



Tugu Insurance Company Limited 德高保險有限公司

(Incorporated in Hong Kong) (在香港註冊成立)

44F., Office Tower, Convention Plaza, 1 Harbour Road, Wanchai, Hong Kong. Tel.: (852)2824-2939 Fax: (852)2824-3070

香港灣仔港灣道一號會展廣場辦公大樓四十四樓 電話: (852)2824-2939 傳真: (852)2824-3070

Website 網址: www.tughk.com

PERSONAL ACCIDENT AND SICKNESS CLAIM FORM

NOTES : If the claimant is too ill to write, this form should be completed by the responsible person in charge of him.

No claim can be considered without the properly completed medical certificate overleaf, furnished at the expense of the claimant.

Full name of Insured				Policy / Coupon No.	
Address					
Tel. No.		Age		Height	
Occupation				Weight	

IF ACCIDENT, PLEASE ALSO STATE -

Date and time of accident		Were you perfectly sober?	
Where did accident occur?			
How did it happen, and what were you doing at the time?			
Names and addresses of witnesses			

Details of injury/illness			
Have you previously suffered injury to the same part, or a similar illness?			
Date you were first totally incapacitated		Date of doctor's first attendance	
Name of doctor first attending			
Who is your usual doctor?			
For what previous injury or illness have you received medical attention?			
Please give full details with dates			
What occupations have you followed since the date of proposal for this insurance?			
Were you admitted to a hospital?		If YES, give	
a) Dates of confinement	From		To
b) Name and address of hospital			
c) Name and address of Doctor authorizing your admission			
Have you been prevented, on your doctor's advice, from engaging in work of any kind?			
If YES, give dates:	From		To
			(State "continuing" if necessary)
Are you now capable of any kind of work?			
If YES, what work and from what date?			
Are you now capable of full work?		If YES, from what date?	
Are you entitled to claim compensation for this accident / illness from any other insurer?			
If YES, give particulars			

I declare that the particulars upon this form are true and complete.

Date		Signature	
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MEDICAL CERTIFICATE

(Any fee for this certificate is chargeable to the claimant)

Full name of Insured

Date accident occurred / illness commenced

Date of your first attendance Are you still in attendance?

Are you the claimant's usual medical attendant?

If YES, how long have you known him?

When and for what previous injuries and illnesses have you attended him?

Full details of present injury/illness
(if applicable, state "left" or "right")

To what is the injury/illness directly attributable?

If accident, have you any reason to believe the claimant was not sober, or was under the influence of drugs at the time?

If notifiable illness, give date notified

Is or was the claimant suffering from any other complaint which might have contributed to his present condition or might delay recovery?
If so, please give details

For how long has the claimant been -

(a) totally incapable of any kind of work:	FROM	<input type="text"/>	TO	<input type="text"/>
(b) able to perform part but not full work:	FROM	<input type="text"/>	TO	<input type="text"/>
(c) confined in a hospital:	FROM	<input type="text"/>	TO	<input type="text"/>

What is the claimant's present condition?

Please state the probable further duration of incapacity -

(a) totally incapable of any kind of work:	<input type="text"/>	weeks
(b) able to perform part but not full work:	<input type="text"/>	weeks

General remarks

Date

Signature

Qualifications

Address



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Personal Information Collection Statement

Tugu Insurance Company Limited ("the Company") may collect personal information to enable the Company to carry on insurance business. The personal information may be used for the following purposes of:

- a. processing and assessing of applications for any insurance products and daily operation of the related services;
- b. any alterations, variations, cancellation or renewal of any insurance and related services;
- c. any claims or investigation or analysis of such claims;
- d. detect and prevent fraud (whether or not relating to the policy issued in respect of this application);
- e. exercising any right under the insurance policy including right of subrogation, if applicable;
- f. meeting the requirements under any law and regulation, requests from regulators, industry bodies, government agencies and court order; and
- g. any activities directly relating 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, contractor or third party service provider who provides administrative, telecommunications, computer, payment, debt collection, 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. health care professionals; hospitals;
- g. auditors;
- h. organisations that consolidate claims and underwriting information for the insurance industry;
- i. fraud prevention organisations;
- j. other insurance companies (whether directly or through fraud prevention organisation or other persons named in this paragraph);
- k. the police and databases or registers (and their operators) used by the insurance industry to analyse and check information provided against existing information; and
- l. any party under a duty of confidentiality to the Company including a group company of the Company which has undertaken to keep such information confidential.

