

Travel Insurance Claim Form

旅遊保險索償表格

A) IMPORTANT NOTES 注意事項

- Please complete and submit this Claim Form to *Concord Insurance Company Limited (the "Company")* within 30 days from the date of incident, together with the supporting document(s) by post or email.
請在事件發生後 30 日內填妥此索償表格, 連同證明文件電郵或郵寄至 *Concord Insurance Company Limited (「本公司」)*。
** In the event of Accidental death, an immediate notice thereof must be given to the Company by the Insured's legal representative.*
倘因意外死亡之索償, 投保人的法定代理人必須立即通知本公司。
- Please attach additional sheet(s) if necessary.
如有需要, 請附上額外紙張。
- The issue of this claim form is not an admission of liability by the Company.
發出此索償申請表並不代表本公司承認任何責任。
- Supplementary information / document(s) may be required by the Company if necessary.
如有需要, 本公司將要求閣下提供補充資料 / 文件以處理索償事宜。
- For inquiry, please call the Company's Claims Services Hotline at 2156 0905 or email to claims@concordinsurance.com.hk.
如有任何查詢, 請致電本公司的索償服務熱線 2156 0905 或電郵至 claims@concordinsurance.com.hk。

B) THE INSURED 投保人

Name of Insured 投保人姓名	_____	Policy no. 保單號碼	_____
Contact person 聯絡人姓名	_____	Tel. no. 電話號碼	_____
Address 地址	_____		
Email address 電郵地址	_____		

C) INSURED PERSON / CLAIMANT 受保人 / 索償人

Name of Insured Person / Claimant 受保人 / 索償人姓名	_____	Sex 性別	_____
HKID no. / Passport no. 香港身份證 / 護照號碼	_____	Date of birth 出生日期	_____
Address 地址	_____		
Email address 電郵地址	_____		

D) GENERAL INFORMATION 一般資料

Travel period 旅遊日期	Form 由	To 至
Are you making / Will you make any other insurance claim as a result of this incident? 閣下有否就此事件而作出或將會作出任何其他保險索償申請? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 有		
(If yes, please provide the name of Insurance Company and policy number. 如有, 請提供保險公司名稱及保單號碼。)		
* Please send copy of the payment document if other insurance company has already paid the claim. 若其他保險公司曾作出賠償, 請提供該保險公司之賠償證明。		

(Please complete the relevant claims section(s). 請填寫相關索償項目。)

E) MEDICAL EXPENSES 醫療費用

Date of incident / Symptom firstly appeared 事發 / 首次出現病徵日期		_____
Location of incident / Symptom firstly appeared 事發 / 首次出現病徵地點		_____
Details of incident / Symptom 請詳述事件經過 / 病徵		_____ _____
Was the injury due to any other person's fault? 如屬受傷個案, 請說明是否因為任何第三者的過錯? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 是 (If yes, please provide the details of the third party, including the name, address and contact number.) (如是, 請提供第三者的相關資料, 包括姓名、地址及聯絡電話號碼。)		
Overseas medical expenses amount (Please specify the currency) 海外醫療費用金額 (請註明貨幣)	_____	Diagnosis 診斷結果 _____
Do you need to receive follow up treatment(s) in Hong Kong? 閣下是否需要在香港繼續治療 / 覆診? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 是 (Please provide the following details. 請提供以下資料。)		
Follow-up medical expenses in Hong Kong (HKD) 香港跟進治療 / 覆診的醫療費用 (港元)	_____	Estimated recovery date 預計康復日期 _____

F) PERSONAL ACCIDENT / PERMANENT DISABLEMENT 人身意外或永久傷殘

Date of incident and time 事發日期及時間	_____	Location 事發地點	_____
Insured Person's condition 受保人之狀況	<input type="checkbox"/> Death 死亡	<input type="checkbox"/> Injured 受傷	(Please state the sustained injury(ies). 請列出所遭受的損傷。)
Details of incident 請詳述事件經過			

G) LOSS OF / DAMAGE TO PERSONAL PROPERTY 個人財物遺失或損壞

Date of incident and time 事發日期及時間	_____	Location 事發地點	_____
Did you report this incident to the local police? 閣下有否就此事件向當地警方報案? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 有 (Please provide the following information. 請提供以下資料。)			
Date of report 報案日期	_____	Report no. 檔案編號	_____
Details of incident 請詳述事件經過			

