



Sun Flower Insurance Brokers Limited
Placing through Sun Flower Insurance Agency Limited
 Room 1105-08, Hing Yip Commercial Centre,
 282 Des Voeux Road Central, Hong Kong
 Tel: (852) 2521-1881 Fax: (852) 2521-1919
 Web: www.sunflowerVIP.com www.sunflowerMPF.com



Motor Insurance Claims History Request Form

汽車保險索償紀錄申請表

You may submit the completed request form to us via email or fax. 您可透過電郵或傳真遞交已填妥的申請表格。

Email 電郵地址: motor.ch@hk.zurich.com Fax 傳真: +852 2105 3430

Requester 申請人:		<input type="checkbox"/> Insured 受保人	<input type="checkbox"/> Broker 經紀
Name of requester : 申請人姓名:			
Requester's contact number : 申請人的聯繫電話:			
Name of insured person : (Not required to complete if same as requester) 受保人姓名: (如與申請人相同則不用填寫)			
Policy number : 保單號碼:			
Registration number : 車牌號碼:			
Please specify the collection method: 請註明領取方法:	<input type="checkbox"/> By email 電郵		
	Email address : 電郵地址: _____		
	<input type="checkbox"/> By post 郵寄		
Address (If different from the address on the policy) : 地址 (如與保單地址不同): _____ _____			
<input type="checkbox"/> By fax 傳真			
Fax number : 傳真號碼: _____			
Signature of insured person 受保人簽署	Date 日期		

Zurich Insurance Company Ltd (a company incorporated in Switzerland)
 蘇黎世保險有限公司(於瑞士註冊成立之公司)
 25-26/F, One Island East, 18 Westlands Road, Island East, Hong Kong
 香港港島東華蘭路18號港島東中心25-26樓
 Telephone 電話: +852 2968 2288 Fax 傳真: +852 2968 0639 Website 網址: www.zurich.com.hk