



QBE General Insurance (Hong Kong) Limited

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昆士蘭保險(香港)有限公司

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汽車遇事報告書

REPORT OF MOTOR CAR ACCIDENT

根據保單條款，此報告書應由投保人及駕駛人詳細填妥並簽署，及盡快交回保險公司。
According to Policy Conditions, this report form should be fully completed and signed by the Insured and the Driver and be submitted to the Company as soon as possible.

車輛登記文件正背面、駕駛人之駕駛執照及年齡證明及警署報案紀錄咭之副本應連同此報告書一併呈交。

Copies of both sides of Vehicle Registration Document, Driver's driving licence and age proof, and police report card should be submitted together with this report form.

呈遞此報告書，並不表示保險公司承擔賠償責任。

By furnishing this report form the Company makes no admission of liability.

日期

Date: _____

1. 投保人資料 INSURED'S INFORMATION

姓名 Name _____ 職業 Business/Occupation _____ 保單號碼 Policy No. _____
電郵地址 E-Mail Address _____ 流動電話號碼 Mobile Phone No. _____ 辦公電話號碼 Office Telephone No. _____
住址 Home Address _____
辦公地址 Office Address _____

2. 受保車輛資料 PARTICULARS OF INSURED VEHICLE

車輛登記號碼 Registration No. _____ 廠名 Make _____ 型號 Model _____ 車身底盤號碼 Chassis No. _____
製造年份 Year of Manufacture _____ 車身類別 Type of Body _____ 顏色 Colour _____ 汽缸容量或噸位 C.C. or Tonnage _____
意外發生時該車所作用途: 自用 營業 租賃 其他(請列明)
Purpose of use at time of accident: Private Business Trade or Hire Others (please specify) _____
Purposes _____

3. 肇事時駕駛人資料 THE PERSON DRIVING AT TIME OF ACCIDENT

姓名 Name _____ 職業 Occupation _____ 出生日期 Date of Birth _____
駕駛執照號碼 Driving Licence No. _____ 執照首次發出日期 Date of First Issue _____ 駕駛經驗 Driving Experience _____ 年
地址 Address _____ 電話號碼 Tel No. _____
與投保人之關係 Relationship with Insured: 僱員 親屬 朋友 其他(請列明)
Employee Relative Friend Others (please specify) _____

4. 遇事經過(包括失竊或火警) THE ACCIDENT (INCLUDING THEFT OR FIRE)

日期 Date _____ 時間 Time _____ 上午/下午 a.m./p.m. _____ 地點 Place _____
失事經過之詳細說明 Explanation as to how the accident occurred _____

請繪圖說明遇事時有關車輛或人員所處之位置。

Give below rough sketches of the road indicating the position of any vehicles or persons at time of accident.

- a. 意外前: Before the accident: _____
b. 意外後: After the accident: _____

何區警署報案 Which Police Station reported	報案日期 Date reported	案件編號 Case No.
受保車輛行駛時速 Speed of insured vehicle	公里 km per hour.	估計對方車輛之時速 Estimated speed of other vehicle
此意外應由何人負責 Who should be responsible for this accident?		公里 km per hour.
對方車輛號碼 Registration No. of other vehicle	車輛種類、牌子及型號 Type, Make & Model	
對方車輛駕駛人之姓名及地址 Name and Address of driver of other vehicle	電話號碼 Tel No.	
對方車輛保險公司之名稱 Name of other vehicle's Insurance Company	保單號碼 Policy No.	

5. 車輛或物品損壞情形 DAMAGE TO VEHICLES OR PROPERTIES

受保車輛損壞 Damage to insured vehicle?	是 <input type="checkbox"/> 否 <input type="checkbox"/>	若然，損壞何部份 If yes, which part?
估計修理費用 Estimated repair cost		欲交何家車廠 Intended motor repairer
(若索償受保車輛損壞，必須盡快呈上修理估價單。) (If claim for own damage, a repair estimate must be submitted as soon as possible.)		
對方車輛損壞 Damage to other vehicle?	是 <input type="checkbox"/> 否 <input type="checkbox"/>	若然，損壞何部份 If yes, which part?
第三者物品損壞 Damage to third party property?	是 <input type="checkbox"/> 否 <input type="checkbox"/>	若然，列明詳情 If yes, state details

