



MSIG Insurance (Hong Kong) Limited
9/F., Cityplaza One, 1111 King's Road, Taikoo Shing, Hong Kong
G.P.O. Box 783, Hong Kong
Tel +852 2894 0555, Fax +852 2890 5741
www.msig.com.hk

Public Liability Claim Form 公共責任意外索償表格

<p>(Please complete in BLOCK letters)</p> <p>Procedures and Notes:</p> <ol style="list-style-type: none">1. Please submit the Claim Form to us within 30 days from the date of accident.2. Please submit a completed Claim Form, together with original copies of all relevant documents to: <p style="text-align: center;">MSIG Insurance (Hong Kong) Limited Claims Division 9/ F Cityplaza One 1111 King's Road Taikoo Shing Hong Kong</p> <ol style="list-style-type: none">3. Incomplete Claim Form cannot be accepted for processing of payment.4. Further information may be needed.5. It is important that a complete answer be given to every question. If insufficient space is provided for your answers, please continue on a separate sheet.6. For inquiry, please call our Claims Services Hotline at 2894 0660 or email at claimin@hk.msig-asia.com or fax at 2902 9134.	<p>(請以正楷填寫)</p> <p>程序及備註：</p> <ol style="list-style-type: none">1. 請將索償表格於事發 30 天內呈交本公司。2. 請將填妥之索償表格連同有關證明文件之正本寄回： <p style="text-align: center;">三井住友海上火災保險（香港）有限公司 理賠部 香港太古城 英皇道 1111 號 太古城中心一期 9 樓</p> <ol style="list-style-type: none">3. 未經填妥之索償表格，將不獲接受索償處理。4. 稍後可能需要提供進一步資料。5. 請回答所有問題，若需要，請另附紙張繼續填寫。6. 如有任何查詢，請致電我們的賠償服務熱線 2894 0660 或電郵 claimin@hk.msig-asia.com 或傳真至 2902 9134。
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THIS FORM IS ISSUED WITHOUT ADMISSION OF LIABILITY. PLEASE COMPLETE AND RETURN THIS FORM TO OUR CLAIMS DIVISION IMMEDIATELY AFTER THE OCCURRENCE IN THE EVENT OF ANY CLAIM OR POTENTIAL CLAIM UNDER THE POLICY.

提供此報告書予閣下不應被視為本公司的賠償承諾。於事故發生後，如已確實發生或可能發生索償事件，閣下必須填妥此報告書內有關項目並立即交回本公司理賠部。

Insured Person's or Policyholder's Information 受保人或保單持有人資料			
Name of Insured Person/ Policyholder 受保人/保單持有人姓名		Policy No. 保單號碼	
Correspondence Address 通訊地址			
Contact Person 聯絡人姓名		Daytime Contact No. 日間聯絡電話號碼	
Email Address 電郵地址			

Circumstances of Accident 有關意外事故詳情
Date and time of accident 發生事故之日期及時間
Exact place of accident 發生事故之地點
1. When and by whom was it first notified to you? 事件在何時及由何人報告？
2. Detail of description of incident and cause of incident: 事件發生之詳情及引致事件之原因： _____ _____ _____ _____

3. A copy of the Incident Report, if there is any
 如閣下備有事故報告，請提供副本

4. Has any precautionary measure been taken at the time of incident? If "Yes", please give details
 在事故發生時，是否已作出任何安全措施？如果「是」，請提供詳情

5. Following the incident, has any remedy work been taken? If "Yes", please give details
 在事故發生後，是否已作出任何應變措施？如果「是」，請提供詳情

6. Name(s), Address(es), and Telephone No(s). of witness(es) of incident, if any
 目擊證人之姓名、地址及電話號碼（如有）

7. Was the incident reported to the police? If so, at which station.
 事件有否報案及在何處報警？

8. Please state your own view on liability
 請說明閣下對是次事故就責任問題上的意見

Particulars of Main Contractor or Contractor 總承建商或承建商資料

Is there any work by contract undertaken at the time of incident? No Yes if "Yes", please give details as below:
 在事故發生時，有否以合約形式的工作進行中？ 否 有 如「有」，提供詳情如下：

Name _____ Trade _____ Contact Tel. No. _____
 名稱 _____ 行業 _____ 聯絡電話 _____

Address _____
 地址 _____

Is the main contractor or contractor entitled to claim under their respective insurance policy in respect of this incident? No Yes if "Yes", please give details as below:
 總承建商／承建商是否就是次事故向其保險公司索償？ 否 是 如「是」，提供詳情如下：

總承建商／承建商是否就是次事故向其保險公司索償？

Name of insurance company _____ Policy No. _____
保險公司名稱 _____ 保單編號 _____

Is there any contractual agreement made with the Main Contractor/ Contractor? No Yes
是否已與總承建商/ 承建商定立任何合約上的協議? 否 是

If "Yes", who shall be responsible for the insurance coverage against liability for third parties?
如「是」, 根據協議書由誰負責投購第三者保險? _____