Loss / Damage item (Please specify the Brand and Model) 遺失 / 損壞項目 (請註明牌子及型號)	Date of purchase 購買日期	Original purchase price (Please specify the currency) 購買時價錢 (請註明貨幣)	Repair / Replacement cost (Please specify the currency) 修理 / 更換費用 (請註明貨幣)
* Enclose photographs, if any. 如有相片, 請寄附 *			

H) DELAY, TRIP CANCELLATION & TRIP INTERRUPTION 延誤、取消旅程及行程阻礙

Claim item(s) (can choose more than one) 索償事項 (可選多於一項)

Travel delay 啟程延誤 Baggage delay 行李延誤 Trip Cancellation 取消旅程

Trip curtailment 行程縮短 Trip re-arrangement 重整行程 Others 其他 _____

H1. Travel delay 啟程延誤

	Departure date and time 出發日期及時間	Arrival date and time 到達日期及時間
Scheduled flight no. / public common carrier no. 原定航班編號或公共交通工具編號		
Actual flight no. / public common carrier no. 實際航班編號或公共交通工具編號		
Delayed hour(s) 延誤時數	Hours 小時	Mins 分鐘
Reason for travel delay 啟程延誤原因	Is the scheduled flight a domestic flight? 原定航班是否內陸機? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 是	
<input type="checkbox"/> Adverse weather condition 惡劣天氣	<input type="checkbox"/> Riot / Civil commotion 暴動 / 民間騷亂	<input type="checkbox"/> Mechanical failure 機械故障
<input type="checkbox"/> Airport closure 機場關閉	<input type="checkbox"/> Other, please specify 其他, 請註明 _____	

* Please provide the supporting documents issued by Public Common Carrier to certify the reason and the length of delay.
請提供公共交通工具公司發出的文件證明延誤原因及時間。

Extra accommodation expenses being caused by travel delay. (Please specify the currency)
因啟程延誤而引致的額外住宿費用。(請註明貨幣) _____

* Applicable if the delay meets the minimum requirement. 延誤時數需達至最低要求。

H2. Baggage delay 行李延誤

Actual arrival date and time of the Insured 受保人實際抵達目的地日期及時間	Actual arrival date and time of the baggage 行李實際到達日期及時間	Destination 目的地	Delayed hour(s) 延誤時數	
			Hours 小時	Mins 分鐘

H3. Trip cancellation 取消旅程 / Trip curtailment 縮短行程 / Trip re-arrangement 重整行程

Period of original journey 原定行程日期		Period of curtailed / re-arranged journey 縮短 / 重整後之行程日期	
From 由	To 至	From 由	To 至

Reason of Trip cancellation / Trip curtailment / Trip re-arrangement

取消旅程 / 縮短行程 / 重整行程原因

Insured, Immediate Family Member, Domestic Partner / Travel Companions' death, serious illness / serious bodily injury within 90 days before departure date
受保人、直系親屬、同居伴侶或同行人士於出發前 90 天內身故、患嚴重疾病或受傷

Adverse Weather Conditions / Natural Disasters / Unexpected Outbreak of Strike / Industrial Action / Riot / Civil Commotion

/ Hijack / Terrorism** at destination within 7 days before departure date (** Please delete, if not applicable)

出發前 7 天內目的地發生惡劣天氣 / 自然災害 / 罷工 / 工業行動 / 暴動 / 民間騷亂 / 劫機 / 恐怖活動** (**如不適用, 請刪除)

Fire / Flood / Burglary** at home of Insured / Travel Companions (** Please delete, if not applicable)

受保人或同行人士居所發生火災 / 水浸 / 被盜竊** (**如不適用, 請刪除)

Other, please specify

其他, 請註明 _____

Prepaid and unused expenses (Please specify the currency)

已支付及未有使用的費用 (請註明貨幣) _____

Did you apply for any refund of prepaid and unused expenses?

閣下有否申請退還已支付及未有使用的費用?

No, please specify the reason

沒有, 請註明原因 _____

Yes, please state the non-refundable expenses (Please specify the currency)

有, 請列明不可退還的費用 (請註明貨幣) _____

Additional traveling expenses incurred (if any) (Please specify the currency)

額外衍生的交通費用 (如有) (請註明貨幣) _____

Additional accommodation expenses incurred (if any) (Please specify the currency)

額外衍生的住宿費用 (如有) (請註明貨幣) _____

* Please apply for the refund of prepaid and unused travel and accommodation expenses from the related company(ies) before making this claim.

