



Card Protection Insurance Claim Form 失卡保險索償表格

Please complete this claim form in full carefully. Forwarding of this claim form for completion is not an admission of liability upon the part of Prudential General Insurance Hong Kong Limited ("the Company"). For queries, please contact your Financial Consultant or us by email at gi.claims@prudential.com.hk.

請小心填妥本索償表格。發出本索償表格予以填寫，並不能視作保誠財險有限公司（「本公司」）已承認有賠償的責任。如有查詢，請聯絡你的理財顧問或電郵至 gi.claims@prudential.com.hk。

Please complete in BLOCK LETTERS
請以正楷填寫

PART I 第一部份

Name of Insured/ Claimant
受保人/ 申索人姓名

Policy number
保單號碼

Address
地址

Contact number
聯絡電話

Place where incident occurred
事件的發生地點

Time of incident
事件的發生時間

Card number of the lost credit card
遺失信用卡的卡號碼

Date of incident (dd/ mm/ yyyy)
事件的發生日期 (日/ 月/ 年)

請詳述損失的經過

Please describe in details how the loss occurred

- 1) _____
2) _____
3) _____

Have you reported the loss to the Police or other authority, such as card issuer?
你是否有向警方或有關機構，如發卡機構報告此項損失?

☐ Yes 是

☐ No 否

If yes, please state at which office/ station/ authority, on what date and the case number.
若是，請說明日期、在那處報案及案件號碼。

PART II – Please Complete When necessary 第二部份 — 請按需要填寫

Claims of Personal Effects, and/ or Loss of Key/ Lock Replacement 個人財物，及/ 或遺失門匙/ 門鎖更換賠償

Please list articles lost Please give full details and attach original purchase receipts. 請列明遺失項目 請提供詳情及盡可能一併呈交購買收據的正本	Date of Purchase 購買日期 (DD日/ MM月/ YYYY年)	Original Price 原價 HK\$港幣	Repair/ Replacement Cost 維修重置補領費用 HK\$港幣

Is the loss covered by any other insurance?
是否有其他保險可承保此次損失？

☐ Yes 是

☐ No 否

If yes, please state the name and address of the insurance company and the policy number.
若是，請說明該保險公司的名稱、地址及保單號碼。

Have you suffered any loss to your insured items in the past 3 years?
在過去3年，你是否就有受保項目蒙受損失？

☐ Yes 是

☐ No 否

If yes, please give full details and approximate date (dd/ mm/ yyyy) of loss.
若是，請說明詳情及大約的發生日期(日/ 月/ 年)。

Transportation Claims 交通費賠償

Do you have any transportation claims?
你是否需要索償交通費？

☐ Yes 是

☐ No 否

If yes, please give full details.
若是，請說明詳情。

Unauthorized Calls Claims 未經許可的通訊費賠償

Do you have any unauthorized calls claims?
你是否需要索償未經許可的通訊費用？

☐ Yes 是

☐ No 否

If yes, please state the mobile number.
若是，請提供手提電話號碼。

Have you reported the loss to the telecommunications service provider?
你是否有向電訊服務供應商報告此項損失？

☐ Yes 是

☐ No 否

If yes, please state the name of telecommunications service provider, on what date (dd/ mm/ yyyy) and the loss details.
若是，請說明日期(日/ 月/ 年)、時間、及電訊服務供應商名稱和損失詳情。

Declaration and Authorisation 聲明及授權

The statements and particulars given in this application are, to the best of my/ our knowledge and belief, true and complete and that this application shall form the basis of the contract with Prudential General Insurance Hong Kong Limited.

就本人/ 吾等知悉範圍內，此申請表填報的一切資料，均屬確實完整，本人/ 吾等並同意以此申請表作本人/ 吾等與保誠財險有限公司之間所訂合約的根據。

I/ We hereby authorize Prudential General Insurance Hong Kong Limited to access, obtain and utilize all of my/ our information from any person, company, authority, enterprise and/ or legal entity for the Company's reference, and/ or processing of this claim and/ or other claims submitted previously and in the future. A photocopy of this authorisation shall be considered as effective and valid as the original.