Third Parties 第三者資料

Complete this Section if the property was damaged or a person (not your employee) was injured.
假若意外中有財物受損或有人(閣下的僱員除外)受傷, 請填妥此部份。

A. Injured Party 傷者資料

Name 姓名	Gender (M/ F) 性別 (男/女)	Age 年齡	Nature & Extent of Injury 受傷部位及程度	Contact Telephone Number &/ or Address 聯絡電話及/或地址
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Was the injured person sent to hospital?
傷者有否被送院? _____

Relationship between you and the injured?
閣下與傷者之關係? _____

B. Damaged Property (not belonging to Insured Person) 財物損毀資料 (受保人財物除外)

- Who is the owner of the property?
受損財物屬誰? _____
- The owner's address?
物主地址? _____
- What kind of property involved?
甚麼財物受損? _____
- What is the nature & extent of damage?
損毀程度? _____
- The estimated cost of repair, if known? HK\$
修理費約為? 港幣 _____

Additional questions if the premises are occupied for residential purpose:

如果受保物業用作住宅，請提供以下資料：

Are you the owner of the Insured premises?

閣下是否該受保物業的業主？

Yes
是 No
否

Are you the occupier of the Insured premises?

閣下是否居住於該受保物業？

Yes
是 No
否

Were the premises occupied at the time of the loss?

在事發時，住宅是否有人居住？

Yes
是 No
否

If No, please give date and time they were last occupied.

若沒有，請提供最後有人居住的日期及時間。

Age of the building?

該受保物業的樓齡？

Additional questions if you have decorated and/ or renovated the premises:

如閣下曾裝修受保住宅，請提供以下資料：

When was it decorated and/ or renovated?

在何時裝修？

Which part(s) was/ were decorated and/ or renovated (please specify):

曾作裝修的位置（請註明）：

*** IMPORTANT — Please forward to us all correspondence directly relating to the third party claim and do not admit any liability to third party**

*** 重要事項 — 如收到第三者的索償，請勿私下作出回覆。閣下必須將該等信件交予本公司。**

Declaration & Authorisation 聲明及授權

1. I/ We declare that the above information is in all respect true and complete to the best of my/ our knowledge and belief;
我/我們就此聲明，以上所述事項均根據我/我們所知及所信的情況下提供，並且為正確及並無遺漏；
2. It is agreed that upon request by MSIG Insurance (Hong Kong) Limited. I/ We shall make a statutory declaration to re-affirm the genuineness of all the information contained in this claim form; and
若三井住友海上火災保險（香港）有限公司提出有關要求，我/我們將同意作出重申本索償申請表內資料均屬真確的法定聲明；及
3. I, the undersigned claimant, hereby authorise any party concerned to disclose to MSIG Insurance (Hong Kong) Limited or its representative any and all information with respect to my claim. Photostat copy of this authorisation shall be as effective and valid as the original.
本人為下方簽署之索償人。本人現授權有關人士向三井住友海上火災保險（香港）有限公司或其代表提供任何一切有關本人於上述索償中的資料記錄。本授權書之影印本的法律效力等同正本。
4. I believe that the facts stated in this claim form are true and correct. I acknowledge that the Insurers will rely upon the information supplied by me/ the policyholder/ the insured person, which I verily and honestly believe to be true and correct, in prosecuting or defending any claims or proceedings in future, and the signatory/ the policyholders/ insured person under this policy, if so required by the Insurers, will be asked and are bound to sign any court documents on the basis of information provided herein.
本人確認此索償申請書內之事實均為真實及正確。本人確認貴保險公司會依靠本人/保單持有人/受保人所提供的資料（本人誠實地相信該等資料是真實和正確的），作為將來進行或辯護任何索賠及訴訟程序之用。如貴保險公司要求，本簽署人/保單持有人/受保人將會及必定同意簽署任何有關倚靠該等資料所準備之法律文件。

Signature of Insured Person (with company chop if applicable)

受保人簽署（如屬公司請蓋章）

I.D. Card No. 身份證號碼

Date 日期

MSIG Insurance (Hong Kong) Limited ("MSIG", "we" or "us") would ask that you take the time to read this privacy policy carefully. In case of discrepancies between the English and Chinese versions of this statement, the English version shall prevail.

PRIVACY POLICY

MSIG takes your privacy very seriously. To ensure your personal information is secure, we communicate and enforce our privacy and security guidelines according to the relevant laws and regulations. MSIG takes precautions to safeguard your personal information against loss, theft, and misuse, as well as against unauthorised access, disclosure, alteration, and destruction. Furthermore, we will not sell your personal information to anyone for any purpose. MSIG imposes very strict sanction control and only authorised staff on a need-to-know basis are given access to or will handle your personal data, and we provide regular training to our staff to keep them abreast of any new developments in privacy laws and regulations.

We will only retain your personal data in our business records for as long as it is necessary for business and tax purposes as permitted by the laws. We will require our agent, contractor or third party who provides administrative or other services on our behalf to protect personal data they may receive in a manner consistent with this policy. We do not allow them to use such information for any other purpose. If you have any questions or inquiries regarding our privacy policy, please feel free to contact us.