請在提交此索償前向有關公司申請退還已支付及未有使用的交通及住宿費用。

I) PERSONAL LIABILITY 個人責任

Date of incident and time 事發日期及時間	_____	Location 事發地點	_____
Did you report this incident to the local police? 閣下有否就此事件向當地警方報案? <input type="checkbox"/> No 否 <input type="checkbox"/> Yes 有 (Please provide the following information. 請提供以下資料。)			
Date of report 報案日期	_____	Report no. 檔案編號	_____
Details of incident 請詳述事件經過			

Name of property owner / injured 物主 / 傷者姓名			
		a)	_____
		b)	_____
Details and extent of damage / extent of injury 損壞之詳情及程度 / 傷者之詳情及傷勢			
		a)	_____
		b)	_____
<i>* Please forward the Company all correspondence relating to any third party claim, and do not admit liability or enter into any settlement agreement with any third party without the Company's prior written consent. 如收到第三者的索償信件, 請將該等信件交予本公司。如未得到本公司之書面同意, 切勿與第三者私下作出承諾或訂立協議。</i>			

J) OTHER CLAIM 其他索償

Claim item(s) (can choose more than one) 索償事項 (可選多於一項)	<input type="checkbox"/> Golf protection 高爾夫球保障	<input type="checkbox"/> Rental vehicle excess 租車自負額	
	<input type="checkbox"/> Other, please specify 其他, 請註明	_____	
Date of incident and time 事發日期及時間	_____	Location 事發地點	_____
Details of incident 請詳述事件經過			

Total amount of claim (Please specify the currency) 總索償金額 (請註明貨幣)			

DECLARATION & AUTHORIZATION 聲明及授權書

1. I/We hereby declare that to the best of my/our knowledge and belief the above statement and particulars contained herein are in all respects true and complete and are made without reservation of any kind.
本人/我們聲明此表格內填報的資料, 就本人/我們所知所信, 全部正確無訛, 並無任何保留。
2. I/We hereby authorize any physician, medical practitioners, hospitals or clinics by whom or where I/We have been observed or treated to disclose full particulars about my/our health or provide the relevant report or document to Concord Insurance Company Limited (the "Company") or its representative.
本人/我們授權任何曾替本人/我們作診療之醫生、醫務人員、醫院或診所向 Concord Insurance Company Limited (「本公司」) 或其代表提供有關本人/我們病歷之資料或提供有關的報告或文件。
3. I/We hereby further authorize any parties, including but not limited to police and government authorities, airlines, travel agents, insurance companies etc. who are in possession of my/our insurance proposal information, claim information or any related information to release part or all of the information about me/us or related incidents of injury, loss or damage to the Company or its representative.
本人/我們授權持有本人/我們投保資料, 索償紀錄或任何有關資料之一方, 包括但不限於警方及政府機構、航空公司、旅遊公司、保險公司等任何有關人士或組織, 可以將部份或全部有關本人/我們是次或相關事件等資料提供予本公司或其代表。
4. I/We have read, understood and agreed to the Personal Information Collection Statement attached to this claim form.
本人/我們已閱讀、明白及同意隨本索償表格附上的個人資料收集聲明。
5. A photocopy of this authorization shall be considered as effective and valid as the original.
此授權書之影印本與正本同屬有效。

Signature of the Insured
投保人簽署

Date
日期

(with company chop, if appropriate)
(公司蓋章, 如適用)

Signature of Insured Person / Claimant
受保人 / 索償人簽署

Date
日期

The Personal Data (Privacy) Ordinance Personal Information Collection Statement (the "Statement")

In compliance with the Personal Data (Privacy) Ordinance (the "Ordinance"), Concord Insurance Company Limited (the "Company") would like to inform you of the following:

- (1) From time to time, it is necessary for you to supply the Company with personal data in connection with the application for and provision of insurance products and services as well as the carrying out by the Company of other services relating to these insurance products and services. Failure to supply such data may result in the Company being unable to process your insurance applications or to provide or continue to provide the insurance products and services and/or the related services to you. Data may also be collected by the Company from you in the ordinary course of the Company's business, for example, when you lodge insurance claims with the Company or generally communicate verbally or in writing with the Company, by means of documentation or telephone recording system, as the case may be.

