

Travel insurance claim form (Hong Kong Baptist University) 旅遊保險索償申請表(香港浸會大學)

Please ✓ the appropriate box and * delete where inappropriate. 請 ✓ 適用方格及於*號刪去不適用者。 Please use block letter if you fill in the form in English. 如用英文填寫資料.請使用正階書寫。

For staff and student 適用於教職員及學生

Claims submission 申請索償:

| Kong Baptist University | im form and submit it together with orig within 30 days following the loss. Other 夏妥本表格連同醫療單據正本及一切有關 | wise, it may prejudice you | ur claims under the Policy. | _ |
|------------------------------------|--|--------------------------------|--|-----------------------------|
| 1. Personal information | ation 個人資料 | | Claim No. (if any 索償編號 (如有) | y) |
| All fields are mandatory. | 所有項目必須填報。 | | | |
| Policy no. 保單號碼 TTT000 1 | 1125ZC | Policyholder 保單持有人 | Hong Kong Baptist L 香港浸會大學 | Jniversity |
| New submission 新申請 | Follow-up submission 補交申請 | | ow up submission – Medical exp 交 – 醫療費用索償 | pense daim |
| Submission date 申請日期 | Day日 Month月 Year年 | Recovery s 康復情況 | tatus Fully recovered 已經康復 | Not recovered 仍未康復 |
| Medical expenses claim 醫療費用索償 | | | | |
| Name of insured person 受保人姓名 | | | Passport no. of insured (first fou 身份證 / 護照號碼(首四位號碼 | |
| Type of insured 受保人類別 | | aff/Student ID no. 員 / 學生編號 | Departm 部門 / ^馬 | nent/Faculty 멸系 |
| Date of birth | onth月 Year年 | Position 職位 | | |
| Mobile phone no. 流動電話號碼 | | Email addre 電郵地址 | ss | |
| Hong Kong | Flat/Room Floor | Block | Building | |
| Correspondence address 香港通訊地址 | | 垒 | 大廈 | |
| | Estate name/No. & name of street/Lot 屋苑名稱 / 街名及門牌 / 地段 | i no. | District 地區 | HK/KLN/NT* 香港 / 九龍 / 新界* |
| Accident date 意外日期 | Day日 Month月 Year年 | Details of ac 意外發生經濟 | | |
| Accident location 音外發生抽點 | | | | |

