



1.

### Claim Submission 提交索償

Submit your claim within 30 days from the date of accident/ loss.  
於意外 / 損失起計 30 天內提交索償申請。



2.

### Claim Assessment 索償評估

Your claim will be assessed in a timely manner to ensure smooth claim experience.  
我們將盡快處理閣下提交的索償申請。



3.

### Claim Result 索償結果

Claim result will be provided soonest we received all the required document(s).  
索償審批的結果將於文件齊備後盡快通知閣下。

#### Submission Method 提交方式

##### By Post 郵寄至:

Allianz Global Corporate & Specialty SE  
Hong Kong Branch  
Suites 403-11, 4/F,  
12 Taikoo Wan Road,  
Taikoo Shing, Hong Kong

安聯環球企業及專項保險香港分公司

香港太古城太古灣道 12 號

4 樓 403-11 室

##### By Email 電郵至:

[claimshk@allianz.com](mailto:claimshk@allianz.com)

#### General assistance and enquiries

##### 一般協助及查詢

Allianz Customer Services Hotline

安聯客戶服務熱線

+852 2867 0097

#### Claims supporting document(s) 索償證明文件

##### Property Damage/ Loss 有關財物損毀 / 遺失

- Completed and duly signed Claim Form  
已填妥之索償表格
- Original purchase receipts showing the value of the claim item(s)  
損毀財物的購買收據正本以證明財物價值
- Photographs showing the extent of damage(s) to the claim item(s)  
證明物件損毀程度之相片
- Copy of incident report from the property management company or relevant authorities with details of the incident  
大廈管理公司或有關機構所發出的事件報告副本
- Copy of repair quotation for the claim item  
損毀財物之維修報價單副本
- Copy of police report/ statement (including police reference and station name)  
警方報告 / 案件陳述的副本 (包括警方報告參考編號和警局名稱)
- Letter of authorisation (Appendix D)  
索取口供紙授權書 (附件 D)

##### Liability Claim 有關第三者責任索償

- Completed and duly signed Claim Form  
已填妥之索償表格
- Please submit to us all the claims documents (if any)  
請提交所有要求賠償的文件 (如有)
- Please do not negotiate, pay, settle, admit or repudiate any claim without our consent and please leave unanswered to any questions concerning claims of the third party until further notice from us  
未經我們允許，請不要私自協商、支付、和解、承認授予或拒絕接受任何賠償並在我們另行通知前，請勿回答任何有關第三方索賠的問題

#### Important Notes 重要事項

- Please do not dispose any salvage before receiving our prior approval  
在未經我們允許前，請不要遺棄任何損餘物資
- For any document(s) to substantiate your claim, you have to bear the charges on your own expense  
有關索償證明文件之費用須由申索人支付
- Depending on the nature of your claim, we may require you to provide additional document(s)/ information  
我們將根據索償情況要求閣下提供其他索償證明文件
- Please retain a copy of all your documents submitted to us for your own reference  
請於提交索償文件前保留一套參考副本

**Allianz Global Corporate & Specialty SE**  
 (incorporated in the Federal Republic of Germany with limited liabilities)  
**Hong Kong Branch**  
**安聯環球企業及專項保險**  
 (於德意志聯邦共和國註冊成立之有限公司)  
**香港分公司**  
 Suites 403-11, 4/F, 12 Taikoo Wan Road, Taikoo Shing, Hong Kong  
 香港太古城太古灣道 12 號 4 樓 403-11 室

## ALLIANZ HOME PROTECT CLAIM FORM 安聯家居保障索償表格

### 1. CLAIMANT DETAILS 申索人資料

Name of Claimant 申索人姓名		Occupation of Claimant 申索人職業	
Policy No. 保單號碼		Contact No. 聯絡電話	
Email address 電郵地址			
Correspondence address 通訊地址			
Insured address 受保地址			
Purpose of insured premises 受保地址之用途			