(2) PURPOSES FOR COLLECTING PERSONAL DATA

Personal data relating to you may be used for the following purposes:

- (i) processing applications for insurance products and services;
- (ii) providing insurance products and services to you and processing requests made by you in relation to our insurance products and services, including but not limited to requests for addition, alteration or deletion of insurance benefits or insured members, setting up of direct debit facilities as well as cancellation, renewal, or reinstatement of insurance policies;
- (iii) processing, adjudicating and defending insurance claims as well as conducting any incidental investigation;
- (iv) performing functions and activities incidental to the provision of insurance products and services such as identity verification, data matching and reinsurance arrangement;
- (v) exercising the Company's rights in connection with the provision of insurance products and services to you from time to time, for example, to recover indebtedness from you;
- (vi) designing insurance products and services with a view to improving the Company's service;
- (vii) preparing statistics and conducting research;
- (viii) marketing services, products and other subjects (please see further details in paragraph (4) of this Statement);
- (ix) complying with the obligations, requirements and/or arrangements for disclosing and using data that bind on or apply to the Company or that it is expected to comply according to:
 - (a) any law binding or applying to it within or outside the Hong Kong Special Administrative Region ("Hong Kong") existing currently and in the future;
 - (b) any guidelines or guidance given or issued by any legal, regulatory, governmental, tax, law enforcement or other authorities, or self-regulatory or industry bodies or associations of insurance or financial services providers within or outside Hong Kong existing currently and in the future; or
 - (c) any present or future contractual or other commitment with local or foreign legal, regulatory, governmental, tax, law enforcement or other authorities, or self-regulatory or industry bodies or associations of insurance or financial services providers that is assumed by or imposed on the Company by reason of its financial, commercial, business or other interests or activities in or related to the jurisdiction of the relevant local or foreign legal, regulatory, governmental, tax, law enforcement or other authorities, or self-regulatory or industry bodies or associations;
- (x) complying with any obligations, requirements, policies, procedures, measures or arrangements for compliance with sanctions or prevention or detection of money laundering, terrorist financing or other unlawful activities;
- (xi) enabling an actual or proposed assignee, transferee, participant or sub-participant of the Company's rights or business to evaluate the transaction intended to be the subject of the assignment, transfer, participation or sub-participation; and
- (xii) any other purposes relating to the purposes listed above.

(3) TRANSFER OF PERSONAL DATA

Personal data held by the Company relating to you will be kept confidential but the Company may provide such data to the following parties for the purposes set out in paragraph (2) of this Statement: -

- (i) any agent, contractor or third party service provider who provides services to the Company in connection with the operation of its business including administrative, telecommunications, computer, payment, data processing, storage, investigation and debt collection services as well as other services incidental to the provision of insurance products and services by the Company (such as loss adjusters, claim investigators, debt collection agencies, data processing companies and professional advisors);
- (ii) any other person or entity under a duty of confidentiality to the Company;
- (iii) reinsurance companies with whom the Company has or proposes to have dealings;
- (iv) any person or entity to whom the Company is under an obligation or otherwise required to make disclosure under the requirements of any law or rules, regulations, codes of practice, guidelines or guidance given or issued by any legal, regulatory, governmental, tax, law enforcement or other authorities, or self-regulatory or industry bodies or associations of insurance or financial services providers binding on or applying to the Company or with which the Company is expected to comply, or any

disclosure pursuant to any contractual or other commitment of the Company with local or foreign legal, regulatory, governmental, tax, law enforcement or other authorities, or self-regulatory or industry bodies or associations of insurance or financial services providers, all of which may be within or outside Hong Kong and may be existing currently and in the future;

- (v) any actual or proposed assignee, transferee, participant or sub-participant of the Company's rights or business;
- (vi) third party reward, loyalty, co-branding and privileges program providers; and
- (vii) external service providers that the Company engages for the purposes set out in paragraph (2)(viii) of this Statement.

Such information may be transferred to a place outside Hong Kong.

(4) USE OF PERSONAL DATA IN DIRECT MARKETING

The Company may use your personal data in direct marketing. Save in the circumstances exempted in the Ordinance, the Company cannot so use your personal data without your consent (which includes an indication of no objection). In this connection, please note that:

- (i) the name, contact details, products and services portfolio information, transaction pattern and behavior, financial background and demographic data of you held by the Company from time to time may be used by the Company in direct marketing;
- (ii) the following services, products and subjects may be marketed:
 - (a) insurance, financial and related services and products; and
 - (b) reward, loyalty or privileges programs and related services and products;
- (iii) the above services, products and subjects may be provided by the Company and/or third party reward, loyalty, co-branding or privileges program providers.

