



保險公司填寫 For Office Use

Claim Ref. No.
Received Date

公眾責任保險賠償報告書 Public Liability Insurance Claim Form

保戶姓名			
Name of Insured			
保單號碼			
Policy No.			
地址			
Address			
電話			
Telephone No.			
傳真號碼			
Fax No.			
職業/ 行業			
Occupation/ Trade			
出事性質			
Nature of Loss			
發生日期及時間			
Occurred at about	日期 On, _		上午/下午 AM/PM
發生地點	· [] [] [] [] [] [] [] [] [] [工 / / / / / / / / / / / / / / / / /
	在 At		
Place of Accident	11. 八		
出事詳細情形,意外如何發生			
Circumstances			
請劃出意外發生之草圖			
同野山总介 安工之平画 Please draw a rough sketch illustratir	ng the circumstances of the accident		
Please draw a rough sketch illustratii	ig the circumstances of the accident		
	警方報告		
	Police Report		
	i oneo itaport		
1. 在何處報警	報案號碼	日期	
Where made?:	Report No :		Date :
vviidio inddo	Ropon No. :		Date :
2. 警方曾採取何種行動?			
Any police action taken?			
, p			
加 左音从r	中,有人受傷或物件損壞,請填寫不	大脚 Third Party I	nformation
	「一月八又囫哭你门!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	+~1/尺 imuraity II	no manon
誰人疏忽而引起此意外?			
Whose negligence caused the accide	ent?		