### 2. CLAIM INFORMATION 索償事項

Date of accident/ loss (DD/MM/YYYY) 意外 / 損失日期 (日/月/年)		Place 地點	
Details of accident/ cause of loss 意外詳情 / 損毀原因			
Any parties who may be causing the accident/ loss? 誰人有可能引致是次意外 / 損失?			
Have you informed the police or other authorities related to the accident/ loss? 閣下有否向警方或其他機構報告失事情況?			
<input type="checkbox"/> No 沒有	<input type="checkbox"/> Yes, please specify below and complete the Letter of Authorisation attached (Appendix D) 有, 請於下列註明並請填妥授權書 (附件D)		
	Name of Police Station/ related Authorities 警署 / 有關機構名稱		
	Police Report No./ Reference No. 警署檔案編號 / 參考編號		
Details of Property Damaged/ Loss 財物損毀 / 遺失之詳細資料			
Damaged/ Loss item(s) 損毀 / 遺失財物	Date of Purchase 購買日期	Purchase Price 購買價錢	Claim Amount (HKD) 索償金額 (港幣)

Do you own the property? 該財物是否屬於申索人?		
<input type="checkbox"/> Yes 是	<input type="checkbox"/> No, please specify name, address and phone no. of the owner below 不是，請註明物主姓名、地址及聯絡電話	
If you are claiming under a section of the policy not provided on this claim form, please provide details below 如果您的索償事項不包括在本申請表的項目中，請註明於下列空白處		

### 3. SETTLEMENT METHOD 賠款方式

For the claim payment (if applicable) direct credit to Policy Holder's bank account, Please complete all of the following: 請填寫以下所需資料以便本公司將賠償款項(如適用)直接存入保單持有人之戶口：		
Name of account holder 帳戶持有人姓名	<div style="border-bottom: 1px solid black; height: 1.2em; width: 100%;"></div>	
Bank name 銀行名稱	<div style="border-bottom: 1px solid black; height: 1.2em; width: 100%;"></div>	
Swift Code 銀行代碼	<div style="border-bottom: 1px solid black; height: 1.2em; width: 100%;"></div>	
Bank account No. 銀行帳戶號碼	<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="border-bottom: 1px solid black; width: 15%;"></div> <div style="border-bottom: 1px solid black; width: 15%;"></div> <div style="border-bottom: 1px solid black; width: 15%;"></div> <div style="border-bottom: 1px solid black; width: 15%;"></div> <div style="border-bottom: 1px solid black; width: 15%;"></div> <div style="border-bottom: 1px solid black; width: 15%;"></div> </div>	
	Bank code 銀行編號	Branch code 分行編號
		Account No. 帳戶號碼
<b>Please provide account proof (e.g. bank statement/ bank book copy showing the name of account holder and account number)</b> <b>請提供帳戶資料證明 (如: 附有帳戶持有人姓名及帳戶號碼之銀行帳單/ 銀行存摺之影印本)</b>		

### 4. THIRD PARTY LIABILITY CLAIM SECTION (if applicable) 第三者責任索償部份 (如適用)

Name(s), Address(es) and Contact No. (s) of Witness(es) of incident (If any) 證人之姓名、地址及聯絡電話 (如有)
Please provide the Name(s), Address(es) and Contact no.(s) of the person whose negligence possibly caused the incident 請提供有可能因疏忽導致該事故之人士的姓名、地址及聯絡電話
Please confirm whether any precautionary measures have been taken prior to the incident? if yes please specified below 請確定在事故發生前有否作出任何防範措施? 如有，請詳列如下
After the incident, any promise/ compensation/ remedy work have been done? If yes, please details specified below 在事故發生後，有否作出任何承諾 / 賠償 / 補救措施? 如有，請詳列如下
Have you received any claim request? If so, from whom? 閣下有否接獲賠償要求? 如有，是誰提出該要求?

\*Note 注意: Please submit to us all the receipt claims document(s) (if any) 請提交所有要求賠償的文件 (如有)

Details of third party property damage 第三者財物損毀詳情			
Name, address and contact no. of Owner 物主姓名, 地址及聯絡電話	Description of the damaged property 損毀物件詳情	Relationship between Property Owner and Claimant 物主與申索人的關係	Claim Amount (HKD) 索償金額(港幣)

Details of third party bodily injury 第三者人身傷亡詳情			
Name, address and contact no. of Injured Person 受傷者姓名, 地址及聯絡電話	Nature of Injuries 受傷情況	Relationship between Injured Person and the Claimant 受傷者與申索人的關係	Claim Amount (HKD) 索償金額(港幣)