If you do not wish the Company to use your personal data in direct marketing as described above, you may exercise your opt-out right by notifying the Company. You may write to the Company at the address or fax number provided in paragraph (5) of this Statement, or provide the Company with your opt-out choice in the relevant application form (if applicable).

(5) DATA ACCESS AND CORRECTION RIGHT

In accordance with the Ordinance, you have the right to check whether the Company holds personal data about you and to require the Company to provide a copy of such data (data access right) and to correct the data which is inaccurate. Such requests can be made in writing to the Company at the following address or fax number:

Concord Insurance Company Limited
Unit 904-906, 9/F, K11 ATELIER,
728 King's Road, Quarry Bay,
Hong Kong

Fax: (852) 2815 3630

According to the Ordinance, the Company has the right to charge a reasonable fee for the processing of any data access request.

- (6) You also have the right, by writing to the Company at the address or fax number provided in paragraph (5) of this Statement, to request for the Company's policies and practices in relation to personal data and to be informed of the kinds of personal data held by the Company.
- (7) The Company keeps your personal data only for a period reasonably necessary for any of the above purposes or as prescribed by the applicable laws or regulations.
- (8) Should you have any query with this Statement, please do not hesitate to contact the Company at 2543 4893.
- (9) Nothing in this Statement shall limit the rights of the customers under the Ordinance.
- (10) The Company retains the right to change this Statement.

November 2021

個人資料 (私隱) 條例 - 收集個人資料聲明 (『 本聲明 』)

為依從個人資料 (私隱) 條例 (『 條例 』) , Concord Insurance Company Limited (『 本公司 』) 特此通知閣下以下事項 :

(1) 在申請及接受保險產品及服務時 , 及當本公司提供與保險產品及服務相關之其他服務時 , 閣下有需要不時向本公司提供個人資料。若閣下未能提供該等資料 , 可能會令本公司無法處理閣下的保險申請或向閣下提供或繼續提供保險產品及服務及/或其他相關服務。本公司亦可能會在日常業務運作的過程中向閣下收集資料 , 例如當閣下向本公司提出保險索償或當在一般情況下以口頭或書面形式與本公司溝通。

(2) 個人資料收集目的

閣下的個人資料可能會用作下列用途 :

- (i) 處理保險產品及服務的申請 ;
- (ii) 為閣下提供保險產品及服務及處理閣下就本公司的保險產品及服務提出的要求 , 包括但不限於要求增加、更改或刪除保障項目或受保成員 , 訂立直接付款安排及保單取消、更新或復效申請 ;
- (iii) 處理、判定保險索償及就索償抗辯 , 包括進行任何附帶調查 ;
- (iv) 執行與所提供的保險產品及服務相關的功能及活動 , 如核實身份、資料核對及再保險之安排 ;
- (v) 行使本公司因不時向閣下提供保險產品及服務而享有的權利 , 例如向閣下追討欠款 ;
- (vi) 設計保險產品及服務以提升本公司的服務質素 ;
- (vii) 製作數據及進行研究 ;
- (viii) 營銷服務、產品及其他標的 (詳情請參閱本聲明第(4)段) ;
- (ix) 履行根據下列對本公司具有約束力或適用或期望其遵守的就披露及使用資料的義務、規定及/或安排 :
 - (a) 不論於香港特別行政區 (『 香港 』) 境內或境外及不論目前或將來存在的對其具法律約束力或適用的任何法律 ;
 - (b) 不論於香港境內或境外及不論目前或將來存在的任何法律、監管、政府、稅務、執法或其他機關 , 或保險或金融服務供應商的自律監管或行業組織或協會所作出或發出的任何指引或指導 ; 或
 - (c) 本公司因其位於或跟相關本地或外地的法律、監管、政府、稅務、執法或其他機關 , 或保險或金融服務供應商的自律監管或行業組織或協會的司法管轄區有關的金融、商業、業務或其他利益或活動 , 而向該等本地或外地的法律、監管、政府、稅務、執法或其他機關 , 或有關的自律監管或行業組織或協會承擔或被彼等施加的任何目前或將來的合約或其他承諾 ;
- (x) 遵守本公司為符合制裁或預防或偵測清洗黑錢、恐怖分子融資活動或其他非法活動的任何義務、要求、政策、程序、措施或安排 ;
- (xi) 允許本公司的權益或業務的實際或建議承讓人、受讓人、參與人或附屬參與人 , 就擬涉及的轉讓、出讓、參與或附屬參與的交易進行評估 ; 及
- (xii) 與上述有關的其他用途。