| 2. General information 一般資料 | |
|--|--|
| +10 HDB / + 7 HU 28 / | Year年 to Day日 Month月 Year年 |
| 旅程期間(由香港出發) 由 日 | |
| Nature of trip 旅遊性質 Business/Study (please provide certificate is 公幹 / 學業 (請提供由香港浸會大學發出的 | ssued by HKBU) 書面證明) Personal 私人 Both 兩者 |
| Travel Destination 旅程目的地 | |
| Are you making any other insurance claim as a result of this incident? 您是否正就此次事件向其他保險公司索償? | ☐ Yes ☐ No 是 否 |
| If "Yes", please provide the name of insurance company and policy no. 如「是」·請提供該保險公司名稱及保單號碼 | |
| 3. Claim items 索償項目 | |
| Type of claims Medical expenses (including sickness, injury, burn, 索償類別 醫療費用 (包括疾病、傷害、燒傷;自負額:150港 | |
| 3.1 Medical expenses/ Personal accident 醫療費用 / 個人意外 | |
| | accident or symptom first appeared Day日 Month月 Year年 明或首次出現症狀日期 Image: Company of the property |
| For injury claims, please provide the accident description. For illness cla 如申請受傷素償,請詳述意外發生經過。如申請疾病素償,請詳述有關症 | • |
| Overseas medical expenses amount (Please specify the currency) 外地醫療費用金額(請註明貨幣) | Hong Kong medical expenses amount 香港醫療費用金額 |
| Diagnosis | |
| 診斷結果 | |
| - | , please provide the following details Yes No |
| 診斷結果 Do you/Will you receive any follow up treatment(s) in Hong Kong? If Yes | |
| 診斷結果 Do you/Will you receive any follow up treatment(s) in Hong Kong? If Yes 您是否需要在香港繼續治療或應診?如是,請提供以下資料。 Estimated recovery date | 是 舌 Follow-up medical expenses in Hong Kong (if any) (HKD) 香港繼續治療 / 應診的醫療費用金額(如有)(港元) |
| Do you/Will you receive any follow up treatment(s) in Hong Kong? If Yes 您是否需要在香港繼續治療或應診?如是·請提供以下資料。 Estimated recovery date 預計康復日期 Recovery status Fully recovered, no need for follow up treatment | 是 Follow-up medical expenses in Hong Kong (if any) (HKD) 香港繼續治療 / 應診的醫療費用金額(如有)(港元) Not recovered, will have follow up treatment (compensation will be proceeded after fully recovered) |
| Do you/Will you receive any follow up treatment(s) in Hong Kong? If Yes 您是否需要在香港繼續治療或應診?如是·請提供以下資料。 Estimated recovery date 預計康復日期 Recovery status | 是 Follow-up medical expenses in Hong Kong (if any) (HKD) 香港繼續治療 / 應診的醫療費用金額(如有)(港元) Not recovered, will have follow up treatment (compensation will be proceeded after fully recovered) 仍未康復・須繼續應診(於完全康復後會進行賠償手續處理) itional documents from insured person via Finance Office of HKBU. |
| Do you/Will you receive any follow up treatment(s) in Hong Kong? If Yes 您是否需要在香港繼續治療或應診?如是·請提供以下資料。 Estimated recovery date 預計康復日期 Recovery status | 是 Follow-up medical expenses in Hong Kong (if any) (HKD) 香港繼續治療 / 應診的醫療費用金額(如有)(港元) Not recovered, will have follow up treatment (compensation will be proceeded after fully recovered) 仍未康復・須繼續應診(於完全康復後會進行賠償手續處理) itional documents from insured person via Finance Office of HKBU. 提供額外相關素價文件。 |
| Do you/Will you receive any follow up treatment(s) in Hong Kong? If Yes 您是否需要在香港繼續治療或應診?如是·請提供以下資料。 Estimated recovery date 預計康復日期 Recovery status Fully recovered, no need for follow up treatment 已經康復·不須應診 Basic supporting documents 基本證明文件 Please ✓ the provided document(s), our company may request for add 請 ✓ 已提交的文件·本公司可能聯絡香港浸會大學財務處向受保人要求 Original/certified true copy of medical bills showing the medical experience. | 是 Follow-up medical expenses in Hong Kong (if any) (HKD) 香港繼續治療 / 應診的醫療費用金額(如有)(港元) Not recovered, will have follow up treatment (compensation will be proceeded after fully recovered) 仍未康復・須繼續應診(於完全康復後會進行賠償手續處理) itional documents from insured person via Finance Office of HKBU. 提供額外相關素償文件。 xpenses and diagnosis |
| Do you/Will you receive any follow up treatment(s) in Hong Kong? If Yes 您是否需要在香港繼續治療或應診?如是,請提供以下資料。 Estimated recovery date 預計康復日期 Recovery status Fully recovered, no need for follow up treatment 已經康復,不須應診 Basic supporting documents 基本證明文件 Please ✓ the provided document(s), our company may request for add 請 ✓ 已提交的文件,本公司可能聯絡香港浸會大學財務處向受保人要求 Original/certified true copy of medical bills showing the medical e 註明醫療費用、診斷結果之醫療單據正本 / 核實副本 Copy of medical report and referral letter for medical treatments of | 是 Follow-up medical expenses in Hong Kong (if any) (HKD) 香港繼續治療 / 應診的醫療費用金額(如有)(港元) Not recovered, will have follow up treatment (compensation will be proceeded after fully recovered) 仍未康復・須繼續應診(於完全康復後會進行賠償手續處理) itional documents from insured person via Finance Office of HKBU. 提供額外相關素償文件。 xpenses and diagnosis |
| Do you/Will you receive any follow up treatment(s) in Hong Kong? If Yes 您是否需要在香港繼續治療或應診?如是·請提供以下資料。 Estimated recovery date 預計康復日期 Recovery status Fully recovered, no need for follow up treatment | 是 Follow-up medical expenses in Hong Kong (if any) (HKD) 香港繼續治療 / 應診的醫療費用金額(如有)(港元) Not recovered, will have follow up treatment (compensation will be proceeded after fully recovered) 仍未康復・須繼續應診(於完全康復後會進行賠償手續處理) itional documents from insured person via Finance Office of HKBU. 提供額外相關素償文件。 xpenses and diagnosis |
| Do you/Will you receive any follow up treatment(s) in Hong Kong? If Yes 您是否需要在香港繼續治療或應診?如是,請提供以下資料。 Estimated recovery date 預計康復日期 Recovery status Fully recovered, no need for follow up treatment 已經康復,不須應診 Basic supporting documents 基本證明文件 Please ✓ the provided document(s), our company may request for add 請 ✓ 已提交的文件,本公司可能聯絡香港浸會大學財務處向受保人要求 Original/certified true copy of medical bills showing the medical e 註明醫療費用、診斷結果之醫療單據正本 / 核實副本 Copy of medical report and referral letter for medical treatments 企 醫療報告及專科治療、物理治療轉介信副本 Copy of letter of hospital admission and discharge summary 人院紙及出院紙副本 Copy of properties or incident report by local police | 是 Follow-up medical expenses in Hong Kong (if any) (HKD) 香港繼續治療 / 應診的醫療費用金額(如有)(港元) Not recovered, will have follow up treatment (compensation will be proceeded after fully recovered) 仍未康復・須繼續應診(於完全康復後會進行賠償手續處理) itional documents from insured person via Finance Office of HKBU. 提供額外相關素償文件。 xpenses and diagnosis |
| Do you/Will you receive any follow up treatment(s) in Hong Kong? If Yes 您是否需要在香港繼續治療或應診?如是,請提供以下資料。 Estimated recovery date 預計康復日期 Recovery status Fully recovered, no need for follow up treatment 已經康復,不須應診 Basic supporting documents 基本證明文件 Please / the provided document(s), our company may request for add 請 / 已提交的文件,本公司可能聯絡香港浸會大學財務處向受保人要求 Original/certified true copy of medical bills showing the medical e 註明醫療費用、診斷結果之醫療單據正本 / 核實副本 Copy of medical report and referral letter for medical treatments 企 醫療報告及專科治療、物理治療轉介信副本 Copy of letter of hospital admission and discharge summary 人院紙及出院紙副本 Copy of properties or incident report by local police 當地警方之財物 / 事件報告副本 Copy of medical report/forensics officer report | 是 Follow-up medical expenses in Hong Kong (if any) (HKD) 香港繼續治療 / 應診的醫療費用金額(如有)(港元) Not recovered, will have follow up treatment (compensation will be proceeded after fully recovered) 仍未康復・須繼續應診(於完全康復後會進行賠償手續處理) itional documents from insured person via Finance Office of HKBU. 提供額外相關索償文件。 xpenses and diagnosis conducted by specialists, physiotherapists |

