



Claim Form 索償書

TravelSurance 旅遊萬全保

	te: Please attach and submit a copy 江: 請隨本文件附上及提交投保申請表格副本。	of the A	pplication F	orm to	gether with this	document.		
Application Serial No./Policy No.:			(🗆	Multi-trip Policy 多程旅遊保障	☐ Single -trip Policy 單次旅遊保障	r) Claim No 索償編號:	(For office use only)	
投係 Cor	me of Insured 民人姓名 rrespondence Address 出地址							(供本公司填寫之用)
	tails of Insured Person/Eligible Person: R人/合資格人士資料:						 號碼	
	Name in full 全名					(b) Sex 性別		
(c)	Age 年齡	(d) Occ 職業				(e) Tel. No 電話號碼		
(f)	Address 地址							
	ase complete the appropriate section	ons belov	w:					
	ction 1 - Personal Accident 部分–個人意外							
(a)	Date, time and place of accident 意外發生的日期、時間和地點							
(b)	Describe how the accident occurred, 描述意外怎樣發生及所遭受的損傷	and the ir	njuries sustai	ned				
(c)	Names and addresses of any witness	es to the	accident					
(0)	任何意外目擊者的姓名和地址	03 10 1110	accident					
(d)	Name and address of the attending d 主診醫生的姓名和地址	octor						
(e)	Amount claimed 索償金額							
	ction 2 - Medical and Other Expense 部分-醫療及其他費用	es						
	te: If claim resulted from accidental boo 京: 倘因身體意外受傷而索償 · 亦請填妥上文第	, , ,	•	comple	te Section 1(a) (b)	& (c) above		
	Date and time of sickness occurring 生病日期和時間							
(b)	Diagnosis of sickness 疾病的診斷							

(c)		attending doctor				
	主診醫生的姓名和地址					
(d)	If hospitalized, name and address of the hospital					
(۵)	Full details and amount of	all evnenses claimed				
(6)	全部索償開支的詳情和金額	an expenses claimed				
	tion 3 - Hospital Benefit 部分一住院津貼					
Note	e: Please state reason for h	ospitalization and name and add 適當的部分中,填妥所住的醫院名稱利	dress of hospital by completing	g the appropriate sections above.		
		B From (date)		(time)		
	住院期間	由(日期) To (date)		(時間) (time)		
		至(日期)		(時間)		
(b)	Amount claimed 索償金額					
	tion 4 - Baggage and Pers 部分一行李及個人財物	onal Effects				
		report/Property Irregularity Rep 報告書,證明已向有關方面報失。	port evidencing the notification	1.		
(a)	Date, time and place of los 遺失/損壞的日期、時間和地點	ss/damage f				
(b)		st/damaged				
	描述遺失/損壞的物件內容					
(c)	c) Describe how the loss/damage occurred					
/ -I\	A management adains and					
(a)	Amount claimed索價金額					
(e)	Are there any other insurances covering the same property? (Yes/No) 物件有沒有其它保險保障? (是/否)					
	If yes, please give full particulars若答是 · 請述詳情					
(f)	Did the loss/damage arise from delay or confiscation or detention by customs or other official? (Yes/No)物件遺失/損壞是否因海關或其他官員延誤或充公或扣留所致?(是/否)					
(g)						
(h)						
	etion 5 - Delayed Baggage					
Note		rty Irregularity Report evidencin 物損失報告書,證明已向有關方面報。				
<i>注思</i> (a)						
(b)		me of arrival				
(c)						
(d)	へない チャリス (A ray in the state of the state					
(e)	Date & time the delay was reported to the airline/carrier					

