



# Screen Accidental Damage Claim Form

## 屏幕意外保障索償申請表

For Customers of Chung Yuen use only  
中原顧客專用

This form must be completed truthfully and accurately. If the space is not enough or no applicable field available, please supplement information by attachment. The list of documents required is not exhaustive and we reserve our rights to request from you any additional information/documentation, as necessary. The submission of an incomplete form or insufficient information or supporting documents may delay the processing of or result in the denial of your claim.

For details of coverage, please refer to Terms and Conditions of Screen Accidental Damage Contract by Chung Yuen Electric Limited.

Repair or replacement must be done in Hong Kong by manufacturer's repair centre within fourteen (14) calendar days following the loss incident and the completed form should be returned to us together with all supporting documents within thirty (30) calendar days following the repair completion date to the following fax, email or address:

請正確填寫此申請表。如果表格空間不足或沒有適用之欄位，請以附件補充資料。

各部份之「所需文件」只是概括要求，本公司保留權利在有需要時要求閣下提供更多文件以處理有關的索償申請。如所遞交的索償申請表未填妥或有關資料或文件不足，閣下的索償申請有可能會受延誤或被拒絕。

詳細條款及細則，請參閱中原屏幕意外保障合約。

產品須於事故發生後14日內到香港原廠維修商進行維修，填妥索償申請表和連同所有有關文件於完成維修後30日內傳真/電郵或郵寄回以下地址：

Claims Department  
AIG Insurance Hong Kong Limited  
46/F, One Island East 18 Westlands Road Island East Hong Kong  
Telephone: 852 3666 7188  
Facsimile: 852 2892 0167  
Email: ew.hk@aig.com

美亞保險香港有限公司  
賠償部  
香港港島東香港港島東華蘭路18號港島東中心46樓  
電話: 852 3666 7188  
傳真: 852 2892 0167  
電郵: ew.hk@aig.com

### Documents Required

- Completed claim Form
- Chung Yuen Official Invoice Copy
- Inspection Report Copy issued by manufacturer's repair centre in Hong Kong
- Receipt Copy issued by manufacturer's repair centre in Hong Kong

### 所需文件:

- 填妥的索償申請表
- 中原購買正式發票副本
- 香港原廠維修商檢查報告單副本
- 香港原廠維修商付款收據副本

If you have any questions, please visit the page [www.aig.com.hk/CYAD](http://www.aig.com.hk/CYAD)

如有任何疑問，請參閱 [www.aig.com.hk/zh/CYAD](http://www.aig.com.hk/zh/CYAD)

### Section I - General Information

### 第一部份 一般資料

Chung Yuen's invoice No. 中原發票號碼	Product Purchase Price (HK\$) 產品購買價錢 (港幣)	Name of Mobile Phone Holder (English Block letters) 手機持有人姓名 (英文正階)	Name of Mobile Phone Holder (Chinese) 手機持有人姓名 (中文)
Hong Kong Mailing Address (English Block letters) 香港聯絡地址 (請填寫英文地址，以便郵寄索賠支票)		Email Address 電郵地址  (We will send you the claim acknowledgement by email) (本公司將會以電郵發送確認索償申請表)	Hong Kong Mobile Phone No. 香港手提電話號碼 (We will send you the claim notification by SMS) (本公司將會以電話短訊發送賠款通知)  SMS language select SMS 短信語言 <input type="checkbox"/> 中文 Chinese <input type="checkbox"/> 英文 English

\*Name and mailing address will be used for cheque issuing and posting purpose for approved claims

\*手機持有人姓名及聯絡地址用作合格索賠支票抬頭及郵寄之用

Cheque payee must be age over 18

支票抬頭必須為十八歲以上人仕

### Section II - Brief Description of Product Damage

### 第二部份 產品損毀簡述

Date of Repair 維修日期  日 月 年 DD MM YYYY	Name of Authorized Repairer 生產商授權/特約維修站	Repair Job no. 工作單編號
Date of Damage 損壞日期: 日 月 年 DD MM YYYY	Full description of how the damage occurred 詳細描述事件發生經過	
Part Cost 零件費用	Inspection / Labour Charge 檢查/人工費用	Total Repair Amount 總維修費用

Maximum Total Screen Accidental Damage Claims Amount can be reimbursed HK\$600 屏幕意外保障維修費上限為港幣600

**Section III – Declaration and Authorization 第三部份 聲明及授權**

A. The undersigned Insured(s) / Claimant(s) HEREBY DECLARE that to the best of the Insured(s') / Claimant(s') knowledge and belief, the above statement and particulars contained are true and complete in every respect and are made without reservation of any kind.

