



財產/ 營業受阻保險索償申請表 – 包括家居、店舖及辦公室綜合保險

Property Damage And/ Or Business Interruption Claim Form – Including Home, Shop and Office Protector

THE CLAIMANT IS REQUESTED TO NOTE 注意事項：

- (a) Before submitting details of loss or damage, the Claimant is requested to read the conditions of the policy.
申索人填寫此肇事報告書前請先細閱保單條款。
- (b) This form must be completed and delivered to the Company within 7 days from the date of the accident.
申索人請於收到此報告書七天內填寫並交回敝公司辦理。
- (c) The Claimant must promptly take all practicable steps including reporting to the Police immediately for discovering and prosecuting any guilty party or parties, if any, and for tracing and recovering the lost property.
申索人應盡快及配合敝公司一切方法，包括向警方提供一切所需資料，以便處理向第三者追討損失之事宜。
- (d) If any false statement or declaration be made in support of a claim, the policy would be rendered void. Therefore, care should be exercised in completing this form.
請保戶仔細填寫此報告書，如發申報資料有任何虛報、失實，保單將會被取消。
- (e) Particulars of the claim should be provided as detailed as possible. Any suspicious act by any party should be communicated to the Company immediately.
保戶如對此報告書或保單上任何資料有疑問，請與敝公司聯絡。

1. Insured's Name 保戶名稱 Policy Number 保單編號.....
(Please state whether Mr., Mrs. Or Miss 請註先生/ 太太/ 女士.)

2. Address 地址.....

3. Occupation 職業/業務 Tel. No 電話(Home 住宅) (Office 辦公室).....

4. Date of loss or Damage occurred 事發日期..... Time 時間..... Place 地點.....

5. Date of loss or Damage discovered 發現損失/損毀日期.....

6. Police Station to which loss was reported 報案地點..... Date 日期.....
and the report case No. 及報案號碼.....

7. Please state briefly to the best of your knowledge and belief how the loss or damage occurred 請簡述意外詳情:
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8. Any suspected person that may have caused this accident?
依閣下所見，此事有否對任何人有所懷疑，如有，請詳述。
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9. Are you the sole owner of the property lost or damaged? 受損財物是否屬於閣下個人擁有?.....

10. Is the property in respect of which you are making a claim also insured with other Insurer regardless as to whether it is insured against all or part of the risk covered by the above Policy? If so, please give particulars. 閣下申索損失之財物，有否同時向其他保險公司投保? 如有，請詳述其保險公司名稱及保單編號。
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11. Have you ever made a claim to any Insurer in respect of the properties and/ or any of the items covered by the above Policy?
If so, please give particulars: 閣下申索損失之財物，有否同時向其他保險公司申請索償? 如有，請詳述。

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12. Please state the total amount claimed as set out in detail overleaf 請使用附頁詳列申索銀碼

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DECLARATION

I believe that the facts stated in this Property Damage and Business Interruption Claim Form are true and the opinion expressed in it is honestly held.

聲明

本人相信本財產/營業受阻保險索償申請表所述事實屬實，而其中所表達的意見屬真誠地持有的。

DATE 日期SIGNATURE OF CLAIMANT 保戶簽署.....