Extent of injury to the injured person 建築物有否損壞? Any damage to property? 有不收到暗管要求?有無,如有,請連細節 Has any claim been made upon you? Yes/No. If yes, give particulars T程開始前,曾否索取地下電線喉管總管道之平面圖? Have you obtained a plan of existing Underground Cable/Pipes/Main before commencing works? Yes / No 如有,該損壞之電線,喊管,總管道是否顯示在圖內? (如有收到任何有關這次意外之信件請勿作答並立即交與保險公司處理) (Any communication that you receive about the accident should not be answered but sent to the Insurance Company immediately.) ### Deacription of Articles 物件名稱 Description of Articles Name and address of witness ### Deacription of Articles Name and address of witness ### De										
勝者と平義・姓名、地社及職業 Name, age, address and occupation of the injured person 勝者之學機模を Extent of injury to the injured person 基本原物有可能で、										
Name, age, address and occupation of the injured person	What right did the inju	ired party have on tl	ne premises?							
Name, age, address and occupation of the injured person	但 // / / / / / / / / / / / / / / / / / /	h								
Extent of Injury to the injured person			e injured							
勝者之受謝程度 Extent of injury to the injured person. Any damage to property? Any damage to property or premises was caused by this occurrence, please describe and give an estimated cost of repairs: **** *** *** *** *** ** ** **	person	and occupation of the	ic injured							
解写 詩典 京語 (傷者之受傷程度									
#無勢持方形域?	Extent of injury to the	injured								
Any damage to property? If so, please complete Details of loss:	person									
相容教學照信要求?有無・如有・詩連細節		. •		如有,請填						
Has any claim been made upon you? Yes/No. If yes, give particulars 新祥連証人姓名及地址 Name and address of witness 上程開始前、曾音系東地市電線際管總管道之平面圖? Have you obtained a plan of existing Underground Cable/Pipes/Main before commencing works? Yes / No 知有,義撰模之電線、際管,總管通是否顯示在圖內? 有 / 無	Any damage to prope	erty?	K-K-		_ If so, pleas		Details of loss;			
語辞速延人姓名及地址 Name and address of witness 工程開始前・曽杏素取地下電線報管總管道之平间圖? 相ave you obtained a plan of existing Underground Cable/Pipes/Main before commencing works? Yes / No 切有,該接域之電線、噴き、總管理是否調产任國內? If answer is Yes, is the damaged Cable/Pipe/Main indicated in the Plan? Yes / No (切有收到任何時間立て有關立大管立立即交與保險公司處理) (Any communication that you receive about the accident should not be answered but sent to the Insurance Company immediately.) 指先明細表 Details of loss 参作名稱 物主姓名及地址 鹅賀日阴 薩寶爾旗 摄球程度 折离多少 摄球相关特之價值 Wex 表面的 Only Adue at the Time Net Amount of Claim of owner Description of Anticles Name and address Date acquired Actual Cost Extent of Depreciation Value at the Time Net Amount of Claim of owner 如建築物東物東物件受到損壞、請詳述及列出其修理之釣數 If any damage to property or premises was caused by this occurrence, please describe and give an estimated cost of repairs: 第明及授權書DECLARATION AND AUTHORIZATION (1) 本人本公司接代數章操即是人等的理论,由于整理的理论,由于整理的理论,由于整理的理论,由于整理的理论,由于整理的理论,由于整理的理论,由于整理的理论,由于整理的理论,由于整理的理论,由于整理的理论,由于整理的理论,由于整理的理论,由于整理的理论,由于整理的理论,可能够加速的理论,是可能够加速的理论,是可能够加速的理论,是可能够加速的理论,是可能够加速的理论,是可能够加速的理论,是可能够加速的理论,是可能够加速的理论,是可能够加速的理论,是可能够加速的理论,是使用的理论,是使用处于整理的理论,是使用处于整理的理论,是使用处于整理的理论,是使用处于使用的理论,是使用处于使用的理论,是使用处于使用的理论,是使用处于使用的理论,是使用处于使用的理论,是使用处于使用的理论。如此可能的理论的理论,是使用处于使用的理论,是使用处于使用的理论,是使用处于使用的理论,是使用处于使用的理论,是使用处于使用的理论,是使用处于使用的理论,是使用处于使用的理论,是使用处于使用的理论。如此使用的理论的理论,是使用处于使用的理论,是使用处于使用的理论的理论的理论的理论,是使用处于使用的理论的理论的理论的理论的理论的理论的理论的理论的理论的理论的理论的理论的理论的		· ····		ivo particular	·c					
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工程開始前,曾否索欺地下電線縣管總管道之平面圖?	請詳述証人姓名及地址	Ŀ								
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Description of Articles Name and address of owner Date acquired Actual Cost Extent of Damage Depreciation Value at the Time of Loss/Damage						;				
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If any damage to property or premises was caused by this occurrence, please describe and give an estimated cost of repairs:		of owner			Damage		of Loss/Damage			
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聲明及授權書DECLARATION AND AUTHORIZATION (1) 本人/本公司藉此鄭重聲明上述各項全部屬實及本人/本公司並無其他保單補償或保障本人/本公司因此意外引起之損失。同時,本人/本公司明白及同意供納 此表格本人/本公司並不構成保險公司放棄保單上條例所授予之權利。I/We hereby declare that the foregoing particulars are true in every respect, and the I/We have no other policy indemnifying me/us in respect of this loss or accident. It is also understood and agreed that the furnishing of this form to me/us shall not constitute a waiver of any of the conditions of the policy. (2) 本人/我們確認本人/我們已閱讀並明白收集個人資料的聲明。本人/我們確認本人/我們回被通知本人/我們須詳細閱讀該聲明,而本人/我們已詳細閱讀該聲明對責公司所收集或持有之本人/我們的個人資料的影響(不動走)各批表格所載或從其他途徑所取得)。根據以上所述,本人/我們特此確認並同意中國交銀保險有限公司根據該聲明使用及轉移本人/我們的個人資料。I/WE ACKNOWLEDGE AND CONFIRM that I/we have read and understood the Personal Information Collection Statement ("PICS"). I/We confirm that I/we have been advised to read carefully the PICS, and I/we have read it carefull its effect and impact in respect of my/our personal data collected or held by the Company (whether contained in this application or otherwise). Based of the foregoing, I/we hereby give my/our acknowledgement and agree to the use and transfer of my/our personal data by China BOCOM Insurance Co Ltd. in accordance with the PICS. #投保人素償申請人簽署#Signature of Insured/Claim Applicant	If any damage to pr	operty or premise	s was cause	d by this o	ccurrence,	please des	cribe and give ar	n estimated cost of		
(1) 本人/本公司藉此鄭重聲明上述各項全部屬實及本人/本公司並無其他保單補償或保障本人/本公司因此意外引起之損失。同時,本人/本公司明白及同意供納此表格本人/本公司並不構成保險公司放棄保單上條例所授予之權利。I/We hereby declare that the foregoing particulars are true in every respect, and the I/We have no other policy indemnifying me/us in respect of this loss or accident. It is also understood and agreed that the furnishing of this form to me/us shall not constitute a waiver of any of the conditions of the policy. (2) 本人/我們確認本人/我們已閱讀並明白收集個人資料的聲明。本人/我們確認本人/我們已被通知本人/我們須詳細閱讀該聲明,而本人/我們已詳組閱讀該聲明對貴公司所收集或持有之本人/我們的個人資料的影響(不論是否此表格所載或從其他途徑所取得)。根據以上所述,本人/我們特此確認並同意中國交銀保險有限公司根據該聲明使用及轉移本人/我們的個人資料。I/WE ACKNOWLEDGE AND CONFIRM that I/we have read and understood the Personal Information Collection Statement ("PICS"). I/We confirm that I/we have been advised to read carefully the PICS, and I/we have read it carefull its effect and impact in respect of my/our personal data collected or held by the Company (whether contained in this application or otherwise). Based of the foregoing, I/we hereby give my/our acknowledgement and agree to the use and transfer of my/our personal data by China BOCOM Insurance Country Ltd. in accordance with the PICS. #投保人索償申請人簽署 #发保人索償申請人簽署 #Signature of Insured/Claim Applicant	repairs :									
(1) 本人/本公司藉此鄭重聲明上述各項全部屬實及本人/本公司並無其他保單補償或保障本人/本公司因此意外引起之損失。同時,本人/本公司明白及同意供納此表格本人/本公司並不構成保險公司放棄保單上條例所授予之權利。I/We hereby declare that the foregoing particulars are true in every respect, and the I/We have no other policy indemnifying me/us in respect of this loss or accident. It is also understood and agreed that the furnishing of this form to me/us shall not constitute a waiver of any of the conditions of the policy. (2) 本人/我們確認本人/我們已閱讀並明白收集個人資料的聲明。本人/我們確認本人/我們已被通知本人/我們須詳細閱讀該聲明,而本人/我們已詳組閱讀該聲明對貴公司所收集或持有之本人/我們的個人資料的影響(不論是否此表格所載或從其他途徑所取得)。根據以上所述,本人/我們特此確認並同意中國交銀保險有限公司根據該聲明使用及轉移本人/我們的個人資料。I/WE ACKNOWLEDGE AND CONFIRM that I/we have read and understood the Personal Information Collection Statement ("PICS"). I/We confirm that I/we have been advised to read carefully the PICS, and I/we have read it carefull its effect and impact in respect of my/our personal data collected or held by the Company (whether contained in this application or otherwise). Based of the foregoing, I/we hereby give my/our acknowledgement and agree to the use and transfer of my/our personal data by China BOCOM Insurance Country Ltd. in accordance with the PICS. #投保人索償申請人簽署 #发保人索償申請人簽署 #Signature of Insured/Claim Applicant										
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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;

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- (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。