Property insurance claim form

財產保險索償申請表



Policy no. 保單號碼	:		
Name of Insured 保戶姓名	:		
Address 地址	:		
Occupation 職業/Business 經營業務	:		
Tel. no. 電話號碼		(Office 公司)	(Residence 住宅)
Fax no. 傳真號碼	:		
E-mail address 電郵地址	:		
Circumstar	nces of incident and los	s / damage 遇事及損失/	損壞情況
Date 日期		Time 時間	
Place 地點		 Witness 證人	
Description of incident 過程描述			
Details of Damage / Loss tH掉/tH/干菜/丰			
Details of Damage / Loss 損壞/損失詳情			
Was the property insured elsewhere at the			1. /□ V∆
e.g. under an All Risks, Baggage, Motor, G NO 否		險,	· C C C C C C C C C C C C C C C C C C C
The Hall have give detail			
Does any other party have interest in the 押、信托等?	property such as Owner, Mortg	agee, Trustee or otherwise?有否	第三者對該物品有權益例如合夥、抵
邢、信代寺(NO 否 □ YES 是 □ Please give deta	ails 請詳述		
_			
Has anyone reported this accident to the P	olice? 曾否有人向警方報告此为	Z意外事件? NO 否 □ YES ;	
Date 日期		Time 時間	
		Police Report No. 警方	
Name of informant 報案人姓名			
*Please attach a copy of the police stat	tement/ loss memo. 請附上口(共紙/報失紙副本	
	or theft or burglary onl		
Who discovered the case? 由誰發現?	, and to burging y	Time I	工 <u>工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工</u>
How did the culprit(s) entry to the premise	c? 匪 往 加 何 淮 讠 該 槵 宁 ?	Title	·····································
riow did the calpht(s) entry to the premise	3: 医促如内廷八政佞丁:		
Is there any sign of forcible entry or exit at	the promises? 具不有任何改会	# 1	
NO 否 □ YES 是 □ Please give deta		些八以必正欲慢于心恨 奶	
NO 名	1115 胡計池		
Were the premises unoccupied at the time			
NO 否 □ YES 是 □ Since when? 從	- ·	上时該懐于定省空直!	
Have you sustained a similar loss before?			
NO 否	IIIS 胡타地 		
D	. フ用エナアはシマイト・1 1 ユ 1 ^ム	72 April 19. Japon 12	
Do you suspect any person(s)? If so, whom	! 閣卜有否懷疑任何人士或人等	:! 如是者, 懷疑誰人?	

DECLARATION:

I/We declare that, to the best of my/our knowledge the statements made above are true.

聲明:

本人/吾等在此聲明,本人/吾等已盡一切能力保證上述各節均屬實情。

I/We understand and agree the following issues about the arrangement of my/our personal information collected or held by Zurich Insurance Company Ltd.

本人/吾等明白並同意以下有關 Zurich Insurance Company Ltd (「本公司」) 處理所收集及保存本人/吾等之個人資料的安排。

1. The personal information of customers (include policy owners, insured persons, beneficiaries, premium payors, trustees, policy assignees and claimants) collected or held by **Zurich Insurance Company Ltd** ("**Company**") may be used by the Company for the following **obligatory purposes** necessary in providing services to the customers (otherwise the Company is unable to provide services to customers who fail to provide the required information):

由 Zurich Insurance Company Ltd(「本公司」)收集或持有的客戶(包括保單持有人、受保人、受益人、保費付款人、信託人、保單受讓人及索償人)個人資料,均可供本公司使用作以下**強制性用途**,以便爲客戶提供服務(否則本公司將無法爲未能提供所需資料的客戶提供服務):

- (1) to process, investigate (and assist others to investigate) and determine insurance applications, insurance claims and provide ongoing insurance services;
 - 辦理,調查(及協助他人調查)和決定保險申請、保險索償及提供持續的保險服務;
- (2) to process requests for payment, and for direct debit authorization; 辦理付款要求及直接付款授權;
- (3) to manage 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 the subrogation right; 處理任何對客戶的索償、訴訟及/或司法程序;以及行使本公司的權利(詳情見適用保單條款所定),包括但不限於代位權;
- (4) to compile statistics or use for accounting and actuarial purposes;編撰統計數字,或作會計及精算用涂;
- to meet the disclosure requirements of any local or foreign law, regulations, codes or guidelines binding on the Company and/or its group ("Zurich Insurance Group") and conduct matching procedures where necessary; 符合對本公司及/或其所屬集團(「蘇黎世保險集團」)具約束力的任何本地或外國法例、規則、守則或指引的披露規定及如需要時進行核對程序;
- (6) to comply with the legitimate requests or orders of the courts of Hong Kong and regulators including but not limited to the Insurance Authority, Hong Kong Federation of Insurers, auditors, governmental bodies and government-related establishments;
 - 遵循香港法院及監管機構作出的合法要求或指令,包括但不限於保險業監理處、香港保險業聯會、核數師、政府組織和 政府相關機構;
- (7) to collect debts;
 - 債務追討;
- (8) to facilitate the Company's authorized service providers to provide services to the Company and/or the customers for the above purposes; and
 - 便利本公司的認可服務供應商,就上述目的爲本公司及/或客戶提供服務;及
- (9) to enable an actual or proposed assignee of the Company to evaluate the transaction intended to be the subject of the assignment.
 - 使本公司的實際或建議承讓人能夠評核擬進行涉及有關轉讓的交易。
- 2. The Company may provide <u>any</u> personal information of customers to the following parties, within or outside of Hong Kong, for the **obligatory purposes:**-

