



財物保險索償表

PROPERTY INSURANCE CLAIMS FORM

被保險人資料 INSURED INFORMATI	ION								
被保險人姓名							保險單編號		
Name of Insured							Policy No.		
1, , , , , , , , , , , , , , , , , , ,	由	,	,	至	,		電話號碼		
	From	/	/	То	/	/	Telephone No.		
聯絡地址							傳真號碼		
Contact Address							Fax No.		
Part of Free of									
損 失 報 告 LOSS DETAILS									
意外性質		火災		_	水浸		其他		
Nature of Accident:	-	Fire	∐ Bur	glary		amag	e Others:		
意外日期及時間									
Date & Time of Accider	nt								
意外地點									
Location of Accident									
意外詳情									
Details of Accident									
	-								
	Ī								
誰首先發現此意外及在個	何時發	現							
When and by whom thi	s loss	was discov	ered:						
證人資料(如有)									
Witness Information, if	any :								
,									
曾否通知警察或消防署"	?					有	否		
Have the Police Author	ities /F	ire Service	Departr	nent beer	informed?		☐ Yes ☐ No		
若有, 請填上報案之警署	署名稱,	及警方檔案	紀錄號碼	Ę					
If Yes, please give the	Police	Station na	me and i	ecord nur	mber :				
* 如意外屬於遺失財物、盜 Police must be notified					n items or mal	icious	s damage incident.		
以前曾否遭遇同樣性質的				<u> </u>					
Do you have any simila				. Plaasa	nrovide dets	ile			
是YES / 否NO	11 1033	iii tile past	: 11 160	s, i lease	provide dete	uio.			
	114/ 0	++	<u> </u>	7/11 11		1 1 1 1 1 1			
是否有其他保險保障該則									
Is there any other insurance covering this loss? If Yes, Please provide insurance company name, sum insured &									
policy number.									
是YES □ / 否NO □									

Does	可財務公司或其他人事對 any lienholder/mortgag				the claim item	n(s) ? If Yes, F	Please provide						
details 是	s. YES		/		否	NO							
		ᆄ											
損失或損壞財物細明表 SCHEDULE OF LOST / DAMAGED PROPERTY													
損失或抗 Descrip Propert	9	購買日期與地點 When and Where Purchase	是否附上收據 Receipt Attached Yes / No	財物原來價值 Original Cost (HK\$)	購買價值 Replacement Cost (HK\$)	折舊 Depreciation (HK\$)	要求賠償數目 Amount Claimed (HK\$)						
1.													
2.													
3.													
4.													
5.													
6.													
7.													
8.													
9.													
10.													
11.													
12.													
13.													
14.													
		總數 Total	:										
* 請附	上發票、 估價單或付款收	女據 Please attach a	ny invoice, quo	otation or payme	ent receipt								
(1) 本 to m (2) 本 // 述 Cu ac by	DECLARATION (人/本司聲明以上所列之資料) be true and correct in every/our power in dealing with t (人/我們確認本人/我們已了我們已詳細閱讀該聲明對貴立,本人/我們特此確認並同ONFIRM that I/we have readvised to read carefully the For the Company (whether corn dagree to the use and transfer	y respect to the best of the matter. 閱讀並明白收集個人資公司所收集或持有之本 可意中國交銀保險有限 d and understood the P PICS, and I/we have restained in this application	pf my/our knowled 料的聲明。本人 人/我們的個/ 人公司根據該聲明 Personal Informate ad it carefully its on or otherwise)	全dge and belief and 大資料的影響(不論 月使用及轉移本人 ation Collection Streffect and impact b. Based on the fo	nd undertake to g 我們已被通知本/ 說是否此表格所載 人我們的個人資 tatement ("PICS") t in respect of my pregoing, I/we her	give the Company 大 我們須詳細閱 或從其他途徑所取 料。I/WE ACKN I. I/We confirm that our personal data seby give my/our a	y all assistance in 讀該聲明,而本人 以得)。根據以上所 IOWLEDGE AND at I/we have been a collected or held acknowledgement						
被保險人簽署 Insured Signature :													

In the event the Insurance application consisting of personal information, such application will not be processed unless this personal information collection statement is duly read and signed by the insurance applicant. (effective from 1st April, 2013)

PERSONAL INFORMATION COLLECTION STATEMENT ("PICS")

COLLECTION AND USE OF PERSONAL DATA

China BOCOM Insurance Co., Ltd. (hereafter called "the Company") may use the personal data collects from you (whether contained in this application or otherwise) for the purposes of

- (i) investigating, processing and paying claims made under your insurance policy;
- (ii) collecting deductibles for claim settlement and/or any outstanding amounts from you;
- (iii) conducting market research for statistical or other purposes;
- (iv) matching any data held which relates to you from time to time for any of the purposes listed herein;
- (v) conducting identity and/or credit checks and/or debt collection;
- (vi) carrying out other services in connection with the operation of the Company's business;
- (vii) contacting you for any of the above purposes;
- (viii) other ancillary purposes which are directly related to the above purposes; and
- (ix) complying with applicable laws, regulations or any industry codes or guidelines.

Personal data will be collected only for lawful and relevant purposes and all practicable steps will be taken to ensure that personal data held by the Company is accurate. The Company will take all practicable steps to ensure security of the personal data and to avoid unauthorized or accidental access, erasure or other use.

