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Claims Service Hotline

理賠服務熱線

(852) 2867 8555

Direct Fax

直線傳真

(852) 2530 0481

旅遊保險索償表格 TRAVEL INSURANCE CLAIM FORM

詳細填報申請賠償表格上每一項目可避免延誤處理台端之賠償事宜
To avoid any delay in the administration of your claim, it is imperative that each question on this claim form should be fully answered.

請填妥此索償表格上之所有資料。倘若表格不敷應用，請另加紙張填寫。
Please complete this claim form in full. If space provided for your answers is insufficient, please continue on a separate sheet.

此表格並不代表本公司會承認任何責任。
The issue of this claim form is not an admission of liability on the part of the Company.

保單 / 保險證書編號

Policy / Certificate number _____

索償編號

Claim number _____

(本欄由保險公司填寫 For office use only)

投保人資料 INSURED DETAILS (請於適當的地方加上 號 Please as appropriate)

投保人姓名 Name of Insured 先生 女士 太太 公司 _____

通訊地址 Correspondence address _____

日間聯絡電話及電郵地址 Contact phone number (Day-time) & Email address _____

一般事項 GENERAL INFORMATION

事發日期及時間 Date and time of incident or loss _____

事發地點 Place of incident or loss _____

閣下有否向警方或其他機構報告失事情況? Have the police or other authorities been informed? 有 沒有

如選擇「有」，請提供 (a) 報案警署或機構 name of the police station or authority _____

If Yes, please provide (b) 報案日期及時間 time and date _____

(c) 警方或該機構之檔案編號 police or authority reference number _____

注意: 請提供警方 / 航空公司 / 該機構之有關報告的**正本**
N.B. Please provide **ORIGINAL** written report from police, airline, or other authorities as relevant

閣下損失之財物是否同時受其他保險保障? Is there any other insurance covering the loss/damage? 是 否

如選擇「是」，請提供 (a) 保險公司名稱 name of the insurance company _____

(b) 有關之保單號碼 relevant policy number _____

(c) 投保金額 (如適用) amount insured (if applicable) _____

(d) 會否向該公司提出索償? whether claim will be submitted to them 是 否

閣下是否蒙受過同樣性質的損失? Have you ever sustained other losses of similar nature? 是 否

如選擇「是」，請提供詳細資料。 If Yes, please provide details _____

事發時的見證人 Witness of the incident or loss _____

詳細事項 SECTION(S) SPECIFIC INFORMATION

請在空格內填上 以列明需要賠償的項目。並填妥以下資料及連同有關文件一并呈上。
Please advise which section(s) your claim is applicable by ticking the appropriate box. You are reminded to answer all the questions asked and submit to us all supporting documents.

1. 醫療費用 Medical Expenses 或 人身意外 Personal Accident

敘述受傷或疾病之性質及程度 Describe the nature and extent of injuries or sickness _____

如涉及疾病，閣下是否就有關疾病在旅遊前接受過其他醫生的治療? If sickness is involved, did you receive treatment for this sickness from other doctor before this trip? 是 否

如選擇「是」，請提供醫生的詳細資料。 If Yes, please provide details of the doctor involved _____

如涉及意外，請敘述意外發生經過。 If accident is involved, please describe how the accident happened _____

請註明索償金額 Amount to be claimed? _____

注意: 請提供所有醫療費用收據的**正本**及所有有關醫療報告的副本。
N.B. Please provide all **ORIGINAL** medical receipts, copy of all relevant medical reports

2. 行李及個人財物 Baggage and Personal Effects 或 行李延誤 Baggage Delay 或 遺失現金及旅遊證件 Personal Money and Travel Documents

請敘述事發情況 Describe how the incident happened _____

該財物是否由閣下全權擁有? Are you the sole owner of the property? 是 否

如選擇「否」，請提供詳細資料。 If No, please provide details _____

閣下是否認為任何人必須對事件或損失負責？

Can you identify any parties who may be responsible for the incident or loss?

是 否
Yes No

如選擇「是」，請註明其姓名及地址。

If Yes, please provide particulars _____

財物損失 / 損壞或緊急物品購買詳情

Details of property lost or damaged or emergency purchased

物品之詳細資料 (包括牌子及產品號碼) Full description of articles (including the brand name & model number)	購買日期 Date of purchase	出售物品之商號名稱及地址 Name and address of the vendor	購買價錢 Purchase price	索償金額 Amount claimed
總索償金額 Total Amount Claimed				

注意: 請提供以上物品的購買收據、保用證(如適用), 或重新購回物品收據之**正本**, 及索償的損壞物品相片之**正本**(如適用)。

N.B. Please provide **ORIGINAL** purchase receipts, warranties (if applicable), or replacement receipts of the articles described above. Please also provide **ORIGINAL** photo(s) showing the extent of damage to the property claimed (if applicable).