## 5. OTHER INFORMATION 其他資料

Any other insurance policy covering the claimed items? 上述項目是否受保於其它保險合約?			
<input type="checkbox"/> No 沒有	<input type="checkbox"/> Yes, please specify below 如有, 請註明於下列列表		
	Name of Insurer 保險公司名稱	Policy No. 保單號碼	Claim Amount (HKD) 索償金額(港幣)

## 6. DECLARATION AND AUTHORISATION 聲明及授權

- I/ We declare and agree to the best of my/ our knowledge and belief that the above information and particulars are accurate, true and complete.  
本人 / 我們就此作出聲明, 以上所述事項均根據本人 / 我們所知及所信的情況下提供, 並且為真實正確及完整。
- I/ We hereby authorise any party, including but not limited to police, insurance company, hospital, clinic, registered medical practitioner or other persons and/ or government institution that possesses any records or knowledge of me/ us, to furnish any and all my/ our information or copies of records to Allianz Global Corporate & Specialty SE Hong Kong Branch ("Allianz") or its authorised representative as Allianz may request. This authorisation shall bind my/ our successors and remain valid notwithstanding death or incapacity. A photostat copy of this authorisation shall be as effective and valid as the original.  
本人 / 我們授權任何一方, 包括但不限於警方、保險公司、醫院、診所、註冊西醫或有關人士及 / 或政府機構, 凡知道或持有任何有關本人 / 我們之記錄, 須按安聯環球企業及專項保險香港分公司(「安聯保險」)或其授權之代表的要求提供該資料或紀錄副本。本授權對相關人士之繼承人及受讓人具有約束力; 即使相關人士死亡或無行為能力時, 本授權仍具效力。本授權書之影印本的法律效力等同正本。
- I/ We hereby confirm I/ we have been advised to read carefully the Personal Information Collection Statement as accompanied with this form (the "PICS") and acknowledge and confirm that I have read and understood the PICS. Based on the foregoing, I/ we hereby give my/ our acknowledgment and agree to the use and transfer of my/ our personal data by Allianz in accordance with the PICS.  
本人 / 我們謹此確認本人 / 我們已被通知須詳細閱讀隨本表格附上之個人資料收集聲明(「該聲明」), 並確認本人 / 我們已閱讀並明白該聲明。根據以上所述, 本人 / 我們特此確認並同意安聯保險根據該聲明使用及轉移本人 / 我們的個人資料。

Signature of Claimant 申索人簽署 : _____  HKID No. 香港身份證號碼 : _____  Date 日期 : _____	Signature of Policy Holder 保單持有人簽署 : _____  HKID No. 香港身份證號碼 : _____  Date 日期 : _____
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## 7. PERSONAL INFORMATION COLLECTION STATEMENT 個人資料收集聲明

Allianz Global Corporate & Specialty SE Hong Kong Branch ("we", "us" "Allianz" or "the Company") may use the personal data we collect about you, which may include your name, address, email address, telephone number and other contact details, date of birth, bank account or credit card details, HKID card and/ or passport number and in some cases, medical records and/ or other data, and which we may collect when, for example, you apply for, renew or make a claim under a policy and/ or you correspond with us, for the following purposes:

安聯環球企業及專項保險香港分公司 (「我們」, 「安聯保險」, 「本公司」) 所收集您的個人資料, 包括姓名、地址、電郵地址、電話號碼及其他聯絡資料、出生日期、銀行帳戶或信用卡資料、香港身分證及 / 或護照號碼、及部份情況下的醫療及 / 或其他資料, 以及日後您提出保單申請、續保、索賠等及/或與我們通訊時收集的資料, 本公司可能用作下列的用途:

- i) processing and evaluating your insurance application and any future insurance application you may make;  
處理及評估您的保險申請及您日後提交的保險申請;
- ii) administering your insurance policy and providing services in relation to your insurance policy;  
辦理您的保單及提供與該保單相關的服務;
- iii) undergoing any alternations, variations, cancellation or renewal of any insurance and related services;  
進行任何保單更改、變更、取消或續保及有關服務;
- iv) investigating, analysing, processing and paying claims made under your insurance policy;  
調查、分析、處理及支付您的保單相關索償;
- v) conducting identity, medical or credit checks;  
進行身份、醫療或信用核實;
- vi) designing insurance and other financial products and/ or services for customers' use;  
保險及其他金融產品及 / 或服務的設計以供客戶使用;
- vii) exercising any right under the insurance policy including right of subrogation, if applicable;  
行使有關保單所賦予的任何權利包括代位權, 如適用;
- viii) invoicing and collecting premiums and outstanding amounts from you;  
發出繳交保費通知及向您收取保費及欠款;
- ix) reinsurance purposes;  
再保險用途;
- x) conducting research, surveys and analysis for the purpose of product design and/ or the development and improvement of our services to you;  
進行用作產品設計及 / 或發展與改善公司向您提供之服務的研究、調查及分析;
- xi) conducting statistical or actuarial research, data matching and/ or verification purposes;  
進行統計或精算研究、資料配對及 / 或核實之用;
- xii) the operation and administration of the Company's internal business including without limitation any corporate reorganisation;  
公司內部業務的運作及管理, 包括但不限於公司改組;
- xiii) contacting you for any of the above purposes;  
就以上任何用途與您聯絡;
- xiv) other ancillary purposes which are directly related to the above purposes; and  
其他與上述用途直接有關之輔助用途; 及
- xv) complying with any applicable laws, regulations or any industry codes, guidelines, requests from regulators, industry bodies, government agencies, law enforcement agencies and court orders.  
遵守任何適用的法律及規例, 及監管機構、業界團體、政府部門、執法機關所發出的業務守則、指引、要求, 並法庭頒令。

You may also provide us with certain personal data about other proposed insured person(s) or third parties such as your dependents, and if you do so you confirm that you have their consent to provide their personal data to us.

如您向我們提供關於其他受保人或第三者例如家屬的個人資料, 在提供當刻代表您確認您已獲取該等人士的同意以提供其個人資料予我們。

Such personal data may be disclosed, shared, divulged, supplied or otherwise transferred to the following persons for the purposes set out in the above paragraph or directly related purposes or as otherwise permitted by applicable law:

以上個人資料可能會被披露、分享、透露、提供或轉移到下列各方人士以作為上述或其直接有關之輔助用途, 或其他適用法律所容許的用途:

- a) any of our directors, officers, employees, representatives, agents or delegates;  
任何本公司的董事、人員、僱員、代表、代理人、或受委托人士;
- b) any of our shareholders or related corporations, and any of their successors or assigns, and their directors, officers, employees, representatives, agents or delegates;  
任何本公司的股東或連繫公司, 及其任何後繼或轉讓公司以及該公司董事、人員、僱員、代表、代理人、或受委托人士;

- c) any service providers, agents, contractors, delegates, suppliers or third parties (or subcontractors of the foregoing) which we may appoint from time to time to provide us with services in connection with the website and/ or the products and services that we offer to you, and their directors, officers, employees, representatives, agents or delegates;  
任何我們不時委任有關於公司網站及 / 或我們向您提供產品及服務的供應者、代理、承辦商、受委託者、供應商或第三者(或其分包商), 及其董事、人員、僱員、代表、代理人、或受委託人士;
- d) business partners (including reinsurers, brokers and bank partners), associates and third party service providers when reasonably necessary, and on a need-to-know basis;  
商業伙伴(包括再保險公司、經紀及銀行伙伴)、及有合理必要和需要知情的伙伴及第三者服務供應商;
- e) our professional advisers, consultants and auditors and any person who we believe in good faith to be your legal advisers or other professionals;  
我們的專業顧問、專家與核數師及任何我們秉誠相信為您的法律或其他專業顧問;
- f) anyone who takes over or may take over all or part of our rights or obligations under this Personal Information Collection Statement ("PICS") or anyone this PICS (or any part of it) is transferred to or may be transferred to;  
任何接管或可能接管我們於此《個人資料收集聲明》(「聲明」)下所有或部份權利或責任的人士, 或任何此聲明(或其部分) 正轉移或可能轉移其下之人士;
- g) another entity in the event Allianz is intended to be acquired by or merged with, or is acquired by or is merged with, that another entity;  
如安聯保險有意或正被其他公司收購或與其合併的該其他公司;
- h) any relevant governmental or regulatory authority pursuant to a request by any relevant governmental or regulatory authority, or any person to whom we are, in our belief in good faith, under an obligation to make disclosure as required by any applicable laws;  
如任何相關政府或監管機構要求, 則該政府或監管機構、或任何我們秉誠相信按適用法律有責任向其作出披露的人士;
- i) third parties for direct marketing purposes with your written consent and in accordance with our PICS (see further details in Direct Marketing section below); and/ or  
如您已按此聲明(詳情請閱以下的直接促銷部份)給予書面同意, 則促使直接促銷用途的第三者; 及 / 或
- j) parties whom assist us in carrying out the purposes laid out above in this PICS.  
協助我們進行此聲明內上述用途的人士。