| 3. Claim items (continued) 索償項目 (續) | | | | |
|--|--|---|---|---|
| ☑ 3.2 Loss of baggage/personal effects/money/travel document 行李 / 隨身財物 / 金錢 / 旅遊證件遺失 | | | | |
| Loss or damage items 遺失或損毀項目 | Personal belongings 個人物品 (Policy excess for the a | Money 現金 bove three items are HKD 200 | Travel document 旅行證件 individually自以上三項物品的自負 | 負額分別為200港元) |
| | Travel ticket 交通票據 | Replacement cost of tra 補發旅遊證件之費用 | vel document | |
| Place of loss/damage 遺失或損壞發生的地點 | | Date of loss/damage 遺失或損壞日期 | Day日 Month月 Year年 | |
| | | g. where the property was place 何及何時發現自己物品遺失等) | ed, and where, when and how the | loss was discovered) |
| Loss or damaged item na 遺失 / 損毀財物之名稱、 | • | Date of original purchase (Month, year) 原本購買日期(月·年) | Original purchasing price (Please specify the currency) 原本購買價值(請註明貨幣) | Repairing cost (Please specify the currency) 維修費(請註明貨幣) |
| | | | | |
| | | | | |
| | | | | |
| | reported to the local police? 也警方報失?如是·請提供以 | If Yes, please provide the follow 下資料。 | wing information. | Yes No 否 |
| Report no. 檔案編號 | | Date of report Day日 報失日期 | Month月 Year年 | |
| • You can add suppleme 如提供的位置不足,可 | entary paper if the provided s I另行加紙填寫。 | space is insufficient. | | |
| • The daims amount ma 如不能提供遺失物件的 | ay be affected if you cannot p D購買收據 / 損毀財物的維修賢 | provide the purchase receipt/qu 費報價單/事發詳情‧有關賠償 | otation for repairing the damaged 金額將會受影響。 | item/accident details. |
| | sider the market price and de r時,會考慮遺失 / 損毀財物的 | | tems when evaluate the claim am | ount. |
| If you have any object manufacturer compa | ion on the indemnity amount iny. Our company will follow ≳司會因應相片所顯示之損毀和 | , please provide your suitcase up your claim. | based on the extent of the damag repair quotation or non-repairal 對賠款金額有任何異議・請提供 行 | ble proof from the origin |
| Basic supporting docu | ments 基本證明文件 | | | |
| | | ay request for additional docume 務處向受保人要求提供額外相關 | ents from insured person via Fina 索償文件。 | nce Office of HKBU. |
| Loss of cash/travel dod | cument/travel ticket 遺失個。 | 人現金 / 旅遊證件 / 旅行票 | | |
| 當地警方報告(附事 | | | | |
| | extra accommodation fee/trav 引、補發遺失之證件 / 交通票指 | | lost documents or travel tickets or | receipts of credit card payment |
| | receipt or deposit record of fo 就紀錄副本(適用於遺失現金 | oreign currency (applicable to lo | oss of cash) | |

