

PROPERTY INSURANCE CLAIM FORM
財物保險索償申請表格



It is important that a complete answer be given to every question. If insufficient space is provided for your answers, please continue on a separate sheet.
請詳細填報表格上每一項問題。若填補資料的位置不足，可自備補充頁填寫。

POLICY NUMBER 保單號碼	NAME OF AGENT 保險代理人

TYPE OF POLICY 保單類別

- Property All Risks 財產全險 Contractors' All Risks 工程全險 Fire 火險
 Money 金錢險 Office / Business Package 辦公室/工商業綜合險 Others 其他：_____

INSURED 受保人

Name of Insured 受保人姓名 _____	Occupation/Business 職業/經營業務 _____	
Correspondence Address 通訊地址 _____		
Tel No. 電話號碼 _____	Fax No. 傳真號碼 _____	E-mail Address 電郵地址 _____

CIRCUMSTANCES OF LOSS OR DAMAGE 損失或損毀情況

Date and time of incident
事故發生日期及時間 _____

Who discovered the incident
由誰人發現事件 _____

Place where incident occurred
發生事故之地點 _____

Description of incident and cause
事件之詳細經過及起因 _____

Was another person responsible for the loss or damage?
是次損失或損毀是否有其他人須要負上責任? Yes / No*
If "YES", please give details 若「是」，請提供資料 是 / 否*

Name 姓名 _____ Address 地址 _____

FOR THEFT. PLEASE ALSO FILL IN BELOW QUESTIONS.

如屬盜竊，請提供以下資料。

How was the premises entered and exited?
竊匪如何進出事發地點? _____

Were there any visible marks of forcible entry to or exit from the insured premises?
是否有任何被人強行進入或離開之可見痕跡? Yes / No*
If "YES", please describe these marks in details and provide with photos 若「是」，請詳細描述和提供照片。 是 / 否*

Additional questions for loss of Money claims: 金錢損失索償，請提供以下資料:

Was the money kept in the safe or locked drawer?
損失之金錢是否存放在保險箱或上鎖的抽屜裡? Yes / No*
If "NO", please state where the money was kept 若「否」，請列明存放位置 _____ 是 / 否*

*Please delete whichever is inapplicable 請刪去不適用者

CL11 08/13



DETAILS OF THE PROPERTY MANAGEMENT OFFICE / POLICE / OTHER AUTHORITY**物業管理處 / 警方 / 其他有關機構資料**

If the case was reported to the property management office / police / other authority, please provide the following information.
 若事件已報告物業管理處 / 警方 / 其他有關機構，請填寫下列資料。

Name & address of the property management office / police station / other authority reported to:

物業管理處 / 報案警署 / 其他有關機構名稱和地址:

Name 名稱 _____

Address 地址 _____

Report / Reference No.

報案/檔案號碼 _____

Date of Report

報案日期 _____

N.B. The Police must be informed immediately if the property has been lost, stolen or maliciously damaged

備註: 若財物遺失, 被竊或惡意破壞, 請立刻報警。

DETAILS OF PROPERTY LOST OR DAMAGED 損失或損壞財物詳情

Please attach all the supporting documents for the lost or damaged items 請附上有關損失或損毀項目之證明文件

Full description of items (including the brand name, model and serial no.) 財物的詳細資料 (包括牌子, 型號及產品編號)	Date of purchase 購買日期	Purchase price 購買價值	Amount claimed (HK\$) 索償金額	✓ If documents attached 如附上相關文件, 請 ✓
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
Total claimable amount 總索償金額				



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 Underwriting Agent of FWD General Ins. Co. Ltd.
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GENERAL QUESTIONS 一般事項

Are you the sole owner of the damaged/lost property? 你是否損壞/損失財物的唯一物主?	Yes / No* 是 / 否*
If "NO", please state the name(s) and address(es) of the other owner(s) including the hire-purchase company 若「否」, 請提供其他物主的姓名及地址, 包括租購信貸公司之資料	

Are you responsible by agreement for the property? 有否因合約而須承擔該財物之責任?	Yes / No* 是 / 否*
If "YES", please forward a copy of the agreement 若「是」, 請提供該合約副本以茲證明。	
Is there any other insurances covering the loss or damage? If "YES", please give details 是否有其他保險保障該財物? 若「是」, 請詳述有關承保公司之資料	Yes / No* 是 / 否*
Name of Insurer 保險公司名稱 _____ Policy No. 保單號碼 _____	
Have you ever sustained other losses of similar nature? 你是否曾遭受同樣性質的損失?	Yes / No* 是 / 否*
If "YES", please give details 若「是」, 請詳述 _____	

*Please delete whichever is inapplicable 請刪去不適用者

DECLARATION 聲明

I/We declare that the above information is in all respect true and complete to the best of my/our knowledge and belief.

本人/吾等聲明, 本人/吾等所深知及確信, 上列資料均屬真確無訛。

In accordance with the provisions of the Personal Data (Privacy) Ordinance of Hong Kong (the "Ordinance"), by signing below, I/we consent that the personal information collected or held by FWD General Insurance Company Limited ("FWD") (whether contained in this Application or otherwise obtained) is provided and may be disclosed to individuals or organisations within or outside of Hong Kong in accordance with the terms set out in the Personal Information Collection Statement below and the provisions of the Ordinance.