Section 6 - Personal Money 第6部分一個人錢財 Note: Please submit the police report evidencing the notification. 注意:請提交警察報告書,證明已向警方報失。 (a) Date, time & place of loss _ 遺失的日期、時間和地址 Describe how the loss occurred 描述如何遺失 Full particulars and amount of loss _ 遺失的詳情和金額 Amount claimed 索償金額 (e) If travellers' cheques were lost, was the loss immediately reported to the local agent of issuing authority? (Yes/No) 倘遺失旅行支票,是否立即向簽發機構的當地代理報告?(是/否) Date & time the loss was reported to the police ___ 向警方報失的日期和時間 **Section 7 - Personal Liability** 第7部分-個人責任 Note: Please forward to us all correspondence relating to the third party claim unanswered. 注意:有關第三者索償之文件,請不要回覆並儘早呈交予本公司。 Date, time & place of incident _ 發生事故的日期、時間和地點

(b) Full description of incident _ 請詳述事故的經過

(c) Name and address of third party claimant _ 第三者素償人的姓名和地址

d) Extent of injuries/damage caused with estimate on quantum if possible ___ 估計第三者索償人所遭受的損傷/財物損壞程度:若許可的話,請估計其索償金額 ___

(e) Please state your own view on liability _ 請説明你對該責任的意見

(f) Has a formal claim been received from the third party claimant? (Yes/No) 是否曾收到第三者索償人作出正式的索償?(是/否)

Section 8 - Travel Delay

第8部分一旅程延誤

Note: Please submit the carrier's written confirmation as to the number of hours of delay and the reason for such delay. 注意:請提交運輸公司的書面確認書·列明延誤的時數和延誤的原因。

(a)		No./Ocean carrier and name of vessel					
(b)		, scheduled date & time of departure u點、預定日期及時間					
(c) Actual date & time of departure							
(d)	d) Reason for the delay 延誤原因						
(e)	Amou 索償金	unt claimed					
Sect 第98	ion 9						
		se submit the relevant deposits receipt and booking invoice. 沒有關訂金收據和預訂發票					
(a)		e & address of the travel agent 此的名稱和地址					
(b)		on which the travel arrangement was made and the deposits paid 程和支付訂金的日期					
(c)							
(d)	d) Reason for cancellation or curtailment of travel						
) A /I						
(e)	何時發	n the event giving rise to such cancellation or curtailment occurred					
		vhen the travel agent was notified to cancel or curtail the travel arrangement f通知旅行社取消或提早結束旅程					
(f)	Wher 提早結	re and when the curtailment took place					
(g)	Amount claimed with full particulars						
Rem	arks:	All the original medical reports doctors and/or medical receipts hospital bills additional accommodation and/or travelling expenses receipts repair and/or replacement invoices and all other original relative receipts for the expenses hereby claimed have to be					
備註	:	submitted to the Company in substantiation of the claim. 所有正本之醫療報告、醫生和/或醫療收據、醫院單據、額外住宿和/或旅遊開支收據、修理和/或更換物件發票和所有作索償用的其他正本之開支收據必須呈交本公司,作為索償的理據。					

Please ensure the following required douments will be submitted as well to speed up the claim processing.

請確保以下所需文件一併遞交以加快索償申請。

Documents attached 附 上 文 件	Accident and Medical 意外及醫療		Travel Delay and Cancellation 旅程延誤及取消			Baggage and Money 行 李 及 金 錢		
Documents Required 所需文件	Personoal Accident 個人意外	Medical & Hospital Benefit 醫療及住院 津貼	Travel Delay 旅程延誤	Loss of Deposit or Cancellation 損失訂金及 取消旅程	Curtail- ment of Journey 行程提早結 束	Baggage & Personal Effects. 行李及個人 財物	Delayed Baggage 行李延誤	Personoal Money 個人錢財
□ Boarding passes, air Tickets etc. confirming the departure and return dates 登機證,機票等證明出發及回程日期	/		>	/	/	/	_	
□ Medical Certificate / Medical Report 醫療證明/醫療報告	/	>						
□ Death Certificate in case of death 死亡證(如適用)	/							
Original Hospital and Medical Bills showing the period of hospitalization and the receipts 住院及醫療單據正本		/						
Confirmation from the airline/carrier certifying the number of hour of delay & the reason of delay 航空公司/客運機構證明受延遲多少小時及有關原因			/				/	
Original Receipt for the prepaid of transport cost and accommodation 預繳交通及住宿費用的單據正本				/	/			
Confirmation from the hotel / Travel agent / airline / carrier / certifying the amount of refund on the unused expenses 酒店/旅行社/航空公司/客運機構發出的退款報告				/	_			
Original Receipts for purchase of necessity 購買必需品的單據正本							/	
Loss or damage report from relevant authorities e.g. police, airline or hotel, if applicable 有關機構(例如:警局,航空公司或酒店)發出的遺失或損毀報告						/		/
□ Photos showing the extent of damage to the damaged 受損毀物品的相片						/		
All original receipts and / or warranties 所有單據及/或保用證正本						<u> </u>		
Exchange slip / withdrawal records 銀行兑換收據/提款記錄								

