

MOTOR INSURANCE CLAIM FORM 汽車保險索償申請表

(Please complete in block letters 請用正楷填寫)

MAKING A CLAIM 索償須知

- Please **READ** your policy and relevant documents to check if your claim is covered under the policy terms and conditions.
 請查閱保單細則及有關文件，確保該項索償已納入為承保範圍之內。
- Please **SUBMIT** a completed claim form, together with original copies of all relevant documents supporting your claim, to Claims Div., RSA at 32/F., Dorset House, Taikoo Place, 979 King's Road, Quarry Bay, Hong Kong.
 請將填妥的索償表格連同有關證明文件之正本，寄回香港鰂魚涌英皇道979號太古坊多盛大廈32樓RSA索償管理部收。

Policy No. 保單號碼		Period of Insurance 保險期	From 由	To 至
Insured 受保人	Name 姓名	Telephone No. 電話號碼		
	Address 地址			
	Occupation 職業			
Insured Vehicle 受保車輛	Registration No. 車牌號碼	Make & Model 款式及型號		
	Year of Manufacture 製造年份	Cubic Capacity 汽缸容量		
	Engine No. 引擎號碼	Chassis No. 底盤號碼		
	Color 顏色	Date of First Registration 首次登記日期		
	Type of Body 車型			

FOR TRAFFIC ACCIDENT 適合於交通意外之用					
Use of Insured Vehicle at the time of accident 發生意外時受保汽車作何用途	a) Was the vehicle being used with Insured's knowledge & consent? 該車是否獲得受保人認許下使用		Yes / No 是 否		
	b) Circle exact purpose for which the vehicle was being used 圈出意外發生時該車作何用途 Pleasure purpose / Domestic use / Commercial / Hired and/or rewards / Motor trade / Others, please state 郊外耍樂 自用 商業用途 出租或報酬 試車 其它，請說明 _____				
	c) Details of passenger(s) 乘客詳情:				
	1) Name 姓名		2) Telephone No. 電話號碼		
3) Relationship with the driver: colleagues / friends / relatives / others, please state 和駕駛者之關係 同事 朋友 親戚 其它，請說明 _____					
Driver 駕駛者 <small>Please submit a copy of the driver's driving license & HKID card 請附上駕駛者之駕駛執照及身份證副本</small>	Name 姓名		Telephone No. 電話號碼		
	HKID Card No. 身份證號碼		Date of Birth 出生日期		
	Occupation 職業		Current Period of License: from 駕駛執照有效期間 由 至		
	Address 地址				

	Driving Experience State 駕駛經驗:		
	1) length of driving experience 有若干年駕駛經驗 _____		
	2) any accident in the past & details 過去曾否發生意外事件，列出詳情 _____		
	3) any conviction or motoring offences & details 過去曾否有交通控訴，列出詳情 _____		
	4) any physical defects & details 駕駛者身體有否任何缺陷，請列出詳情 _____		
5) any car owned & with whom it is insured 駕駛者有否車輛向其他公司投保 _____			
Witness 見證人	Name 姓名 _____		Telephone No. 電話號碼 _____
	Address 地址 _____		
Accident 肇事詳情	Date 日期 _____	Time 時間 _____	Speed of Vehicle 駕駛速度 _____
	Place 地點 _____		
	Description of accident 肇事情形 _____		

Sketch: 肇事草圖			

After the Accident 肇事後	1) Whether the vehicle has been remanded and / or examined by the police? 警方有否要求所承保之車輛還押及 / 或檢查 If yes, what is the result? 如有，結果如何? _____		Yes / No 有 否
	2) Whether the driver has been asked to perform any alcohol test? 警方有否要求駕駛者測試酒精含量 If yes – what is the result and pass a copy of that record to complete our file. 如有 – 結果如何及傳遞測試結果副本以作記錄 _____		Yes / No 有 否
	3) Whether any police prosecution will be / has been taken against the owner and / or driver? 警方有否提出檢控車主及 / 或駕駛者?		Yes 有 / No 否
Report to Police 報告警方	Date of report 報告日期	Case No. 案件號碼	
	Which Police Station 警署地區		
Particulars of Bodily Injury / Deceased 受傷 / 死亡詳情	Name 姓名	Age 年齡	
	Address 地址		
	Nature & Extent of Injury 受傷特徵及程度		
	In Own Vehicle 在自己車內	Owner / Driver / Passenger / Employee 車主 駕駛者 乘客 僱員	
	In Third Party Vehicle: 在第三者車內	Owner / Driver / Passenger or Pedestrian 車主 駕駛者 乘客 或 途人	
Particulars of Third Party Vehicle 第三者汽車詳情	Name 姓名	Vehicle Registration No. 車牌號碼	
	Address 地址		
	Details of Third Party Insurers 第三者汽車承保之保險公司		
Particulars of Third Party Properties 第三者財物詳情	Damaged Details 損壞情況		