| 3. Claim items (continue | əd) 索償項目(續 |) | | | | |
|--|------------------------------|---|---------------------------|-----------------------------|---------------------|--|
| Damage of personal belongir | igs/baggage 損毀個人 | 人物品 / 行李箱 | | | | |
| Photographic showing the the damage(s) shown on t 顯示損毀物品程度的相片(| the photo(s) | .,, | | II indemnify your su | uitcase loss(es) | based on the extent of |
| Copy of repair quotation of this one further when deter 損毀物品之維修報價單或約 | ermining the indemnity | amount.) | | _ | | ompany will consider |
| Original/copy of the purch 損毀物品之購買收據/保用 | | nty certificate of the c | lamaged item | | | |
| Copy of damage report or 航空公司發出之損壞報告頭 | | the airline | | | | |
| Loss of personal belongings/ | baggage 遺失個人物 | 品 / 行李箱 | | | | |
| Original/copy of purchase (if no receipt, please provi 遺失物品之購買收據正本 / | de the purchase year, | , cost, brand and mo | | • | , | |
| 3.3 Travel delay/cancellation | on/curtailment 旅程延 | 誤/取消旅程/縮短 | 旅程 | | | |
| Claim issue 索償事項 | ☐ Bagga 行李延 | ge delay 誤 | Travel (旅程延 | • | ☐ Curtailme 縮短旅程 | nt of trip |
| | Cance 取消旅 | ellation of trip 成程 | ☐ Travel 更改行 | re-route 程 | ☐ Accommo | odation cost |
| Baggage delay (happened after 行李延誤(受保人抵達目的地後2 | | destination) | | | | |
| Actual arrival date and time of the | e insured | | The actual arr | ival date and time | of the baggage | |
| 受保人實際抵達目的地日期及時間 | | | | | | |
| Day日 Month月 Year年 | Hour時 Minut | te分 AM/PM* 上午/下午* | Day⊟ Mon | th月 Year年 | Hour時 | Minute分 AM/PM* 上午/下午* |
| Destination (Do not cover the balle)目的地(不包括由海外回香港旅和 | | urn to Hong Kong fro | m overseas) | Delayed hour(s) 延誤時數 | Hour時 Minu | ite分 |
| Emergency essential items purch 購買的緊急必需品 | nased | Place and date of p 購買地點和日期 | ourchase | | Cost 費用 | |
| | | | | | | |
| Travel delay 旅程延誤 | | | | | | |
| | Departure date and 出發日期及時間(日 | time (Day, Month, Ye · 月 · 年 · 時 · 分) | ar, Hour, Minute) | Arrival date and 到達日期及時間 | | th, Year, Hour, Minute) 時 · 分) |
| Scheduled flight no. 原定航班編號 | | | | | | |
| Actual flight no. 實際航班編號 | | | | | | |
| Reason for travel delay (as state 旅程延誤原因(顯示於證明文件_ | | ocument) | er condition 致 | Mechanical failure機械故障 | | e/civil commotion/terrorism 工 / 內亂 / 恐怖活動 |
| | | ☐ Operat 營運原 | iona l reason 因 | Other 其他 | | |
| Delayed hour(s) | | Hour時 M | linute分 | | | |