本公司可就**強制性用途**,向以下於香港境內或境外的人士提供任何客戶個人資料:

- (1) companies within the Zurich Insurance Group, or any other company carrying on insurance or reinsurance related business, or an intermediary;
 - 蘇黎世保險集團成員公司,或任何進行保險或再保險相關業務的其他公司或中介人;
- (2) any agent, contractor or third party service provider who provides administrative, telecommunications, computer, payment or other services to the Zurich Insurance Group in connection with the operation of its business; 任何向蘇黎世保險集團提供行政、電訊、電腦、付款或其他與其業務運作有關的服務的代理人、承包商或第三方服務供應商;
- (3) third party service providers including legal advisors, accountants, investigators, loss adjusters, reinsurers, medical and rehabilitation consultants, surveyors, specialists, repairers, and data processors; 第三方服務供應商,包括法律顧問、會計師、調查員、理賠師、再保公司、醫護及復康顧問、考察員、專家、維修人員、及資料處理者;
- (4) credit reference agencies, and, in the event of default, any debt collection agencies or companies carrying on claim or investigation services;
 - 信貸諮詢機構、而在客戶欠賬時,任何債務追收代理或進行索償或調查服務的公司;

(5) any person to whom the Zurich Insurance Group is under an obligation to make disclosure under the requirements of any law binding on the Zurich Insurance Group or any of its associated companies and for the purposes of any regulations, codes or guidelines issued by governmental, regulatory or other authorities with which the Zurich Insurance Group or any of its associated companies are expected to comply; 根據對蘇黎世保險集團或其任何關連機構具約束力的任何法例,及就任何由政府、監管或其他機關所頒佈且蘇黎世保險

集團或其任何關連機構預期須遵守的任何規例、守則或指引而言,蘇黎世保險集團有責任向其作出披露的任何人士;

- any person pursuant to any order of a court of competent jurisdiction; and 根據主管司法權區的法院的任何頒令的任何人士;及
- any actual or proposed assignee of the Zurich Insurance Group or transferee of the Zurich Insurance Group's rights in respect of the policy owners:

蘇黎世保險集團的任何實際或建議承讓人或蘇黎世保險集團對保單持有人的權利的受讓人。

3. All customers have the right to access to, correct, or change any of their own personal information held by the Company by request in writing to the Company's Personal Data Privacy Officer at the address below.

所有客戶均有權以書面向本公司之個人資料私隱主任(地址如下)要求查閱、修正及/或更改由本公司所持有有關其本身的任何個人資料。

Personal Data Privacy Officer 26/F, One Island East 18 Westlands Road Island East Hong Kong 個人資料私隱主任 香港港島東華蘭路 18 號 港島東中心 26 樓

- 4. In accordance with the Ordinance, the Company has the right to charge a reasonable fee for processing any data access request. 根據私隱條例,本公司有權收取合理費用,藉以處理任何資料的查閱要求。
- 5. In the event of any discrepancy or inconsistencies between the English and Chinese versions of this notice, the English version shall prevail.

本通知的中英文版本如有任何歧異或不一致,概以英文版爲準。

Signature of Policy Holder 保單持有人簽署	Signature of Insured Person 受保人簽署	Date 日期

蘇黎世保險有限公司(於瑞士註冊成立之公司) 理賠部:香港港島東華蘭路 18 號港島東中心 25 - 26 樓 電話:29039388 圖文傳真:29681660

(If you like us to obtain the police statement, please complete and return this form. The process will take four to six weeks) (閣下亦可選擇由本公司向警方索取口供副本,請填寫及寄回此授權書。索取口供程序將需四至六星期完成)

		<u>ıthorization</u> 紙授權書	
Your ref.: Our ref.:			
Dear sirs, 敬啓者:			
Date of incident : 遇事日期 Location of incident : 遇事地點 Nature of incident :			
事件: I/We authorize Zurich Insuran	, holder of Hk	CID card no a copy of the st	, hereby atement/report I/We made to you
following the captioned 本人 警署索取有關之口供/報	,香港身份証號碼為		_ ,現授權蘇黎世保險有限公司向 貴
Informant's signature 報案人簽署		Date 日期	
Name(Block letter) 姓名(正楷)			註: 如遇爭執 以英文爲準

Statement of claim

索償申報表

Description if article 物品描述	Name and address of owner 物主姓名及地址	Date of purchase or installation 購買或裝置 的日期	Name and address where purchased 購入之商號名稱及地址	Original purchased price 購買時價錢	Deduction for age, use or wear and tear 折舊	Repair / replacement (if applicable) 修理 / 更換費用(如適 用)	Claim amount 索償金額