Personal Information Collection Statement

Personal information is data that can be used to uniquely identify or contact a single person. As our customers, it is necessary from time to time for you to supply us with your personal data in relation to the general insurance services and products ("the Product") that we provide to you and in order for us to deliver and improve the customer service. This includes but not limited to the personal data contained in the proposal form or in any document in relation to the Product or any claim made under the Product.

Your personal data may be used for below **obligatory purposes**. Failure to supply such data for obligatory purpose may result in MSIG being unable to provide the Product.

The **obligatory purposes** for which your personal data may be used are as follows:-

- our daily operation and administration of the services and facilities in relation to the Product provided to you;
- variation, cancellation or renewal of the Product;
- assessing and processing claims in relation to the Product and any subsequent legal proceedings; or
- exercising any right of subrogation by us.

In connection with any of the above purposes, the personal data that we have collected might be transferred to:

- our related, subsidiary or affiliated companies within the MSIG Group or MS&AD Insurance Group in or out of Hong Kong;
- any other company carrying out insurance or reinsurance related business in or out of Hong Kong;
- any association or federation of insurance companies that exists or is formed from time to time; or
- any agent, contractor or third party who provides administrative, claims handling or other services relating to the Product to MSIG or any member of the MSIG Group or MS&AD Insurance Group.

In order to confirm the accuracy of your personal data, you agree to provide us with authorisation to access to and to verify any of your personal data with the information collected by any federation of insurance companies from the insurance industry.

Under the relevant laws and regulations, you have the right to request access to and to request correction of your personal data held by us, and to request to opt out from receiving any direct marketing communication from us. If you wish to exercise these rights, please write to our Data Protection Officer at 9/F Cityplaza One, 1111 King's Road, Taikoo Shing, Hong Kong.

If you have any enquiries or require assistance with this Personal Information Collection Statement, please call us at (852) 3122 6922.

三井住友海上火災保險（香港）有限公司（下稱「三井住友保險」、「我們」或「本公司」）請您仔細閱讀下列條款與條件。如此聲明的英文版本與中文版本內容有歧異，將以英文版本為準。

私隱政策

三井住友保險極為重視您的私隱。為了保障您的個人資料，我們以有關法例及規例為準則，向公司內部傳達並執行我們定立之私隱及保障指引。三井住友保險採取預防措施以保障您的個人資料遭受遺失、盜竊、誤用，以及在未經許可之情況下被取用、洩露、更改及破壞。此外，我們均不會出售您的個人資料給任何人。三井住友保險嚴格執行認可管制，只容許獲授權之職員在必需要的情況下，取用或處理您的個人資料。我們會向職員定期提供培訓，確保他們知悉任何有關私隱法律及規例的新發展。

我們只會在法律容許並必需用於業務及稅務用途之情況下，保留您的個人資料作為我們的業務記錄。我們會向以本公司之名義提供行政或其他服務之代理、承辦商或第三者，要求他們遵循本政策保護有可能收到的個人資料。本公司不會容許他們使用有關資料於任何其他目的。如您對我們的私隱政策有任何疑問，歡迎聯絡我們查詢。

個人資料收集聲明

個人資料是可以用作獨立識別或聯絡個別人士之數據。貴為我們的客戶，您須向我們不時供給與我們提供之一般保險服務及保單產品（下稱「保單」）相關的個人資料，讓我們可向您提供客戶服務及改善服務質素。當中包括但不限於您在申請表填寫或任何與保單有關之文件上或任何透過保單索償上所載之個人資料。

您的個人資料可被用於**強制性**用途。如您不能向三井住友保險提供有關個人資料，我們將不能向您提供有關保單。

您的個人資料可被用於以下**強制性**之用途：

- 向您提供與保單及核保相關之日常運作及行政用途；
- 保單之更改、取消或續保用途；
- 評估及處理透過保單索償及任何繼後法律訴訟之用途；或
- 由本公司行使代位權利之用途。

就任何上述的用途，我們所收集的個人資料可能會被轉移至：

- 在三井住友保險集團或 MS&AD 保險集團內，在本港或海外與本公司有關之機構、子公司或附屬公司；
- 任何其他在本港或海外經營有關保險或再保險業務之公司；
- 任何現存或不時成立的協會或保險公司聯會；或
- 任何提供行政服務、索償處理或其他與三井住友保險集團或 MS&AD 保險集團成員相關保單服務之代理、承辦商或第三者。

為了確保您的個人資料之準確性，您同意授權本公司查閱並核實任何由保險業界內保險公司聯會所收集有關您的個人資料。

根據有關法例及規例，您有權查閱及更正本公司所持的任何載有您的個人資料之記錄，以及要求選擇拒收任何本公司的直銷通訊。如您欲行使以上權利，可以書面形式投寄至香港太古城英皇道 1111 號太古城中心第一期 9 樓三井住友海上火災保險（香港）有限公司，通知本公司的資料保護主任。

如您對此個人資料收集聲明有任何疑問或須協助，請致電(852) 3122 6922 與我們聯絡。