延誤時數

3. Claim items (continued) 索償項目 (續)

Curtailment of trip/Cancellation of trip (Policy excess: HKD 200)

縮短旅程/取消旅程(自負額200港元)

You must apply for the refund of prepaid and unused travel and accommodation expenses from the related company(ies) before making this claim. 您必須在提交此索償前,向有關公司申請退還已支付及未有使用的交通及住宿費用。

| Reasons of Curtailment/Cancellation 縮短旅程 / 取消旅程的原因 | |
|---|---|
| | |
| Prepaid and unused traveling expenses (Please specify the currency) 已支付及未有使用的 交通費用 (請註明貨幣) | Did you apply for the refund of prepaid and unused traveling expenses 有否申請退還已支付及未有使用的交通費用? Yes, and confirmed the non-refundable expenses (Please specify the currency) 有·並確認無法追討已支付的費用(請註明貨幣) |
| | Yes 有 (non-refundable expenses waiting for reply 支付的費用待覆) No 沒有 |
| Prepaid and unused accommodation expenses (Please specify the current 已支付及未有使用的 住宿費用 (請註明貨幣) | cy) Did you apply for the refund of prepaid and unused accommodation expenses 有否申請退還已支付及未有使用的住宿費用? |
| | Yes, and confirmed the non-refundable expenses (Please specify the currency) 有·並確認無法追討已支付的費用(請註明貨幣) |
| | Yes 有 (non-refundable expenses waiting for reply 支付的費用待覆) No 沒有 |
| Additional traveling expenses incurred (if any) (Please specify the currency) 額外衍生的交通費用(如有)(請註明貨幣) | Additional accommodation expenses incurred (if any) (Please specify the currency) 額外衍生的住宿費用(如有)(請註明貨幣) |
| Basic supporting documents 基本證明文件 | |
| Please ✓ the provided document(s), our company may request for add 請 ✓ 已提交的文件·本公司可能聯絡香港浸會大學財務處向受保人要求 | itional documents from insured person via Finance Office of HKBU. 提供額外相關索償文件。 |
| Baggage delay, travel delay or expenses for travel re-routing 行李 | |
| Copy of written report from the related public common carrier with 公共交通工具公司的旅程延誤原因、延誤時間之書面報告副本 | n reason(s) and duration for the travel delay or baggage delay |
| Copy of scheduled and actual itinerary flight boarding pass/electr 原定及實際航班(電子)登機證副本 | onic boarding pass |
| Copy of refundable or non-refundable proof from the related comexpenses (must be applied for refund) 額外住宿費用、交通票據或公共交通工具公司可退還或不可退還之 | pany of the additional accommodation, travel ticket or public common carrier 費用書面證明副本(必須申請退還費用) |
| Cancellation/Curtailment/Re-route 取消 / 縮短行程 / 更改行程 | |
| Trip cancellation/curtailment proof e.g. copy of medical report or of 有關取消或縮短行程原因之文件,如醫療報告或死亡證副本 | leath certificate |
| Copy of purchase the air ticket or accommodation 購買機票或住宿的簽賬證明副本 | |
| Copy of refundable or non-refundable proof from the related com expenses (must be applied for refund) 額外住宿費用、交通票據或公共交通工具公司可退還 / 不可退還之 | pany of the additional accommodation, travel ticket or public common carrier 費用書面證明副本(必須申請退還費用) |
| Copy of immediate family relationship proof (e.g. birth certificate, 有多知關關係發明文件 / 加里出任,法抵認明書入副本 / 加海田) | marriage certificate) (if applicable) |

4. Claims documentation 索償文件

Please submit the required documents together with this form to Finance Office of HKBU. Our company may request for additional documents. 請連同所需之文件及此表格一併交回香港浸會大學財務處·本公司可能要求提供額外相關素價文件·

- Original air ticket and boarding pass/common carrier (flight/vessel) ticket 機票及登機辯之正本
- All original medical receipts and medical reports for medical claims 所有醫療收據及發票正本
- All original purchase receipts/invoices for baggage and emergency purchase claims 因行李延誤或遺失 / 損毀物件之原本購買收據及發票之正本
- 4. Relevant loss report from hotel management, airline company or police, etc.