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.

You may seek 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, Tugu Insurance Company Limited, 44F., Office Tower, Convention Plaza, 1 Harbour Road, Wanchai, Hong Kong. (If there is any inconsistency between the English and Chinese version of this Personal Information Collection Statement, the English version shall prevail.)

Privacy Policy Statement

Tugu Insurance Company Limited (the "Company") is committed to full compliance with the requirements of the Personal Data (Privacy) Ordinance, Cap.486 ("the Ordinance") in respect of the collection, use, retention and disclosure of personal information.

At all times, the Company shall endeavour to ensure all collection and/or storage and/or transmission and/or usage of personal data from individuals be done in accordance with the obligations and requirements of the Ordinance. In doing so, the Company will ensure that staff involved in handling personal data comply with the strictest standards of security and confidentiality.

We collect personal data in a number of ways. The most common circumstances in which we collect personal data are when you enquire about products we offer, you apply for an insurance product, or make a claim.

The types of personal data we collect from you will depend on the circumstances in which that information is collected. We may collect details including your name, HKID, date of birth, contact details and other personal data which is relevant to the insurance product you are applying for or the claim you are making.

The purposes for which your personal data will be used will depend on the circumstances in which that personal data is collected. We will inform you of the purposes for which we intend to use your personal data in the Personal Information Collection Statement at or before the time we collect your personal data.

Generally, we may use your personal data for the purpose for which you provided it to us; for the purposes which are directly related to the purposes for which you provided it to us; and any other purposes to which you have consented.

Your personal data may be provided or transferred to other third party. The third parties to whom your personal data will be disclosed will depend on the purposes for which that personal data is used. We will inform you of the third parties to whom your personal data will be disclosed in the Personal Information Collection Statement at or before the time we collect your personal data.

Generally, we may disclose your personal data as necessary for the purpose for which you provided it to us; for the purposes which are directly related to the purposes for which you provided it to us; and any other purposes to which you have consented.

In exceptional circumstances, we may be required or permitted by law to disclose personal data, for example to law enforcement authorities or to prevent a serious threat to public safety.

We will only retain the personal data for as long as it is necessary to fulfill the original or directly related purposes for which such data was collected, unless the personal data need to be retained to satisfy any applicable statutory, contractual or tortious obligations.

Under the Ordinance, individuals have the right to request access to and correction of their personal data held by the Company. Should you wish to access or correct your personal information held by us, please present your enquiry by writing to the Data Protection Officer of the Company at 44F., Office Tower, Convention Plaza, 1 Harbour Road, Wanchai, Hong Kong. Any requests or access to and correction of personal information will be dealt with promptly and we will use our best endeavours to handle such requests before the expiry of 40 days maximum. A reasonable fee may be charged to offset the Company's administration and actual costs incurred in the complying with your data access request.

(If there is any inconsistency between the English and Chinese version of this Privacy Policy Statement, the English version shall prevail.)



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個人資料收集聲明

德高保險有限公司(「本公司」)會收集個人資料以經營保險業務。個人資料會被用作下列用途：

- 處理及評估任何保險產品的申請和相關服務的日常運作；
- 修改、變更、取消或更新任何保險和相關服務；
- 任何申索或調查或分析有關申索；
- 偵測和防止欺詐行為(無論是否與就此申請而發出的保單有關)；
- 如適用，行使任何保險單內訂明的權利，包括代位權；
- 符合任何法例和附屬法例的規定，監管機構、行業團體和政府代理的要求及法庭命令；及
- 任何與上述用途直接有關的活動。

