

Property Damage And/ Or Business Interruption Claim Form – Including Home, Shop and Office Protector

財產 / 營業受阻保險索償申請表 – 包括家居、店舖及辦公室綜合保險

THE CLAIMANT IS REQUESTED TO NOTE 注意事項:

- (a) Before submitting details of loss or damage, the Claimant is requested to read the conditions of the policy.
申索人填寫此肇事報告書前請先細閱保單條款。
- (b) This form must be completed and delivered to the Company within 7 days from the date of the accident.
申索人請於收到此報告書七天內填寫並交回敝公司辦理。
- (c) The Claimant must promptly take all practicable steps including reporting to the Police immediately for discovering and prosecuting any guilty party or parties, if any, and for tracing and recovering the lost property.
申索人應盡快及配合敝公司一切方法，包括向警方提供一切所需資料，以便處理向第三者追討損失之事宜。
- (d) If any false statement or declaration be made in support of a claim, the policy would be rendered void. Therefore, care should be exercised in completing this form.
請保戶仔細填寫此報告書，如發申報資料有任何虛報、失實，保單將會被取消。
- (e) Particulars of the claim should be provided as detailed as possible. Any suspicious act by any party should be communicated to the Company immediately.
保戶如對此報告書或保單上任何資料有疑問，請與敝公司聯絡。

1. Insured's Name 保戶名稱 Policy Number 保單編號.....
(Please state whether Mr., Mrs. Or Miss 請註先生/ 太太/ 女士.)

2. Address 地址.....

3. Occupation 職業/業務 Tel. No 電話(Home 住宅)..... (Office 辦公室)

4. Date of loss or Damage occurred 事發日期..... Time 時間..... Place 地點.....

5. Date of loss or Damage discovered 發現損失/損毀日期.....

6. Police Station to which loss was reported 報案地點..... Date 日期.....
and the report case No. 及報案號碼.....

7. Please state briefly to the best of your knowledge and belief how the loss or damage occurred 請簡述意外詳情:
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8. Any suspected person that may have caused this accident?
依閣下所見，此事有否對任何人有所懷疑，如有，請詳述。
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9. Are you the sole owner of the property lost or damaged? 受損財物是否屬於閣下個人擁有?.....

10. Is the property in respect of which you are making a claim also insured with other Insurer regardless as to whether it is insured against all or part of the risk covered by the above Policy? If so, please give particulars. 閣下申索損失之財物，有否同時向其他保險公司投保? 如有，請詳述其保險公司名稱及保單編號。
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11. Have you ever made a claim to any Insurer in respect of the properties and/ or any of the items covered by the above Policy?

If so, please give particulars: 閣下申索損失之財物，有否同時向其他保險公司申請索償? 如有，請詳述。

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12. Please state the total amount claimed as set out in detail overleaf 請使用附頁詳列申索銀碼

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DECLARATION

I believe that the facts stated in this Property Damage and Business Interruption Claim Form are true and the opinion expressed in it is honestly held.

聲明

本人相信本財產/營業受阻保險索償申請表所述事實屬實，而其中所表達的意見屬真誠地持有的。

SIGNATURE OF INSURED 保戶簽署 *DATE* 日期
(with company chop if applicable)
(若以公司名義投保，請附加公司蓋印)

SIGNATURE OF CLAIMANT 申索人簽署 *DATE* 日期

STATEMENT OF CLAIM 申索摘錄

- Receipts showing date, price and place of purchase of the articles set out below should accompany this form wherever possible.**
 為方便審核，每項損壞或損毀物件之申索務必附上購買收據。
- In the case of damage, an estimate of repair should be submitted. If the article is not repairable, a letter from Repairers to that effect should be sent. All salvage must be retained.**
 如受損物件需要進行維修，請附上維修報價單；如受損物件損毀嚴重並需更換，請提交維修商所發出之更換證明書。請注意，所有需要更換之損毀物件獲賠償後必需交回本公司。

Full Description of Lost or Damaged Articles 請詳述是次意外之損失/ 及損壞物件資料	Name, Address and Contact number of Party from whom Article purchased or by whom presented 受損物件之擁有人及其聯絡地址及電話	Date of purchase or presentation as far as is known. 受損物件購買日期	Price paid as far as is known. 受損物件之面值	Sum claimed for Present Value or Damage. 因是次意外損失之 索償銀碼	Remarks Regarding Loss 有關是次意外損失附註

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

Liberty International Insurance Limited (referred to hereinafter as the "Company") recognizes its responsibilities in relation to the collection, holding, processing, use and/or transfer of personal data under the Personal Data (Privacy) Ordinance (Cap. 486) (the "Ordinance").