由酒店、航空公司或警方等發出之損失報告

- Copy of Hong Kong Baptist University Student Identity Card or Staff Identity Card 香港浸會大學學生證或職員證劃本
- Original letter issued by Hong Kong Baptist University certifying the nature, itinerary and period of the insured trip 香港浸會大學所簽發的證明書正本・證明有關是次旅程性質、行程和時間

5. Declaration and authorization 聲明及授權

- I/We declare that all information provided by me/us above is true and complete to the best of my/our knowledge and belief and such information is
 provided without reservation or withholding of any kind.
 - 本人 / 我們謹此聲明·以上由本人 / 我們所提供之全部資料乃據本人 / 我們所知所信屬真確及完整無誤·而本人 / 我們在提供資料方面並沒有任何保留或隱瞞·
- I/We confirm that I/we have read, understood and agreed to Zurich Insurance Company Ltd's ("the Company") privacy policy as described below.
 - 本人/我們確認本人/我們已閱讀、明白並同意以下所述蘇黎世保險有限公司(「貴公司」)之私隱政策・
- 3. I/We hereby authorize any physician, medical practitioners, hospitals or clinics by whom or where I/we have been observed or treated to give full particulars about my/our health or provide the relevant report or document to the Company or its agents.
 - 本人/我們授權於任何曾替本人/我們作診療之醫生、醫務人員、醫院或診所提供有關本人/我們病歷之資料或提供有關的報告或文件予 貴公司或其代理人·
- 4. I/We hereby further authorize any parties, including but not limited to police and government authorities, airlines, travel agents, insurance companies etc. who are in possession of my/our insurance proposal information, claim information or any related information to release part or all of the information about me/us or related incidents of injury, loss or damage to the Company or its agents.
 - 本人/我們授權持有本人/我們投保資料·索價紀錄或任何有關資料之一方·包括但不限於警方及政府機構、航空公司、旅遊公司、保險公司等任何有關人士或組織·可以將部份或全部有關本人/我們是次受傷、損失或損毀相關事件等資料提供予 貴公司或其代理人·
- A photocopy of this authorization shall be considered as effective and valid as the original.
 此授權書之影印本與正本同屬有效。

6. 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 (including policyholders, insured persons, beneficiaries, premium payors, trustees, policy assignees and claimants) collected or held by Zurich Insurance Company Ltd ("Company") from time to time, which also includes data collected or generated in the ordinary course of the Company's business and the continuation of relationship with the customer (such as claim information and medical history received from third parties), may be used by the Company and/or a company within its group ("Zurich Insurance Group") 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」)不時收集或持有的客戶(包括保單持有人、受保人、受益人、保費付款人、信託人、保單受讓人及素償人)個人資料,其中亦包括在公司日常業務過程中以及就持續與客戶的關係而收集或產生的資料(例如從第三方收到的索償資料和病歷),均可供本公司及/或其所屬集團(「蘇黎世保險集團」)內的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與我們的客戸服務中心聯絡又或 向保險中介人查詢。

| Name of insured person 受保人姓名 | |
|--|-------------------|
| Signature of insured person | |
| 受保人簽署 | Day⊟ Month月 Year年 |
| | Date 日期 |
| Authorized signature and chop | |
| Finance Office, Hong Kong Baptist University | |
| 香港浸會大學財務處簽署及蓋章 | Day⊟ Month月 Year年 |
| | Date 日期 |
| Claim submission is invalid without the signature and chop of HKBU. 沒有浸大簽署及蓋 | 章之索賠提交將視為無效。 |

Zurich Insurance Company Ltd (a company incorporated in Switzerland with limited liability) 蘇黎世保險有限公司(於瑞士註冊成立之有限公司)

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 Website 網址:www.zurich.com.hk