Remarks: In certain circumstances, more Information may be required to substantiate the claim. 備註:在一些情況下, 我們可能需要您提供進一步資料以處理您的索償申請。

PERSONAL INFORMATION COLLECTION STATEMENT

AXA General Insurance Hong Kong Limited (referred to hereinafter as the "Company") recognises its responsibilities in relation to the collection, holding, processing, use and/or transfer of personal data under the Personal Data (Privacy) Ordinance (Cap. 486) ("PDPO"). 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 unauthorised or accidental access, erasure or other use.

Please note that if you do not provide us with your personal data, we may not be able to provide the information, products or services you need or process your request.

Purpose: From time to time it is necessary for the Company to collect your personal data which may be used, stored, processed, transferred, disclosed or shared by us for purposes ("Purposes"), including:

- processing and evaluating any applications or requests made by you for products/services offered by the Company and, other companies of the AXA Group ("our affiliates"):
- providing subsequent services to you, including but not limited to administering the policies issued;
- any purposes in connection with any claims made by or against or otherwise involving you in respect of any products/services provided by the Company and/or our affiliates, including investigation of claims;
- evaluating your financial needs; 4
- 5 designing products/services for customers;
- 6. conducting market research for statistical or other purposes;
- 7 matching any data held which relates to you from time to time for any of the purposes listed herein;
- 8 making disclosure as required by any applicable law, rules, regulations, codes of practice or guidelines or to assist in law enforcement purposes, investigations by police or other government or regulatory authorities in Hong Kong or elsewhere;
- 9. conducting identity and/or credit checks and/or debt collection;
- 10. complying with the laws of any applicable jurisdiction;
- carrying out other services in connection with the operation of the Company's business; and 11.
- 12. other purposes directly relating to any of the above.

Transfer of personal data: Personal data will be kept confidential but, subject to the provisions of any applicable law, may be provided to:

- any of our affiliates, any person associated with the Company, any reinsurance company, claims investigation company, your broker, industry association or federation, fund management company or financial institution in Hong Kong or elsewhere and in this regard you consent to the transfer of your data outside of Hong Kong;
- *The Hongkong and Shanghai Banking Corporation Limited ("HSBC") for any of the Purposes and for the following additional bank related purposes: ensuring ongoing credit worthiness of customers, creating and maintaining credit and risk related models, providing the personal 🕺 data to credit reference agencies for the purposes of conducting credit checks and other directly related purposes, determining the amount of indebtedness owed to or by customers and collection of amounts outstanding from customers and those providing security for customers' obligations:

- any person (including private investigators) in connection with any claims made by or against or otherwise involving you in respect of any products/services provided by the Company and/or our affiliates;
- 4. any agent, contractor or third party who provides administrative, technology or other services to the Company and/or our affiliates in Hong Kong or elsewhere and who has a duty of confidentiality to the same;
- 5. credit reference agencies or, in the event of default, debt collection agencies;
- 6. any actual or proposed assignee, transferee, participant or sub-participant of our rights or business; and
- 7. any government department or other appropriate governmental or regulatory authority in Hong Kong or elsewhere.

Transfer of your personal data will only be made for one or more of the Purposes specified above.