6. 傷者資料 INJURED PERSONS

有否傷人 Any person injured?	是 <input type="checkbox"/> 否 <input type="checkbox"/>	若然，傷者人數 If yes, number of persons injured
傷者為： Injured person was:	受保車輛駕駛人 Driver of insured vehicle	受保車輛乘客 Passenger of insured vehicle
	對方車輛乘客 Passenger of other vehicle	對方車輛駕駛人 Driver of other vehicle
	途人 Pedestrian	其他（請註明） Others (Please specify)
若知悉，請列明傷者之姓名、年齡、職業、地址及受傷情況 State name, age, occupation, address and details of injury of injured person if known		

7. 證人 WITNESSES

請列明目擊此意外人士之姓名及地址
State names and addresses of the persons who witnessed the accident

聲明及授權書 DECLARATION AND AUTHORISATION

本人／吾等聲明上述資料完整及正確無訛。本人／吾等並無隱瞞任何重要資料。就上述意外並無其他保險單給予本人／吾等任何保障。本人／吾等明白保險公司可要求更多資料。本人／吾等確認本人／吾等已細閱昆士蘭保險（香港）有限公司的收集個人資料聲明（「通知」），並知悉及同意有關於本人／吾等於是次申請由本人／吾等提供的

I/We declare that the above information is true and complete to the best of my/our knowledge and belief and I/We have not withheld any material information. I/We have no other policy of insurance indemnifying me/us in respect of the accident. I/We understand that the Company can request for more information. I/We confirm that I/We have read the QBE General Insurance (Hong Kong) Limited's Personal Information Collection Statement ("Notice") and acknowledge and agree that all personal data and information with respect to me/us which are provided by me/us in relation to this application may be held, used, processed or disclosed to such parties for such purposes as set out in the Notice.

本人／吾等現授權任何機構可將本人／吾等之意外或損失報告等資料，包括向警方提供之口供副本，給予昆士蘭保險（香港）有限公司或其代表以作為評估現有個案之用途。此授權書之副本與正本同等有效。

I/We hereby authorise any authorities or organisation that has any records or knowledge of me/us or my/our accident or loss, to furnish to QBE General Insurance (Hong Kong) Limited or its authorised representative, any and all information with respect to my/our report of accident or loss including copies of statements made to the Police for the purpose of assessment of my/our present case. A photostat copy of this authorisation shall be considered as effective and valid as the original.

駕駛人簽署
Signature of Driver

投保人簽署（並蓋章，如適用）
Signature of Insured (with company chop if applicable)



QBE General Insurance (Hong Kong) Limited - Personal Information Collection Statement

QBE General Insurance (Hong Kong) Limited ("the Company") may use the personal data the Company collect about you for the following purposes:

Insurance Services (mandatory)

1. processing and assessing of applications for any insurance products and daily operation of the related services;
2. administering your insurance policy and providing services in relation to your insurance policy;
3. any alterations, variations, cancellation or renewal of any insurance and related services;
4. investigating, analyzing, processing and paying claims made under your insurance policy;
5. invoicing and collecting premiums and outstanding amounts from you;
6. exercising any right under the insurance policy including right of subrogation, if applicable;
7. complying with the requirements under any law and regulation, industry codes, guidelines, requests from regulators, industry bodies, government agencies and court order.
8. contacting you for any of the above purposes;
9. other ancillary purposes which are directly related to the above purposes;

The information you provide to the Company may be provided or transferred to the following parties in Hong Kong or overseas for the purposes set out in the above paragraph:

- a. any agent, advisor, contractor or third party service provider who provides administrative, telecommunications, computer, payment, debt collection, security, data processing or storage or related services or any other company carrying on insurance or reinsurance related business, or an intermediary, or a claim or investigation or other service provider providing services relevant to insurance business, for any of the above or related purposes;
- b. any association, federation or similar organization of insurance companies ("Federation") that exists or is formed from time to time 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;
- c. any members of the Federation by the Federation for any of the above or related purposes;
- d. regulators;
- e. lawyers;
- f. auditors; and
- g. other insurance companies within the QBE Group which have undertaken to keep such information confidential and solely for the purposes set out in the above paragraph.

If you do not agree to the use of your personal data for above purposes, it would not be possible for the Company to process your application and render the services.

Direct Marketing of Products and Services

To provide a more comprehensive range of financial and insurance services, the Company may use your name, mobile phone number, residential phone number, office phone number, residential address, correspondence address, email address, age, gender and occupation (the "Marketing Personal Data") in direct marketing. Save in the circumstances exempted in the Personal Data (Privacy) Ordinance, the Company cannot so use your Marketing Personal Data without your consent (which includes an indication of no objection). In this connection, please note that the Company may use your Marketing Personal Data for the following purposes:

- 1) any sales or direct marketing of insurance, banking, financial services, provident schemes products or related services of the Company or of the financial services providers engaged by the Company.
- 2) to conduct research, insurance survey and analysis for the purpose of product design and development and improvement of our services to you and such data may be transferred to third party service provider in Hong Kong or overseas who provides administrative, data processing, marketing services, consulting services and storage services.

