between the Chinese and English versions, the English version shall prevail.

如中文版與英文版之間有任何差異,一概以英文版為準。

Insured Name 受保人姓名(英文)													
HKID Card No. 香港身份證號碼		<u> </u>		<u> </u>	<u> </u>		()					
Date (DD/MM/YYYY) 日期 (日/月/年)													
*No signature is needed on this clai	m fori	m.											

^{*}此索償表格無需簽署.