Access and correction of personal data: Under the 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

AXA General Insurance Hong Kong Limited

23/F One Kowloon, 1 Wang Yuen Street, Kowloon Bay, Kowloon, Hong Kong

A reasonable fee may be charged to offset the Company's administrative and actual costs incurred in complying with your data access requests.

* This is applicable only if you are applying for a product and/or service of, or making a request to, the Company through HSBC as the Company's distribution agent. Your personal data will not be provided to HSBC for any of the Purposes and the additional purposes and for direct marketing by HSBC set out in the paragraphs above if you do not apply for the product and/or service of, or make a request to, the Company through HSBC as the Company's distribution agent.

收集個人資料的聲明

安盛保險有限公司(下稱"本公司")明白其就《個人資料(私隱)條例》(香港法例第 486 章)("條例")收集、持有、處理、使用和/或轉移個人資料所負有的責任。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。

敬請注意,如果閣下不向本公司提供閣下的個人資料,我們可能無法提供閣下所需的資料、產品或服務,或無法處理閣下的要求。

目的:本公司不時有必要收集閣下的個人資料,並可能因下列各項目的("有關目的")而供本公司使用、存儲、處理、轉移、披露或共享該等個人資料:

- 1. 處理和評估閣下就本公司及安盛集團的其他公司("安盛關聯方")所提供之產品/服務提出的任何申請或要求;
- 2. 向閣下提供後續服務,包括但不限於執行/管理已發出的保單;
- 3. 與就本公司和/或安盛關聯方提供的任何產品/服務而由閣下或針對閣下提出的或者其他涉及閣下的任何索賠相關的任何目的,包括索賠調查;
- 4. 評估閣下的財務需求;
- 5. 為客戶設計產品/服務;
- 6. 為統計或其他目的進行市場研究;
- 7. 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;
- 8. 作出任何適用法律、規則、規例、實務守則或指引所要求的披露或協助在香港或香港以外其他地方的警方或其他政府或監管機構執法及進行調查;
- 9. 進行身份和/或信用核查和/或債務追收;
- 10. 遵守任何適用的司法管轄區的法律;
- 11. 開展與本公司業務經營有關的其他服務;及
- 12. 與上述任何目的直接有關的其他目的。

個人資料的轉移:個人資料將予以保密,但在遵守任何適用法律條文的前提下,可提供給:

- 1. 位於香港或香港以外其他地方的任何安盛關聯方、本公司的任何相關聯人士、任何再保險公司、索賠調查公司、閣下之保險經紀、行業協會或聯會、基金管理公司或金融機構,以及就此方面而言,閣下同意將閣下的資料轉移至香港境外:
- 2. *就任何有關目的和下列與銀行有關的額外目的提供給香港上海滙豐銀行有限公司("**滙豐**"):確保客戶信貸信譽度持續良好,建立和維持信貸及 風險的相關模型,為進行信用核查以及其他直接相關的目的而向信貸資料服務機構提供個人資料,確定尚欠客戶的債務或客戶所欠債務的金額以 及向客戶和為客戶的欠款提供擔保之人追收未償款項;
- 3. 與就本公司和/或安盛關聯方提供的任何產品/服務而由閣下或針對閣下提出的或者其他涉及閣下的任何索賠相關的任何人士(包括私家偵探);
- 4. 在香港或香港以外其他地方向本公司和/或安盛關聯方提供行政,技術或其他服務並對個人資料負有保密義務的任何代理、承包商或第三方;
- 5. 信貸資料機構或(在出現拖欠還款的情況下)追討欠款公司;
- 6. 本公司權利或業務的任何實際或建議的承讓人、受讓方、參與者或次參與者;及
- 7. 在香港或香港以外其他地方的任何政府部門或其他適當的政府或監管機關。

閣下的個人資料將僅為上文中規定的一個或多個有關目的而被轉移。

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:

香港九龍九龍灣宏遠街 1 號一號九龍 23 字樓

安盛保險有限公司

個人資料保護主任

本公司可能會向閣下收取合理的費用,以抵銷本公司為執行閣下的資料查閱要求而引致的行政和實際費用。

*此僅適用於閣下透過滙豐(作為本公司的分銷代理人)申請本公司的產品和/或服務或者透過滙豐(作為本公司的分銷代理人)向本公司提出要求的情况。 如果閣下並未透過滙豐(作為本公司的分銷代理人)申請本公司的產品和/或服務或者透過滙豐(作為本公司的分銷代理人)向本公司提出要求,閣下 的個人資料將不會因上文所述的任何有關目的、額外目的或為讓滙豐進行直接促銷而提供給滙豐

Declaration and Authorization 聲明及授權書

1. I/WE HEREBY DECLARE AND AGREE that (1) all statements and answers to all questions whether or not written by my/our own hand are to the best of my/our knowledge and belief complete and true; (2) AXA General Insurance Hong Kong Limited (the "Company") is not bound by and is not required to rely on any statement which I/We may have made to any person if not written or printed here. 本人/我們謹此聲明及同意(1)上述一切陳述及問題的所有答案,不論是否本人/我們親手所寫,就本人/我們所知所信,均為事實全部並確實無訛;

(2)本人/我們對任何人所作出的任何聲明,如沒有在此申請書上填寫或印出,安盛保險有限公司(「貴公司」)不須受其約束。

I/WE, HEREBY AUTHORIZE (1) any employer, medical practitioner, paramedical examiners, hospital, clinic, insurance company, bank, financial institution, police, government institution, or other organization, institution or person, that has any records or knowledge of me/us to disclose such information to AXA General Insurance Hong Kong Limited ("the Company"); (2) the Company or any of its appointed medical examiners, paramedical examiners or laboratories to perform the necessary medical assessments and tests to evaluate in relation to this claim. This authorization shall bind the successors of and remains valid notwithstanding death or incapacity. A photocopy of this authorization shall be as valid as the original.

本人/我們茲授權(1)任何僱主、註冊西醫、醫療人員、醫院、診所、保險公司、銀行、財務機構、警察、政府機構、或其他組織、機構或人士、凡知道或 持有任何本人/我們之紀錄者,均可將該等資料提供給安盛保險有限公司;(2)安盛保險有限公司或任何其指定之醫生或化驗所,可就此賠償申請替 本人/我們進行所需之醫療評估及測試,作為審核本人/我們之索償。此授權對本人/我們之繼承人具有約束力;即使本人/我們身故或無行為能力 時,此授權仍具效力。本授權書的影印本與正本均有同等效力。

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 carefully 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 on the foregoing, I/we hereby give my/our acknowledgement and agree to the use and transfer of my/our personal data by AXA General Insurance Hong Kong Limited in accordance with the PICS.

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("該聲明")。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/我們已詳細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安盛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。

Date (dd/mm/yyyy) 日期 (日/月/年)	Signature of Insured 投保人簽署
	Signature (Insured Person/Eligible Person)

The above policy is underwritten by AXA General Insurance Hong Kong Limited ("AXA"), which is authorised and regulated by the Commissioner of Insurance of the Hong Kong SAR. AXA will be responsible for providing your insurance coverage and handling claims under your policy. The Hongkong and Shanghai Banking Corporation Limited is registered in accordance with the Insurance Companies Ordinance (Cap. 41 of the Laws of Hong Kong) as an insurance agent of AXA for distribution of general insurance products in the Hong Kong SAR. 以上保單由安盛保險有限公司(「安盛」)承保,安盛已獲香港保險業監理專員授權並受其監管。安盛將負責按保單條款為您提供保險保障以及處理索償申請。香港上海滙豐銀行有限公司乃根據保險公司條例(香港法例第 41 章)註冊為安盛於香港特別行政區分銷一般保險產品之授權保險代理商。

In the event of any inconsistency between the English version and the Chinese version, the English version shall prevail. 如中英文版本的條款有任何分歧,以英文版本為準。

NAH022R11 (0115) W