Purpose

The personal data of customers (including but not limited to policy owners, insureds and beneficiaries) collected or held by the Company may be used, stored, processed, transferred or disclosed or shared for the following obligatory purposes :-

1. Processing and determining insurance applications, insurance claims and providing ongoing insurance services;
2. Processing requests for payment and for direct debit authorization;
3. Managing, investigating and analyzing any claim, action and/or proceedings brought against the customers, and to exercise the Company's rights as more particularly defined in applicable policy wording, including but not limited to subrogation rights;
4. Compiling statistics or using for accounting purposes;
5. Conducting research, insurance surveys and analysis for the purpose of product design and development;
6. Meeting disclosure requirements of any local or foreign law, regulations, codes or guidelines binding on the Company, its parent and affiliated companies ("Liberty Mutual Group of Companies")
7. Complying with the legitimate requests or orders of the courts of Hong Kong Special Administrative Region and regulators including but not limited to the Insurance Authority, Hong Kong Federation of Insurers, auditors, governmental bodies and governmental-related establishments binding the Liberty Mutual Group of Companies;
8. Enabling an actual or proposed assignee of the Company to evaluate the transaction intended to be the subject of the assignment;
9. Conducting identity and/or credit checks and/or debt collection;
10. Conducting medical or health reference checks for relevant insurance products; and
11. Facilitating the Company's authorized service providers to provide services to the Company and/or customers for the above purposes

Please note that if you do not provide us with your personal data, we may not be able to issue your policy, process claims or provide insurance products or services to you or process your request.

Direct Marketing

Certain personal data of customers collected or held by the Company, in particular, names and contact information such as telephone number, email address and postal address may be used by the Company and/or the Liberty Mutual Group of Companies to provide marketing materials and conduct direct marketing activities (including but not limited to promoting, marketing or selling of the Company, Liberty Mutual Group of Companies or co-branded insurance or financial or investment related products or services by electronic or other means) in relation to insurance and/or financial products and services of the Company, the Liberty Mutual Group of Companies and/or other financial services providers. Please tick the box at the bottom of this PICS if you do not consent to receive such marketing communications.

In the absence of any "opt-out" request from the customer, the Company shall treat the application and continuation of his/her policy(ies) held with the Company as an indication of no objection to the Company's use of such personal data for this voluntary marketing purpose.

Transfer of personal data

Your personal data held by the Company will be kept confidential but may be shared with the following parties, within or outside of Hong Kong :-

1. Any Liberty Mutual Group of Companies, or any other company carrying on insurance or reinsurance related business, or an intermediary;
2. Any agent, contractor, banker or third party service provider who provides administrative, telecommunications, computer, payment, banking or other services to the Company in connection with the operation of its business;
3. Third party service providers including legal advisors, investigators, loss adjusters, reinsurers, medical and rehabilitation consultants, emergency assistance companies, medical doctor panel groups, medical advisory consultants, surveyors, specialists, repairers, accountants and data processors;
4. Credit reference agencies, and in the event of default, any debt collection agencies or companies carrying on claim or investigation services;
5. Any person to whom the Company is under an obligation to make disclosure under the requirements of any law binding on the Company or any of its associated companies for the purposes of any regulations, codes or guidelines issued by governmental, regulatory or other authorities with which the Company or any of its associated companies are expected to comply;
6. Any person pursuant to any order of a court of competent jurisdiction;
7. Any actual or proposed assignee of the Liberty Mutual Group of Companies or transferee of the Liberty Mutual Group of Companies' rights in respect of the policy owners;
8. Companies within the Liberty Mutual Group of Companies;
9. Providers of risk intelligence for the purpose of customer due diligence or anti-money laundering screening;
10. Other banking/financial institutions, commercial or charitable organizations with whom the Company maintains business referral or other arrangements for marketing communication if "no objection" is provided; and
11. Third party marketing service providers and insurance intermediaries for marketing communication if "no objection" is provided.

Access and correction of personal data

According to the Ordinance, all policyholders have the right to of access to, correct and/or change any of their own personal data held by the Company by contacting the Company's Personal Data Privacy Officer at:

Liberty International Insurance Limited, Suites 2601-04 & 2613-16, 26/F, 1111 King's Road, Taikoo Shing, Hong Kong

In accordance with the Ordinance, a reasonable fee may be charged by the Company for the processing of any data access request.

Please tick here if you do not consent to receive marketing communications.