本公司可就上一段列明的用途把閣下給予本公司的資料提供或轉交至以下列在香港境內或海外的各方：

- 任何代理、承包商或第三方服務供應商，包括提供行政、電訊、電腦、付款、收債、數據處理或儲存或相關服務的供應商，或任何其他經營保險或分保相關業務的公司、或中介人、或提供申索或調查或其他提供與保險業務有關的服務供應商，作任何上述或相關的用途；
- 任何已成立或不時成立的協會、聯會或與保險公司相似的組織(「聯會」)作任何上述或相關的用途，或協助聯會履行其規管職責或其他不時獲分配的職責，而該等職責乃是為了保險行業或聯會任何會員的利益而合理地要求；
- 聯會任何成員由聯會作任何上述或相關用途；
- 監管機構；
- 律師；
- 醫護專業人士；醫院；
- 核數師；
- 整合保險業申索和承保資料的組織；
- 防欺詐組織；
- 其他保險公司(無論是直接地，或是通過防欺詐組織或本段中指名的其他人士)；
- 警察；和保險業就現有資料而對所提供的資料作出分析和檢查的數據庫或登記冊(及其運營者)；及
- 任何一方對本公司有保密責任，包括承諾將該等資料保持機密的本公司集團公司。

如閣下不同意使用其個人資料作上述用途，本公司則無法處理閣下的申請和提供服務。

閣下可查閱和更正本公司持有有關閣下的任何個人資料。閣下可就有關查閱和更正的要求致函至香港灣仔港灣道一號會展廣場辦公大樓四十四樓德高保險有限公司資料保障主任。本公司有權收取相關的行政費用。

(若此個人資料收集聲明之中、英文版本有歧異之處，應以英文版為準。)

私隱政策聲明

德高保險有限公司(「本公司」)致力恪守第 486 章《個人資料(私隱)條例》(「條例」)有關收集、使用、保留和披露個人資料的規定。

本公司將無時無刻盡力確保所收集及/或儲存及/或傳送及/或使用的所有個人資料，須遵照條例規定的責任和要求處理。在執行上，本公司將確保負責處理個人資料的員工遵守最嚴格的保安及保密標準。

我們以多個途徑收集個人資料，當中最常見的情況包括當閣下查詢本公司提供的產品、向本公司申請保險產品或提出申索時。

我們向閣下收集個人資料所屬的類別，視乎該資料是在甚麼情況下收集，可能包括閣下的姓名、香港身份證號碼、聯絡詳情及與閣下申請的保險產品或閣下的索償相關的其他個人資料。

閣下的個人資料用作甚麼用途視乎收集該資料的情況而定。我們會於收集閣下的個人資料時或之前，在「個人資料收集聲明」內通知閣下我們打算使用其個人資料的用途。

一般而言，我們可使用閣下的個人資料作閣下提供有關資料予我們的用途、與該等用途直接相關的用途及任何其他閣下已同意的用途。

我們可提供或轉交閣下的個人資料至其他第三方。我們向哪些第三方披露閣下的個人資料，視乎該資料被用作甚麼用途。我們會於收集閣下的個人資料時或之前，在「個人資料收集聲明」內通知閣下我們打算向哪些第三方披露閣下的個人資料。

一般而言，我們可因應閣下提供有關資料予我們的用途、與該等用途直接相關的用途及任何其他閣下已同意的用途的需要而披露閣下的個人資料。

在特殊情況下，我們可因應法律規定或准許，如按照執法機關的要求或為防止危害公眾安全，披露有關個人資料。

我們保留有關個人資料的時間並不會長於達致收集該等資料原來或直接相關的用途，除非個人資料須受任何適用的法定、合約或侵權責任的規限而被保留。

根據條例規定，個人有權要求查閱和更正本公司持有關於其本人的個人資料。若閣下欲查閱或更正本公司持有關於其本人的個人資料，請致函至香港灣仔港灣道一號會展廣場辦公大樓四十四樓德高保險有限公司資料保障主任表達有關要求。我們會將盡快處理任何關於查閱或更正個人資料的要求，並盡力於收到有關要求的 40 天限期內予以回覆。本公司或會收取合理的費用作行政和實際成本以便處理閣下的有關要求。

(若此私隱政策聲明之中、英文版本有歧異之處，應以英文版為準。)

2025年6月