The Company may disclose your personal data for the above purposes to the following classes of transferees:

- (a) third party agents, contractors and advisors who provide administrative, communications, computer, payment, security or other services which assist
 the Company to carry out the above purposes (including medical service providers, emergency assistance service providers, telemarketers, mailing
 houses, IT service providers, bank for executing direct debit payment and data processors);
- (b) in the event of a claim, loss adjudicators, claims investigators and medical advisors;
- (c) in the event of default, debt collectors and recovery agents;
- (d) insurance reference bureaus or credit reference bureaus;
- (e) reinsurers and reinsurance brokers;
- (f) your insurance broker (if you have one);
- (g) our legal and professional advisors;
- (h) our related companies;
- (i) the Hong Kong Federation of Insurers (or any similar association of insurance companies) and its members;
- (j) the Insurance Claims Complaints Bureau and similar industry bodies; and
- (k) government agencies and authorities as required or permitted by law.

The Company may also use and disclose your personal data otherwise with your consent.

"Related companies" in this form means the holding company of the China BOCOM Insurance Co., Ltd (Bank of Communications Co., Ltd.) which includes branches, subsidiaries, representative offices and/or any corporations or legal entity under the effective management control by the Bank of Communications Co., Ltd. and/or any subsidiaries and/or representative offices of China BOCOM Insurance Co., Ltd., wherever situated.

DIRECT MARKETING

Unless with your consent, the Company MAY NOT use any extra information obtained under this form for any direct marketing purpose except for those information obtained from you before for processing the insurance application. In the event you <u>DO NOT WISH</u> the Company and/or its affiliated companies to use your personal data in direct marketing and receive the direct marketing materials, you may inform us in writing to the address in the section on "ACCESS AND CORRECTION OF PERSONAL DATA". The Company shall, without charge to you, ensure that you are not included in future direct marketing activities.

ACCESS AND CORRECTION OF PERSONAL DATA:

Under the Personal Data (Privacy) Ordinance (Cap. 486) ("PDPO"), you have the right to ascertain whether the Company holds your personal data, to obtain a copy of the data, and to correct any data that is inaccurate. You may also request the Company to inform you of the type of personal data held by it. Requests for access and correction or for information regarding policies and practices and kinds of data held by the Company should be addressed in writing to: Data Privacy Officer of China BOCOM Insurance Co., Ltd. 18/F., Fairmont House, 8 Cotton Tree Drive, Central, Hong Kong.

投保申請人必須閱讀及簽署此收集個人資料聲明後有關的投保申請將會被處理(2013年4月1日起生效)

收集個人資料的聲明

收集及使用個人資料

中國交銀保險有限公司(下稱"本公司") 可能會使用客戶提供的個人資料(不論是否此表格所載或從其他途徑所取得)作以下用途:

- (i) 調查、處理及支付 閣下保單有關的索償;
- (ii) 向 閣下收取自負額及欠款;
- (iii) 為統計或其他目的進行市場研究;
- (iv) 不時就本條款所列的任何目的核對所持有的與 閣下有關的任何資料;
- (v) 進行身份和/或信用核查和/或債務追收;
- (vi) 開展與本公司業務經營有關的其他服務;
- (vii) 就以上用途聯絡 閣下;
- (viii) 其它與上述用途有直接關係的附帶用途;及
- (ix) 遵循適用法律,條列及業内守則及指引。

本公司僅將為合法和相關的目的收集個人資料,並將採取一切切實可行的步驟,確保本公司所持個人資料的準確性。本公司將採取一切切實可行的步驟,確保個人資料的安全性,及避免發生未經授權或者因意外而擅自取得、刪除或另行使用個人資料的情況。

本公司亦可因應上述用途披露 閣下的個人資料予下列各方:

- (a) 就上述用途,向本公司提供行政、通訊、電腦、付款、保安及其它服務的第三方代理、承包商及顧問(包括:醫療服務供應商、緊急救援服務供應商、電話促銷商、郵寄及印刷服務商、資訊科技服務供應商、執行直接付款方式繳付保費之銀行及數據處理服務商);
- (b) 處理索賠個案的理賠師、理賠調查員及醫療顧問;
- (c) 追討欠款的收數公司或索償代理;
- (d) 保險資料服務公司及信貸資料服務公司;
- (e) 再保公司及再保經紀;
- (f) 閣下的保險經紀(若有);

- (g) 本公司的法律及專業業務顧問;
- (h) 本公司的關連公司;
- (i) 香港保險業聯會(或同類的保險公司聯會)及其會員;
- (j) 保險索償投訴局及同類的保險業機構;
- (k) 法例要求或許可的政府機關。
- 經 閣下同意,本公司可能會以其它方式使用及披露 閣下的個人資料。

"關連公司"是指本公司的控股公司『交通銀行股份有限公司』其中亦包括交通銀行股份有限公司屬下之分行、附屬公司及代表處及/或任何被交通 銀行股份有限公司在管理上控制的公司及/或中國交銀保險有限公司的附屬公司及代表處,不論其所在地。

直銷促銷

若非經 閣下同意,本公司不可能使用 閣下在索償申請書中提供的額外聯絡資料用作任何直接促銷用途。這並不包括早前在投保申請處理時提供 的資料。若閣下不願意本公司及與本公司關聯的公司使用及將 閣下的個人資料提供予其他人士作任何形式的直接促銷用途。請 閣下請發信至下 文"個人資料的查閱和更正"部份所列的地址通知本公司。本公司會在不收取任何費用的情況下確保不會將閣下納入日後的直接促銷活動中。

個人資料的查閱和更正

根據條例,閣下有權查明本公司是否持有閣下的個人資料,獲取該資料的副本,以及更正任何不準確的資料。閣下還可以要求本公司告知閣下本 公司所持個人資料的種類。查閱和更正的要求,或有關獲取政策、常規及本公司所持的資料種類的資料,均應以書面形式發送至:中國交銀保險 有限公司位於香港中環紅棉路8號東昌大廈18樓個人資料保護主任收。

電話 Tel (852) 2591 2938 傳真Fax: (852) 2831 9192