本人/ 本公司茲授權保誠財險有限公司向任何人/ 公司/ 機構索取有關本人/ 公司的任何資料以作貴公司參考及/ 或辦理此案償及/ 或以前及將來的索償。此授權書的影印本與正本具有同等效力。

Personal Information Collection Statement (“PICS”) 收集個人資料聲明

Prudential General Insurance Hong Kong Limited (referred to as “Company”, “our”, “we”, or “us”) take the privacy and protection of your personal information seriously. We collect personal information from you that is necessary for us to either provide you with the product or service you have requested or to comply with statutory or contractual requirements. We may collect personal information including, but not limited to, full name, address, contact details, contact details history, date of birth, gender, nationality, family members, beneficiaries, identity card copy and details, travel document information, health/ medical records, credit information, product history, claims history, financial and medical information (“Personal Information”) to provide you with the insurance or financial products or services. We may also collect Personal Information about you from third parties such as other insurance companies, agents, credit reference/ reporting agencies, vendors, financial institutions, fraud prevention agencies, government agencies, medical personnel, courts or public record.

保誠財險有限公司（簡稱「本公司」或「我們」）認真對待閣下個人資料的私隱及保護。為使我們可以向閣下提供閣下要求的產品或服務，或為遵守法定及合約要求，我們會向閣下收集必要的個人資料。為向閣下提供保險或金融產品或服務，我們可能會向閣下收集個人資料，包括但不限於全名、地址、聯絡資料、過往聯絡資料、出生日期、性別、國籍、家庭成員、受益人、身份證副本及資料、旅遊證件資料、健康/ 醫療紀錄、信貸資料、過往產品紀錄、過往索償紀錄、財務及醫療資料（「個人資料」）。我們亦可能會從第三方，如其他保險公司、代理、信貸資料服務/ 報告機構、供應商、金融機構、防欺詐機構、政府機構、醫務人員、法院或公開紀錄，收集關於閣下的個人資料。

1. Purpose of Collection 收集資料之目的

We may use your Personal Information for the following purposes: (a) to process your application; (b) to administer and process insurance policies, insurance claims and medical, security and underwriting checks; (c) to process payment instructions; (d) to verify your eligibility for insurance, financial or wealth management products and services; (e) to design and provide you with insurance, financial and related products and services; (f) to communicate with you; (g) to comply with any regulatory or other legal requirements or other internal business requirements (whether imposed on us or any third parties in section 2 below); (h) to investigate and settle claims and detect and prevent fraud (whether or not relating to the policy issued in respect of this application); (i) to carry out checks using agencies including credit reference agencies, tracing companies or publicly available information; (j) to provide customer services; (k) to perform automated decision-making or profiling; (l) to perform a policy review or needs analysis; (m) to conduct research and statistical analysis (including use of new technologies); and (n) any other purpose directly relating to any of the above purposes. With your consent, we may also use your personal data to send you marketing communications, as described below.

Some of the purposes above are necessary to allow us to perform our contractual obligations to you and to enable us to comply with applicable laws and regulation. We may also use and share your Personal Information for the purposes described above to improve our products and services. Your Personal Information will be stored either for as long as you (or your joint policyholder) are our customer, or longer if required by law or as is otherwise necessary.

我們可能會使用閣下的個人資料作下列目的：(a) 處理閣下的申請；(b) 管理和處理保單、保險索償、醫療、抵押和承保檢查；(c) 處理付款指示；(d) 核實閣下申請保險、金融或財富管理產品及服務的資格；(e) 設計及為閣下提供保險、金融及相關的產品和服務；(f) 與閣下進行通訊；(g) 遵守任何監管或其他法律規定或其他內部業務規定（不論是向我們或下述第2部分所列的任何第三方實施）；(h) 就索償進行調查及和解，以及偵查及防止欺詐（不論是否有關就本申請簽發的保單）；(i) 使用代理機構（包括信貸資料服務機構）、追蹤公司或公開可得資料以執行核實；(j) 提供客戶服務；(k) 執行自動決策或資料剖析；(l) 進行保單審查或需求分析；(m) 進行研究和統計分析（包括使用新科技）；及(n) 與上述任何目的直接相關的任何其他目的。經閣下同意，我們亦可能會按照以下說明使用閣下的個人資料以向閣下發出促銷通訊。