B. In relation to the personal data collected in this claim form, the Insured(s)/Claimant(s) agree and acknowledge that:

(a) (unless specifically indicated otherwise in this form) the personal data requested in this form (or otherwise provided during the course of the claim process) is necessary for AIG Insurance Hong Kong Limited ("AIG HK") to process the insurance claim and any such data not provided may mean the claim cannot be processed.

(b) the personal data collected in this form may be used by AIG HK for purposes which include 1) assessing, investigation, adjusting and making a decision on this claim; 2) otherwise for the purpose of administering the insured(s') insurance policy (including pursuing recovery from reinsurers) and 3) for other purposes stated elsewhere in this form.

(c) AIG HK may transfer the personal data to the following classes of persons (whether based in Hong Kong or overseas) for the purposes identified in (b) and (c) above:

i) third parties providing services related to the administration of the Insured's policy (including reinsurers);

ii) financial institutions for the purpose of processing this application and obtaining policy payments;

iii) loss adjusters, assessors, third party administrators, emergency providers, legal services providers, retailers, medical providers and travel carriers;

iv) another member of the AIG group (for all of the purposes stated in (b) ) in any country; or

vi) other parties referred to in AIG HK's Data Privacy Policy for the purposes stated therein.

(d) The Insured(s)/Claimant(s) may gain access to, or request correction of their personal data (in both cases, subject to a reasonable fee), by writing to the Privacy Compliance Officer of AIG Insurance Hong Kong Limited at GPO Box 456 or cs.hk@aig.com. The same addresses may be used to contact us with any comments on our service. The full version of AIG HK's Data Privacy Policy can be found at www.aig.com.hk.

C. The Insured(s) / Claimant(s) hereby irrevocably authorize:

a. the police that has any of the Insured(s') information to provide AIG HK with the information including but not limited to the police reports, witness statements, investigation and/or prosecution results; and

b. any organization institution or individual that has any information, record or knowledge of the Insured(s') travel record to disclose to AIG HK such information, record and knowledge.

This authorization shall bind the Insured(s') / Claimant(s') successors and assigns and remain valid notwithstanding the Insured(s') / Claimant(s') death or incapacity in so far as legally permissible. A photocopy of this authorization shall be as valid as the original.

A. 於本索償申請表簽署之受保人/索償申請人謹此聲明盡其所知所信，上述所申報的一切資料均屬正確無誤，並無任何保留。

B. 就有關從此索償申請表所收集的個人資料，受保人/索償申請人同意及確認：

- (a) 除非於本表格上另有訂明，本表格所要求提供的個人資料(或於處理索償時所要求提供的個人資料)是供美亞保險香港有限公司("美亞保險")處理保險索償申請的所需資料，若未能提供任何所需資料索償申請則可能不被處理；
- (b) 美亞保險可按列於其私隱政策的用途使用此表格所收集之個人資料，其用途包括:1)評核、調查、調整及就此索償申請作出決定; 2)管理受保人的保單(包括向再保險公司索取賠償)及 3)任何於本表格其它位置列明的目的；
- (c) 美亞保險亦可向以下類別的人士(不論在香港或海外)轉交該些個人資料，作上述(b)及(c)項所列明之用途:
- (i) 提供有關本人/吾等保單管理服務的第三者(包括再保險公司)；
  - (ii) 財務機構，作處理此申請及收取保費；
  - (iii) 公證人、調查員、第三者管理人、緊急支援服務提供者、法律服務提供者、零售商、醫療提供者、及交通工具機構，以處理索償事宜；
  - (iv) 其它在任何國家之AIG集團之成員公司，作上述(b)項所有列明之用途；或
  - (v) 其它於美亞保險私隱政策所列明的人士，作於私隱政策列明之用途。
- (d) 受保人/索償申請人可隨時致函到美亞保險香港有限公司之私隱事務主任(地址:香港郵政總局信箱 456 號或電郵:cs.hk@aig.com)查閱、或要求修改其個人資料(美亞保險可就查閱及修改要求收取合理費用)。如對美亞保險提供的服務有任何意見，可按上述地址聯絡美亞保險。美亞保險私隱政策的全文載於 www.aig.com.hk。

C. 受保人/索償申請人茲授權:

- (a) 警方向美亞保險提供有關受保人之任何資料包括但不限於警察報告、証人口供、調查及/或檢控結果;及
- (b) 任何知悉或擁有受保人之出入境資料紀錄之機構、組織或人士向美亞保險透露有關資料及紀錄。
- 此授權書不得撤回。在法律許可下，即使受保人/索償申請人死亡或喪失能力，此授權書仍然存有法律效力，而受保人/索償申請人之繼承人及轉讓人亦會受此授權書約束。此授權書之副本與正本均屬有效。

Name of Mobile Phone Holder (English Capital letters) 手機持有人姓名 (英文正楷)	Signature of Mobile Phone Holder 手機持有人簽署		
	Date 日期	日 DD	月 MM 年 YYYY