We may transfer, store, process and/ or deal with such personal data outside Hong Kong. The personal data will only be transferred to locations where we are satisfied that adequate or comparable levels of protection are in place to protect personal data held in that jurisdiction, and (where we are required to do so) with your consent. In doing so, we will comply with all applicable data protection and privacy laws, including the Hong Kong Personal Data (Privacy) Ordinance.

我們或於香港境外地區轉移, 保存, 處理及 / 或處置該個人資料。但我們僅會在確保這些地區擁有令我們滿意的充足或具有足夠保護機制以保護該司法管轄區內的個人資料時, 方會將該個人資料轉移往該地區, 且我們會先獲取您的同意 (如屬於必須)。在這過程中, 我們會遵守所有適用資料保障及私隱法律, 包括香港個人資料 (私隱) 條例。

In the unlikely event that our or substantially all of any of our assets are acquired by an unrelated third party, such personal data may be one of the transferred assets. We may disclose the personal data, on a confidential basis, to any prospective transferee and its professional advisors (in each case whether within Hong Kong or overseas) for the purposes of their due diligence investigations, the completion of any such transaction and the continued operation of the acquired business.

在鮮有情況下當我們的全部或大部份資產被非關連第三者收購時, 該個人資料或屬於其中一項的被轉移資產。在保密的情況下, 我們或向任何潛在收購者或其專業顧問透露該個人資料 (此情況下不論香港或海外) 以供其盡職審查或完成任何收購業務下的交易及繼續營運的用途。

If you do not agree to the provision of the personal data requested or the use of such data for the above purposes, we may not be able to process your application and render the services or to otherwise correspond with you.

如果您不同意為上述用途按要提供個人資料, 我們或無法處理您的申請及為您提供服務。

Allianz Global Corporate & Specialty SE Hong Kong Branch is a company incorporated in the Federal of Republic of Germany with limited liabilities.  
安聯環球企業及專項保險香港分公司屬於德意志聯邦共和國註冊成立之有限公司。

We are committed to ensuring your personal data is kept secure and confidential and not kept for longer than is necessary.  
我們承諾確保您個人資料安全及保密, 並且不會存留超過所需時間。

Note: In case of discrepancies between the English and Chinese version of this PICS, the English version shall apply and prevail.  
註: 中文本與英文本如有歧義, 概以英文本為準。

## Appendix D - Letter of Authorisation 附件D - 授權書

<b>Your reference no.</b> 貴署的參考編號	:	
<b>Our claim no.</b> 我方的索償編號	:	

Dear Sirs and Madams 親愛的先生們和女士們,

<b>Date of incident</b> 事發日期	:	
<b>Location of incident</b> 事發地點	:	
<b>Description of incident</b> 事故描述		

I / We \_\_\_\_\_ holder of HKID No. / Passport No.  
 本 人 / 我 們 \_\_\_\_\_ , 香 港 身 份 証 號 碼 / 護 照 號 碼 為 \_\_\_\_\_ ,

hereby authorise Allianz Global Corporate & Specialty SE (incorporated in the Federal Republic of Germany with limited liabilities) Hong Kong Branch to obtain a copy of the statement and/ or report I/ We made to you following the captioned incident.

現授權安聯環球企業及專項保險(於德意志聯邦共和國註冊成立之有限公司)香港分公司向貴署索取有關上述事故之口供及 / 或報告一份。

\_\_\_\_\_  
 Full Name of Informant  
 報案人全名

\_\_\_\_\_  
 Signature of Informant  
 報案人簽署

\_\_\_\_\_  
 Signature Date (DD/MM/YYYY)  
 簽署日期 (日/月/年)