Moreover, I/we hereby authorise FWD to obtain access to and/or to verify any of my/our data with the information collected by any association, federation or similar organisation of insurance companies that exists or is formed from time to time (the "Federation") from the insurance industry.

根據香港個人資料(私隱)條例(以下簡稱「條例」), 本人/吾等簽署如下, 同意富衛保險有限公司(以下簡稱「富衛」)按照載於下文收集個人資料聲明條款及條例的規定, 收集所得或持有之本人個人資料(該等資料可能在此表格提供或從其他途徑得到)可透露予本港或海外之個人或組織機構。

此外, 本人/吾等現授權富衛由現存或不時成立之任何保險公司的協會或聯會或類同組織(以下簡稱「聯會」)從保險業內收集的資料中查閱及/或核對本人/吾等之任何資料。

Personal Information Collection Statement

The information you provide to FWD is collected to enable FWD to carry on insurance business and may be used for the purpose of

- any insurance or financial related product or service or any alterations, variations, cancellation or renewal of such product or service;
- any claim or investigation or analysis of such claim;
- exercising any right of subrogation; and

may be transferred to:

- any related company or any other company carrying on insurance or reinsurance related business or an intermediary or a claims or investigation; or other service provider providing services relevant to insurance business for any of the above or related purposes;
- the Federation for any of the above or related purposes or to enable the Federation to carry out its regulatory functions or such other functions that may be assigned to the Federation from time to time and are reasonably required in the interest of the insurance industry or any member(s) of the Federation; and
- any members of the Federation by the Federation for any of the above or related purposes.

You have the right to obtain access to and to request correction of any personal information concerning yourself held by FWD. Requests for such access can be made in writing to the Data Privacy Officer at I/F, FWD Financial Centre, 308 Des Voeux Road Central, Hong Kong.

收集個人資料聲明

閣下提供的資料, 為富衛提供保險業務所需, 並可能使用於下列目的:

- 任何與保險或財務有關的產品或服務, 或該等產品或服務的任何更改、變更、取消或續期;
- 任何索償、或該等索償的調查或分析;
- 行使任何代位權;

及可能移轉予:

- 任何有關的公司, 或任何其他從事與保險或再保險業務有關的公司, 或與保險業務有關的中介人或索償或調查或其他服務提供者, 以達到任何上述或有關目的;
- 聯會, 以達到任何上述或有關目的, 或以便聯會執行其監管職能, 或其他基於保險業或任何聯會會員的利益而不時在合理要求下賦予聯會的職能; 及
- 或透過聯會移轉予任何聯會的會員, 以達到任何上述或有關目的。

閣下有權查閱及要求更正由富衛持有有關閣下的個人資料, 如有此項要求, 可書面向香港中環德輔道中308號富衛金融中心1樓資料私隱主任提出。

Signature of Insured (with Company Chop, if applicable)
受保人簽名 (及公司蓋章, 如適用)

H.K.I.D. Card No. / B.R. No.
香港身份證號碼/商業登記號碼

Date
日期

CLAIM PROCEDURES 索償程序

1. Report the accident to the agent, brokers or our Claims Department immediately.
意外發生後，請盡快通知保險代理，經紀或本公司賠償部。
2. Take all practical steps to mitigate the loss/damage.
採取一切可行的步驟，以減少損失/損毀。
3. Report to police immediately in case of theft, burglary, robbery or malicious damage.
如盜竊、爆竊、搶劫或惡意破壞，請立即向警方報案。
4. Take photos of the accident scene and damaged properties.
拍攝事故現場和損毀財產之照片。
5. Do not dispose of the damaged properties.
不要丟棄或自行處理受損之財物。
6. Do not commence any repair work without the Company's prior written consent.
如未取得本公司的書面同意之前，請不要開始任何維修工程。
7. Cooperate and assist the adjuster when called upon.
當公證行派員檢查損毀財物，請配合及協助。

CLAIM DOCUMENTS 索償所需文件

1. Previous Decoration Invoice / Purchase Invoice / Official Receipt of any property to be claimed.
索償財物於事發前的裝修發票 / 購買發票 / 單據。
2. Incident report from the building management or authority showing the date, circumstances of Incident and its cause of loss or damage.
管業處或有關當局之事件報告以證明有關財物之遺失或損毀的事發日期、事件經過及其成因。
3. Photos showing the extent of damage to any property to be claimed.
有關索償財物之相片以顯示損毀程度。
4. Original Repair or Replacement Quotation / Invoice / Receipt.
維修或重置報價單 / 發票 / 收據正本。
5. Original Police Loss Memo / Copy of Police Statement.
警方報告正本 / 警方所錄的口供副本。

NOTES 注意事項

1. All questions must be answered. If not applicable, write "N/A". 所有問題必須作答。如不適用者，請填上「不適用」。
2. By submission of this form the Company makes no admission of liability. 呈上此表格非視為本公司承認有關責任。
3. This Claim Form must be submitted immediately, even if any of the claim documents is not readily available. 縱使未能即時提供任何索償文件，但仍需要立即遞交此索償申請表。
4. Claims will not be processed unless declaration is signed by the claimant. 本公司只接受已簽署之索償申請表。



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