為履行對閣下的合約責任及至使我們能夠遵守適用法律及法規，上述部分目的屬必要的。我們亦可能會為上述所列的目的使用及分享閣下的個人資料以改善我們的產品及服務。只要閣下（或閣下的聯名保單持有人）仍為我們的客戶，我們將一直保存閣下的個人資料，或如法律有所規定或因其他原因而為必要，我們則將其保存更長時間。

2. Classes of Transferees 被資料轉交者的類別

We may disclose your Personal Information to the group of companies including the Company and those of other entities whose ultimate parent company is Prudential plc (“companies within the Prudential Group”) and to our financial/ health business partners. We may also disclose your Personal Information to third parties (within or outside Hong Kong) for the purposes outlined at Section 1 above, including but without limitation, to the following third parties: (a) insurance agents; (b) insurance brokers; (c) re-insurance companies; (d) claims investigation companies; (e) organisations that consolidate claims and underwriting information for the insurance industry, fraud prevention organisations, other insurance companies (whether directly or through fraud prevention organisations or other persons named in this paragraph) and databases or registers (and their operators) used by the insurance industry to analyse and check information provided against existing information; (f) third party service providers who provide administrative, telecommunications, computer, payment, printing, redemption or other services to us to enable us to operate our business (including without limitation insurers, lawyers, bankers, accountants, professional advisors, financial institutions and trustees); (g) industry associations and federations; (h) medical bill review companies; (i) your joint policy or investment holder; (j) researchers; (k) credit reference agencies; (l) debt collection agencies; (m) partnering financial institutions and partnerships; and (n) regulators and government agencies, law enforcement agencies and the courts. We may also disclose your Personal Information in connection with a transaction with another company which affects the control, governance, structure and/ or management of all or a substantial part of our business, or if required to satisfy applicable legal or regulatory requirements. With your consent, we may also disclose your personal data to third parties to allow them to send you marketing communications, as described below.

我們可能會向該公司集團，包括本公司以及其他母公司為英國保誠集團的實體（「保誠集團內的公司」），及我們的金融/ 健康業務夥伴，透露閣下的個人資料。為達到上述第一部分所列明之目的，我們亦可能還會向第三方（在香港境內或境外）透露閣下的個人資料，包括但不限於以下第三方：(a) 保險代理；(b) 保險經紀；(c) 再保險公司；(d) 索償調查公司；(e) 為保險業整合索償及承保資料的組織、防欺詐組織、其他保險公司（不論直接或透過防欺詐組織或本段指名的其他人士），及保險業用作分析及核實現有資料與及後提供的資料而使用的數據庫或登記冊（及其營運商）；(f) 提供行政、電訊、電腦、付款、印刷、贖回或其他服務以令我們的業務可以運作的第三方服務供應商（包括但不限於保險公司、律師、銀行家、會計師、專業顧問、金融機構及受託人）；(g) 行業協會及聯會；(h) 醫療賬單審查公司；(i) 閣下的聯名保單或投資持有人；(j) 研究人員；(k) 信貸資料服務機構；(l) 收賬代理；(m) 夥伴金融機構及合作夥伴；及(n) 監管機構及政府機構、執法機構及法院。在有關影響到我們全部或重大部分業務的控制權、治理、結構及/ 或管理的與另一公司的交易時，或在必須符合適用的法律或監管要求下，我們亦可能會透露閣下的個人資料。經閣下同意，我們亦會向第三方透露閣下的個人資料以讓該等第三方方向閣下發出促銷通訊（如下文所述）。

3. Consequence of failing to provide Personal Information 未能提供個人資料的影響

Unless otherwise specified by us, it is mandatory for you to provide the Personal Information requested by us. If you do not provide such Personal Information, we may not be able to provide you the product or service that you've requested.

除非我們另有規定，否則閣下必須提供我們要求的個人資料。若閣下未提供有關個人資料，我們可能無法為閣下提供所要求的產品或服務。

4. Access and Correction Rights 查閱和更正的權利

Under the Personal Data (Privacy) Ordinance (the "**Ordinance**"), you have the right to request access to and correction of any Personal Information that you provide to us. If want to exercise your rights, or if you require any other information, you can advise our Data Protection Officer at service@prudential.com.hk or using the details on "Contact Us" section of the Company website or our Privacy Notice.

