

保戶姓名



中國平安保險(香港)有限公司 China Ping An Insurance (Hong Kong) Co., Ltd. (Incorporated in Hong Kong)

Web site: www.cpaihk.com

出事報告書及申請賠償表格 PROPERTY INSURANCE CLAIM FORM

Name of Insured							
保單號碼 Policy No.:							
地址 Address							
電話/手機號碼 Telephone No./Mobile Phone No.:							
傳真號碼/電子郵箱 Fax No./E-mail Address:							
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 Place of Accident	在 At						
出事詳細情況 Circumstances							
如受搶劫或盜竊損失,請填寫本欄 For Burglary, Robbery or Theft Losses Only							
建築物曾否有被暴力進入之痕跡? Were there visible marks or forcible en	try to the premises ?						
或夾萬或儲藏室?如有,請詳述之							
請詳述証人姓名及地址 Specify names and address of witness							
該失去/損壞之物件是否投有其他保Are there any other insurance on the los	險 st/damaged articles?						

				方報告 ce Report					
1. 在何處報警 Where made?	報案號碼 Report No.:				日期				
2. 警方採取何和 Any police act	重行動? tion taken?	NOTE N							
損失明細表 Details of loss									
物件名稱 Description of Articles	物主姓名及地址 Name of address of owner	購買日期 Date acquired	確實價值 Actual Cost	損壞程度 Extent of Damage	折舊多少 Depreciation	損壞/損失時之價値 Value at the time of Loss / Damage	要求賠償之 淨額 Net amount of Claim		
	總數: Total:								
如建築物或物件 If any damage	一受到損壞,請詳述及列出享 to property or premises was	 丰修理之約數 s caused by this	occurrence, plea	ase describe and	give an estimated	cost of repairs:			
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本人/本公司籍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									
意供給此表格本人/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 that I/We have no other policy indenmnifying 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									
日期				保戶/申請人	人答署				
Date Signature of Insured / Claimant									