(3) 個人資料的轉移

存於本公司的個人資料將會保密 , 但本公司可能會向以下各方透露該等資料作本聲明第(2)段所列出的用途 :

- (i) 任何代理人、承包商或就本公司之業務運作 , 包括行政、電訊、電腦、付款、資料處理、儲存、調查和收數服務 , 或就與保險產品及服務相關之其他服務 , 向本公司提供服務的第三方服務供應者 (如公證行、理賠調查員、收數公司、資料處理公司及專業顧問) ;
- (ii) 任何對本公司負有保密責任的其他人士 ;
- (iii) 與本公司有或將有商業往來的再保險公司 ;
- (iv) 本公司為遵守任何法律規定 , 或根據法律、監管、政府、稅務、執法或其他機關 , 或保險或金融服務供應商的自律監管或行業組織或協會所作出或發出對本公司具有約束力或適用或期望其遵守的規則、規例、實務守則、指引或指導 , 或根據本公司向本地或外地的法律、監管、政府、稅務、執法或其他機關 , 或保險或金

融服務供應商的自律監管或行業組織或協會的任何合約或其他承諾 (以上不論於香港境內或境外及不論目前或將來存在的) , 而有義務或以其他方式被要求向其作出披露的任何人士或機構 ;

- (v) 本公司的權益或業務的任何實際或建議承讓人、受讓人、參與人或附屬參與人 ;
- (vi) 第三方獎賞、客戶或會員、品牌合作及優惠計劃供應商 ; 及
- (vii) 本公司為就本聲明第(2)(viii)段所列明的用途而聘用的外判服務供應商。

該等資料可能被轉移至香港境外。

(4) 在直接促銷中使用個人資料

本公司可能把閣下的個人資料用於直接促銷 , 除非本公司已取得閣下的同意 (包括表示不反對) , 否則本公司並不可以如此使用閣下的個人資料 , 但條例所指明的豁免情況除外。就此 , 請注意 :

- (i) 本公司可能把本公司不時持有閣下的姓名、聯絡資料、產品及服務組合資料、交易模式及行為、財務背景及人口統計數據用於直接促銷 ;
- (ii) 本公司可能就下列服務、產品及促銷標的進行促銷 :
 - (a) 保險、財務及相關服務及產品 ; 及
 - (b) 獎賞、客戶或會員或優惠計劃及相關服務及產品 ;
- (iii) 上述服務、產品及促銷標的可能由本公司及/或第三方獎賞、客戶或會員、品牌合作或優惠計劃供應商提供。

如閣下不希望本公司使用閣下的資料作上述直接促銷用途 , 閣下可通知本公司行使閣下的選擇權拒絕促銷。閣下可根據本聲明第(5)段所提供的聯絡方法以書面向本公司提出有關要求 , 或於有關的申請表格內向本公司表達閣下拒絕促銷的意願 (如適用) 。

(5) 查閱及改正資料權利

根據條例規定 , 閣下有權查詢本公司是否持有閣下的個人資料及要求索取該等資料的複本 (查閱資料要求) , 並要求本公司就不準確的資料作出改正。閣下如欲行使有關權利 , 請以書面經以下聯絡方法向本公司提出 :

香港鰂魚涌英皇道 728 號 K11 ATELIER 9 樓 904-906 室

Concord Insurance Company Limited

傳真 : (852) 2815 3630

根據條例 , 本公司有權就辦理任何查閱資料要求收取合理費用。

- (6) 閣下亦有權根據本聲明第(5)段所提供的聯絡方法索取本公司有關個人資料私隱的政策及實務 , 並獲告知本公司持有的個人資料的種類。
- (7) 本公司只會根據上述任何用途上的合理需要或適用法例或規例規定的期間保存閣下的個人資料。
- (8) 如閣下對本聲明有任何疑問 , 請致電本公司 2543 4893 。
- (9) 本聲明不會限制客戶在條例下所享有的權利。
- (10) 本公司保留修改本聲明的權利。

2021 年 11 月