If you move/ moved to a European Union ("**EU**") jurisdiction, we may be required to provide you with further information, and you may have additional rights, under the EU General Data Protection Regulation. This information and these rights are set out in the Privacy Notice on our Company website.

We update our Privacy Notice from time to time. We encourage you to familiarise yourself with the Privacy Notice on our Company website. By completing and progressing with this form, you confirm that you have read and understood this PICS. The Privacy Notice is available on our Company website at <https://www.prudential.com.hk/scws/pages/en/privacy-policy/index.html>.

根據《個人資料(私隱)條例》(「**條例**」)，閣下有權要求查閱及更正任何閣下提供給我們的個人資料。閣下如欲行使閣下的權利，或如閣下需要任何其他資料，請發送電郵至 service@prudential.com.hk 或使用本公司網站或我們的私隱通知中「聯絡我們」部分所列的資料與我們的資料保護主任聯絡。

如閣下搬遷/ 已搬遷至歐洲聯盟(「**歐盟**」)司法管轄區，我們可能需要向閣下提供進一步資料，且閣下可能在歐盟《通用數據保障條例》下享有額外權利。此類資料及此等權利均載於本公司網站上的私隱通知中。

我們會不時更新我們的私隱通知，並建議閣下瀏覽本公司網站以了解該私隱通知。閣下填妥並繼續提交本表格，即表示閣下確認已閱讀並理解本收集個人資料聲明。該私隱通知可在本公司網站 <https://www.prudential.com.hk/scws/pages/tc/privacy-policy/index.html> 上查閱。

Signature of Insured
受保人簽署

HKID or Passport No.
香港身份證或護照號碼

Date
日期

Important Notes 重要事項

- Please substantiate your claim application with relevant document(s); you are referred to the list of document(s) that we would require for processing your claim application.
請提交有關文件以證明閣下的索償申請；請參考下列表單，當中列出我們在處理閣下索償申請時可能需要的文件。
- All reports, information and evidences that you provide to substantiate your claim application shall be furnished at your own expenses.
閣下請自費提供用作證明本索償申請的報告、資料及證明。
- If the Claimant is not the Insured named in the policy schedule, please provide residence/ documentary proof on the relationship between the Claimant and the Insured.
如索償人並非是保單中所列明的受保人，請提交居住證明/ 有關文件以證明索償人與受保人的關係。
- Please submit this claim form to us within 31 days of the occurrence for loss.
請於在事件發生的31天內遞交本索償表格。
- To expedite the claim process, kindly submit this claim form together with all original supporting document(s).
敬請同時遞交所有用以證明本索償的文件正本，以便我們盡快處理有關索償。
- You should take all ordinary reasonable precautions to prevent further loss(es) after the incident. Failure to observe this shall prejudice your right to claim.
請務必採取所有尋常合理的預防措施，以避免進一步的損失，如未有依循，將影響閣下在索償中的權益。
- According to the terms and conditions of your insurance with the Company, the following losses and/ or damage and/ or expenses shall not be recoverable:
按閣下與本公司的保險條款及細則，若有關損失及/ 或損毀及/ 或開支由下述原因所引致，一概屬不保情況：
 - Claims from the Claimant who cannot support the relationship with the Insured if he/ she is not the Insured
當索償人並非受保人，在索償人未能提供與受保人關係證明的情況下提出的索償
 - Loss of personal effects and/ or unauthorized used of credit card which has not been reported to the Police within 24 hours of discovery
在損失個人財物及或信用卡被盜時，未有在發現後二十四小時內向警方報告
- You are recommended to refer to the policy wordings should you be uncertain on the coverage of this insurance.
如閣下就本保險中所提供的保障有不清晰地方，請參閱有關保單條文。

Please ensure the following **original relevant document(s)** will be submitted together with this claim form.
請確保以下所示的**有關文件正本**，連同本索償表格一併交回。

Incident report from Police, card issuer or telecommunications service provider, etc. 由警方、發卡機構或電訊服務供應商等所發出的事件報告	✓
Original purchase receipt for lost items (if applicable) 遺失物件的原有收據 (如適用)	✓
Replacement invoice(s) of personal documents (if applicable) 補領個人證件的收據 (如適用)	✓

Please also note that further information and/ or document(s) may be needed. We shall write to you when necessary.
如有需要，我們將另行發書函索取附加資料及/ 或文件，敬請留意。