3. 個人責任 Personal Liability

請敘述事件發生情況

Describe how the incident happened _____

閣下認為是誰導致事件發生？

In your opinion, who cause this incident? _____

敘述有關人仕的詳細資料

Details of the other parties involved _____

請敘述受傷或物件損壞之性質及程度

Nature and extent of injuries or damages _____

注意: 請不要回覆及提供所有法庭傳票、告票或有關文件一并呈交給本公司跟進。

N.B. please pass onto us any correspondence, summons, writ in relation to the incident UNANSWERED

4. 旅程延誤、更改行程、行程誤點及超額訂票 Travel Delay, Trip Re-routing, Missed Journey & Overbooking

發生事件的原因

What is the cause of the incident? _____

請列明延誤的時間

For flight delay, please advise for how long have you been delayed? _____

注意: 請提供航空公司 / 旅遊公司 / 旅遊代理 / 酒店的書面確認副本及所有有關費用收據的**正本**。

N.B. please provide us copy of written confirmation from the airline(s) / transportation company(ies) / travel agent(s) / hotel(s) / the like and the **ORIGINAL** receipts of expenses incurred

5. 損失訂金或取消旅程 Loss of Deposit or Cancellation of Trip

或

提早結束旅程 Trip Curtailment

事件發生的原因

What is the cause of the incident? _____

當閣下決定取消行程後, 有否即時通知航空公司 / 旅遊公司 / 旅遊代理 / 酒店? (如適用)

Where applicable, please confirm if you have notified the airline(s) / transportation company(ies) / travel agent(s) / hotel(s) / the like immediately once you found it necessary to cancel the trip

有 沒有
Yes No

如選擇「沒有」, 請列明原因。

If not, please provide reason _____

航空公司 / 旅遊公司 / 旅遊代理 / 酒店是否已退回有關的訂金或部份待用的金額? (如適用)

Where applicable, please confirm if the airline(s) / transportation company(ies) / travel agent(s) / hotel(s) / the like refund you any deposit / unused portion of expenses incurred by you

是 否
Yes No

如選擇「是」, 請列明已退回的金額。

If Yes, please advise the amount refunded _____

注意: 請提供航空公司 / 旅遊公司 / 旅遊代理 / 酒店的書面確認副本及所有有關費用收據的**正本**。

N.B. please provide us copy of written confirmation from the airline(s) / transportation company(ies) / travel agent(s) / hotel(s) / the like and the **ORIGINAL** receipts of expenses incurred

6. 家居財物保障 Home Care Benefit

事件發生的原因

What is the cause of the incident? _____

損失或損壞財物詳情

Details of property lost or damaged

物品之詳細資料 (包括牌子及產品號碼) Full description of articles (including the brand name & model number)	購買日期 Date of purchase	出售物品之商號名稱及地址 Name and address of the vendor	購買價錢 Purchase price	索償金額 Amount claimed
總索償金額 Total Amount Claimed				

注意: 請提供以上物品的購買收據、保用證(如適用)或重新購回物品收據之**正本**, 及索償的損壞物品相片之**正本**(如適用)。

N.B. Please provide **ORIGINAL** repair invoice, purchase receipts, warranties (if applicable), or replacement receipts of the articles described above. Please also provide **ORIGINAL** photo(s) showing the extent of damage to the property claimed (if applicable).

聲明及授權書 Declaration and Authorization

本人/我們聲明此表格內填報的資料, 就本人/我們所知所信, 全部正確無訛, 並無任何保留; 本人/我們同意如為處理有關本索償事宜, 安盛保險有限公司可使用所收集及持有關於我/我們/受保人的個人資料(包括在此索償表格內或其他地方之資料)或將該等資料給予有關之人士或機構(包括在香港境內或境外之再保公司、賠償調查公司、保險業協會/聯會及其他提供保險業有關服務之公司等)。

本人/我們並授權持有本人/我們的任何記錄或資料之人士或團體, 向安盛保險有限公司或其代理人, 提供與本索償事宜或與保險公司的追償權有關之記錄或資料。此授權書之影印本將與正本具有同等效力。

I/We hereby declare that to the best of my/our knowledge and belief the above statement and particulars contained herein are in all respects true and complete and are made without reservation of any kind. I/We agree that any of my/our/the Insured's personal information collected or held by AXA General Insurance Hong Kong Limited (whether contained in this claim form or otherwise obtained) is provided and may be held, used and disclosed by the Company to individuals/organization associated with the Company or any selected third party (within or outside Hong Kong, including reinsurance and claim investigation companies and industry associations/federations and other service provider providing services relevant to insurance business) for the purpose of processing this claim.

I/We further authorize individual or entity holding any records (including any statements taken) or knowledge of me/us which is/are relevant to the settling of this claim and/or the Insurer's rights of recovery thereunder to furnish such records or knowledge to AXA General Insurance Hong Kong Limited or its authorized representatives. A photostat of this authorization shall be considered as effective and valid as the original.

日期

Date _____

投保人簽署

Insured's signature _____