

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： Insured 受保人 Broker 經紀

1. Policy information

Requester name (If different from policyholder)
申請人姓名

Requester 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 no.
保單號碼

Registration number
車牌號碼

Please specify the collection method
請註明領取方法

By email
電郵

By post
郵寄

By fax
傳真

Correspondence address
通訊地址

Flat/Room*
室 / 單位*

Floor
樓

Block
座

Building
大廈

Estate name/No. & name of street/Lot no.*
屋苑名稱 / 街名及門牌 / 地段*

District
地區

HK/KLN/NT*
香港 / 九龍 / 新界*

Email address
電郵地址

Fax no.
傳真

2. Notice to customers relating to the Personal Data (Privacy) Ordinance ("Ordinance")

有關個人資料 (私隱) 條例 (「私隱條例」) 的客戶通知

The personal information of customers (include policyholders, insured persons, beneficiaries, premium payors, trustees, policy assignees and claimants) collected or held by **Zurich Insurance Company Ltd** ("Company") may be used by the Company for the purposes **necessary** in providing services to the customers (otherwise the Company is unable to provide services to customers who fail to provide the required information).

由蘇黎世保險有限公司 (「本公司」) 收集或持有的客戶 (包括保單持有人、受保人、受益人、保費付款人、信託人、保單受讓人及索償人) 個人資料, 均可供本公司使用作為向客戶提供服務而必須的用途 (否則本公司將無法為未能提供所需資料的客戶提供服務)。

Please read carefully the details of the Company's privacy policy which is made available on our website at www.zurich.com.hk/pics or by scanning the QR code. You may also contact our Customer Care Center at 2968 2288 or insurance intermediaries for enquires.

本公司之私隱政策詳載於 www.zurich.com.hk/pics 或可透過掃描QR碼細閱。您亦可致電2968 2288與我們的客戶服務中心聯絡又或向保險中介人查詢。



2. Notice to customers relating to the Personal Data (Privacy) Ordinance (“Ordinance”) (continued) 有關個人資料 (私隱) 條例 (「私隱條例」) 的客戶通知 (續)

Consent for marketing-related purposes - Voluntary: 就市場推廣相關用途之同意 – 自願性：

Certain personal information of policyholders and insured persons collected or held by the Company, in particular, names, contact information, age, gender, identity document reference, marital status, policy information, claim information, and medical history may be used by the Company, **only upon having such policyholders’ or insured persons’ consent or indication of no objection**, for providing marketing materials and conduct direct marketing activities in relation to insurance and/or financial products and services of the Zurich Insurance Group and/or other financial services providers, and/or other related services of business partners, with whom the Company maintains business referral or other arrangements.

由本公司收集或持有的保單持有人及受保人的某些個人資料，特別是姓名、聯絡資料、年齡、性別、身份證明文件資料、婚姻狀況、保單資料、索償資料、及醫療紀錄等，**於獲該保單持有人或受保人同意或作不反對指示後**，均可供本公司使用作為蘇黎世保險集團及 / 或與本公司維持業務引薦關係或其他安排之其他金融服務供應商的保險及 / 或金融產品及服務，及 / 或其他商業合作伙伴之相關服務，提供市場推廣資料及進行直接市場推廣活動。

The Company may provide certain personal information, in particular, name, contact information, age, gender and policy information of a policyholder and an insured person, **only upon having such policyholder’s and insured person’s written consent**, to the following parties, within or outside of Hong Kong, for the above **marketing-related purposes**:

- (1) companies within the Zurich Insurance Group;
- (2) other banking/financial institutions, commercial or charitable organizations with whom the Company maintains business referral or other arrangements;
- (3) third party marketing service providers and insurance intermediaries.

於獲保單持有人及受保人書面同意後，本公司方可就上述**市場推廣相關用途**，向以下於香港境內或境外的人士提供其某些個人資料，特別是姓名、聯絡資料、年齡、性別、保單持有人及受保人的保單資料等：

- (1) 蘇黎世保險集團成員公司；
- (2) 與本公司維持業務引薦關係或其他安排的其他銀行 / 金融機構、商業或慈善組織；
- (3) 第三方市場推廣服務供應商及保險中介人。

I/We understand that I/we can withdraw any consent provided for marketing-related purposes anytime by notice to the Company.
本人 / 我們明白可隨時通知 貴公司以撤回任何就市場推廣相關用途所給予之同意。

I/We wish to opt out of the above marketing-related purposes.
本人 / 我們欲選擇退出上列之市場推廣相關用途。

Signature of insured person
受保人簽署

Date
日期

Day日 Month月 Year年
D D M M Y Y Y Y