利寶國際保險有限公司（以下簡稱『本公司』）根據『個人資料（私隱）條例』（香港法例第486章）（以下簡稱『條例』）就收集、持有、處理、使用和/或轉移個人資料承擔有關責任。

目的

本公司所收集或持有的客戶個人資料（包括但不限於保單持有人，受保人及受益人），可能會使用、存儲、處理、轉移、或披露或分享致以下各強制性的目的：-

1. 處理和確定保險申請書、理賠，及持續提供保險服務；
2. 處理付款事宜和直接付款授權書；
3. 管理、調查和分析任何索償事宜、訴訟和/或針對客戶的訴訟，以及行使本公司根據保險條款賦予的權利，包括但不限於代位權；
4. 從事統計資料或用於會計事務；
5. 從事研究、保險調查及開發產品和設計之分析；
6. 履行任何對本公司、母公司和附屬公司（『利寶互助保險集團公司』）具有約束力的本地或海外法律、法規、守則或指引之披露要求；
7. 遵守香港特別行政區的法院命令和包括但不限於保監處，香港保險業聯會，核數師，政府機構和政府成立之相關監管機構對利寶互助保險集團公司具有約束力的合法要求；
8. 協助本公司的實質或建議受讓人評估有關之轉讓交易；
9. 從事核實身份和/或信貸審查和/或追收債務；及
10. 為相關保險產品進行具參考用途之醫療或健康調查；
11. 協助本公司所授權之服務供應商向本公司和/或客戶提供上述目的之服務；

如閣下不向我們提供個人資料，我們未必能夠簽訂保單、處理索償、提供保險產品、服務或處理您的要求。

直接營銷

本公司所收集或持有的客戶個人資料，特別是姓名和聯繫資料，如電話號碼、電子郵件地址和郵政地址，可能會用以提供本公司和/或利寶互助保險集團的公司的營銷材料，並進行有關本公司、利寶互助保險集團公司的保險及/或金融產品及服務和/或其他金融服務供應商的直接營銷活動（包括但不限於通過電子或其他手段促銷，推廣或銷售本公司、利寶互助保險集團公司或聯營公司有關保險或財務或投資產品或服務）。如果你不同意接收有關直銷通訊，請於本個人資料收集聲明下方標上號。

如保客戶沒有“選擇退出”的要求，其保險申請書及於本公司持有之保單持續生效將被視為不反對本公司將其個人資料使用於此自願性的營銷目的。

個人資料之轉移

本公司所持有的個人資料將予以保密，但可能會與以下香港境內或境外人士分享：-

1. 任何利寶互助保險集團公司，或任何其他從事與保險或再保險業務有關的公司，或中介人；
2. 任何為本公司業務操作提供行政，電訊、電腦、付款、銀行或其他服務的代理人、承包商、銀行或第三方服務供應商；
3. 第三方服務供應商包括法律顧問、調查員、公証行、再保險公司、醫療和康復顧問、緊急救援公司、網絡醫生集團、醫療意見顧問、測量師、專家、維修人員、會計師和數據處理員；
4. 信貸資料服務機構，在違約情況下，任何債務追收機構或辦理索償理賠或調查服務公司；
5. 本公司或任何聯營公司在遵守由政府，監管機構或其他當權者推行的法規、守則或指引及履行法律責任時需要向其披露之任何人士；
6. 根據有司法管轄權的法院命令受權之任何人士；
7. 利寶互助保險集團公司的實質或建議受讓人或利寶互助保險集團公司與保單持有人相關權利的承讓人；
8. 利寶互助保險集團公司旗下的公司；
9. 為客戶盡職調查或打擊清洗黑錢的篩選之風險智能供應商；
10. 如保客戶沒有“選擇退出”的要求，與本公司保持業務轉介或其他安排上之其他銀行/金融機構、商業或慈善組織作為直銷通訊用途；及
11. 第三方營銷服務供應商和保險中介機構作為直銷通訊用途。

查閱及更正個人資料

根據條例的規定，所有保單持有人可聯絡本公司之個人資料私隱主任查閱、更正和/或更改自己的個人資料：

利寶國際保險有限公司，香港太古城英皇道1111號26樓2601-04及13-16室

根據條例的規定，本公司在處理個人資料查閱申請時可向客戶收取合理的費用。

如你不同意接收有關直銷通訊，請標上號

中文版本只供參考，一切以英文版本為準

Insured's Signature保戶簽署:

(with company chop if applicable)

(若以公司名義投保，請附加公司蓋印) _____

Date 日期:

_____/_____/_____
D日 M月 Y年

Claimant's Signature申索人簽署:

Date 日期:

_____/_____/_____
D日 M月 Y年