You have the right to ascertain the Company policies and practices in relation to personal data, obtain access to and to request correction of any personal information concerning yourself held by the Company subject to payment of an administrative fee. Requests for such access or correction can be made in writing to the Data Protection Officer, QBE General Insurance (Hong Kong) Limited, Suites 1606-11, 16/F, Devon House, Taikoo Place, 979 King's Road, Quarry Bay, Hong Kong. Fax: (852) 3607 0391.

If you do not want to receive any sale or marketing of any of the products or services from the Company at any time, you may also contact the Company's Data Protection Officer.

Apr 2015



昆士蘭保險（香港）有限公司 - 收集個人資料聲明

昆士蘭保險（香港）有限公司（本公司）將所收集閣下的個人資料，可能用作下列的用途：

保險服務（強制）

1. 處理及評估任何保險產品之申請，及有關服務之日常運作；
2. 管理閣下的保單及為閣下的保單提供相關服務；
3. 有關保險產品及服務的任何更改、變更、取消或續保；
4. 閣下保單索償的調查、分析、處理及賠償；
5. 保費通知、收集保費和款項；
6. 行使有關保險單賦予的任何權利包括代位權，如適用；
7. 遵守及合乎任何法例及條例規定的要求、行業手則、指引、監管機構、相關行業認可機構、政府機構及法庭頒令的要求；
8. 為上述任何用途與閣下聯絡；
9. 與上述用途直接有關之其他附帶的目的。

閣下向本公司提供的資料可能會提供或轉送予下列各方在香港或海外單位作前段所述的用途：

- a. 任何代理人、顧問、諮詢人、承辦商或提供行政、電訊、電腦、付賬、債務追討、保安、數據處理或儲存或有關服務的第三者服務供應人或任何其他從事與保險或再保險業務有關的公司，或中介人，或索償或調查或其他提供與保險業務有關的服務供應人，以達到任何上述或有關的用途；
- b. 現存或不時成立之任何保險公司協會或聯會或類同組織（聯會），以達到任何上述或有關的用途，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；
- c. 或透過聯會提供予任何聯會的會員，以達到任何上述或有關的用途；及
- d. 監管機構；
- e. 執業律師；
- f. 認可核數師及
- g. 昆士蘭保險集團內的其他保險公司已承諾將資料保密並純粹用作上述的用途。

如果閣下不同意本公司使用閣下的個人資料於上述用途上，本公司可能不能處理閣下之申請及為閣下提供服務。

直接市場推廣產品及服務

為提供更全面的金融和保險服務，本公司可能會使用閣下的姓名、手提電話號碼、家居電話號碼、辦公室電話號碼、居住地址、郵寄地址、電子郵件地址、年齡、性別及職業（「市場推廣用途的個人資料」）作直接促銷。除非本公司已取得閣下的同意（包括表示不反對），否則本公司不可以如此使用閣下的市場推廣用途的個人資料，但個人資料（私穩）條例下所指明的豁免情況除外。就此，本公司可能會使用閣下的市場推廣用途的個人資料作下列用途：

- 1) 任何銷售或市場推廣有關本公司或本公司之業務伙伴的保險、銀行、金融服務、公積金計劃或有關服務。
- 2) 進行研究、保險調查及分析以供產品設計及發展及提升本公司提供予閣下的服務質素的用途上，閣下該等資料將轉移到香港或海外的第三方的服務供應商以提供行政、資料處理、市場推廣、諮詢及儲存服務。

閣下有權查明本公司就個人資料的政策和實務，並有權要求查閱及更正由本公司持有有關閣下的個人資料，並需支付行政費用。

有關查閱或更正的要求，可致函香港鰂魚涌英皇道979號太古坊德宏大廈16樓1606-11室，傳真：(852) 3607 0391 向昆士蘭保險（香港）有限公司資料保護主任提出。

如閣下於任何時間不欲收取本公司的任何產品或服務的任何銷售或推廣，閣下亦可聯絡上述資料保護主任。

[中文譯本僅供參考，文義如與英文本有歧異，概以英文版為準。]

2015年 4月