FOR THEFT OF MOTOR VEHICLE 適合於車輛被盜之用			
Circumstances of the Theft 失竊情況	Date & Time 日期及時間 _____	Place 地點 _____	
	Please state the name and address of the management office for the Car Park (if applicable). Whether you own the car park or hire it on a monthly basis? 請陳述停車場管理處的名稱及地址(如有)。你是否擁有該失車的車位或以月租形式使用?		
	Who had handled your car keys up to three months before the theft? 在失竊前三個月，誰人持有失車之鑰匙?		
	Did you have any duplicate keys made? If so, who kept these? 你是否有失車的後備鑰匙? 如有，誰人保管它?		
	What security devices were activated at time of theft, i.e. alarm system, engine immobilizer, steering wheel brace or others? 在失竊時車內有甚麼防盜裝置，如防盜系統、引擎停止器、駕駛軚盤鎖或其它?		
	Has your car be driven to Mainland China? If so, where? 你曾否駕駛該失車前往中國大陸? 如有，曾前往何處?		
	Any other details or suspicions? 任何其它詳情及可疑之處?		

The Particulars of Police Report 有關報案詳情	Did Police attend, or take particulars? 警方有否到達失車現場或掌握任何資料?	
	The name & address of police station concerned 有關報案警署之名稱及地點	
	The Police Report No. 警署報案號碼	The Policeman Reference No. 警員編號
The Particulars of Your Interests 有關你的車輛財務狀況	The name & address of Hire Purchase Finance Co. concerned 有關財務公司的名稱及地點	
	How much of the loan is left under the Hire Purchase Installments 在財務公司所餘下的分期借貸	
	When is the due date for the next installment? 下一次分期還款的日期	

In addition, please furnish us with the following documents 另外，請提供以下的文件：

1. The attached "Authorisation Letter" duly signed in order that we may obtain your statement made to the police concerned
簽署所附上的授權文件以獲取你在警署所錄取的口供。
2. Certificate of Insurance of the theft vehicle concerned 有關失車的第三者保險證明。
3. A copy of the Vehicle Registration Document (both sides) 失車的牌照副本(底面部份)。

Declaration聲明

I declare to the best of my knowledge and belief that the information given is true in every respect. I agree that any concealment or incorrect statement in connection with this claim may result in prosecution and the policy shall become void. Further, I need to advise the Insurer(s) immediately if and when the vehicle is recovered.

本人謹此聲明，根據本人所知及所信，本索償表格上填報之資料均實屬無訛。本人並同意，任何蓄意欺騙或隱瞞將構成法律責任並導致保單失效。此外，若失車被尋獲時本人需立刻通知保險公司尋獲之詳情。

Date: _____
日期 _____

Driver's Signature: _____
駕駛者簽署 _____

Date: _____
日期 _____

Insured's Signature: _____
受保人簽署 _____

Note: To avoid any delay in the administration of your claim, it is imperative that full details of the case are given.

注意：詳細填報索償個案詳情可避免延誤處理你的索償申請。

All communications relating to the accident should not be answered & should be **immediately** forwarded to us.

有關意外的任何函件，請勿回覆，並請盡快交給本公司以便採取適當行動。

Notice of Personal Information Collection 個人資料收集聲明

Any person from whom Royal & Sun Alliance Insurance plc ("the Company") has collected personal information shall have the right to enquire the purpose of using the information, the right of access to and the right to request correction of the personal information concerning themselves. Such request can be made to the Compliance Officer of the Company via, mail to 32/F., Dorset House, Taikoo Place, 979 King's Road, Quarry Bay, Hong Kong, or fax to +852 2968 5111, or email to hk_compliance@hk.rsagroup.com.

任何人士若曾經提供個人資料給皇家太陽聯合保險有限公司(「本公司」)，均可查詢其資料用途、查閱及更改有關資料。有關查詢及申請可循下列途徑向本公司之條例事務主任提出：郵寄至香港鰂魚涌英皇道979號太古坊多盛大廈32樓，或傳真至+852 2968 5111，或電郵至 hk_compliance@hk.rsagroup.com。

TO: THE OFFICER-IN-CHARGE
HONG KONG POLICE FORCE

致: 香港警察

Our Claim No. _____

檔案編號 _____

Authorization

授權書

Traffic Accident on _____

意外日期

Involving Vehicle No. _____

肇事車輛

I hereby authorize any Police Station to disclose to Royal & Sun Alliance Insurance plc &/or its authorized loss adjuster/surveyor, any and all information including a copy of my statement concerning the above occurrence for the purpose of assessment of an insurance claim. A photocopy of this authorization shall be as valid as the original.

I note that the information may be transferred to any related person/organization for the purpose of assessment of claim &/or data verification.

I also agree to provide a copy of my I.D. Card for verification.

本人茲授權任何警局披露任何一切有關上述事件的資料包括本人的口供副本予皇家太陽聯合保險有限公司及/或其委托之公証行，以便評估本人的保險索償。本授權書的影印本與正本同樣有效。

本人明白該資料可能轉予任可有關人士/機構以達到評估索償及/或資料核實之目的。

本人同意提供身份証副本以作核對之用。

Driver's Signature _____

司機簽名

Name of Driver _____

司機姓名

Police Report No. _____

警方檔案編號

Date _____

日期