Liberty International Insurance Limited
利寶國際保險有限公司
13/F, Berkshire House,
25 Westlands Road, Quarry Bay, Hong Kong
香港鰂魚涌華蘭路 25 號栢克大廈 13 樓
Tel 電話: (852) 2892 3888 Fax 傳真: (852) 2577 9578
Website 網址: www.libertyinsurance.com.hk

NAVIGATOR Insurance Brokers Ltd.
Unit 8E, Golden Sun Centre, 223 Wing Lok St, Sheung Wan, Hong Kong
Tel : +852 2530 2530 | Fax : +852 2530 2535
Email : crew@navigator-insurance.com | www.navigator-insurance.com

車輛保險之一般索償程序

1. 如閣下涉及交通事故或受保車輛遭受盜竊，應盡快通知警方。

2. 應記下第三者之重要資料，例如：
   - 被牽涉之車輛的車牌號碼；
   - 被牽涉之車輛的保險公司名稱及其保單號碼；
   - 被牽涉之傷者的傷勢；
   - 被牽涉之司機的姓名及地址；
   - 被牽涉之傷者的個人資料；
   - 警方之報案號碼。

3. 為保障閣下之權益，如此事故是由於第三者疏忽所導致，應於十日內正式向警方提出投訴。

4. 切勿與第三者簽署或達成任何口頭協議，此舉可能導致對方擺脫在此事故中之責任及有可能令閣下喪失追討權利。

5. 即使閣下認為此事故有可能是由於閣下疏忽所致，也不能向對方承認責任或同意作出賠償。

6. 閣下須填妥附上之車輛索償表、過往定罪事項證明書及所有同意書連同下列証明文件副本寄回本公司辦理：-
   - 受保車輛登記文件；
   - 警署報案編號紙及有關擬控告通知書；
   - 香港警務處處理酒後駕駛程序表格(呼氣測試)證明；
   - 警方口供及所有有關部門發出的文件；
   - 司機駕駛執照及其他身份証明文件，例如身份証或護照。

7. 所有有關此事故之文件應不予回應，並即時轉交本公司處理。

Claim Procedures - Motor Insurance

1. If you are involved in a traffic incident or your vehicle is being stolen, you should report to the police immediately.

2. Note down the essential information of the third party(ies) involved, such as
   - Vehicle registration number(s) of the vehicle(s) involved;
   - Name(s) and address(es) of the driver(s) involved;
   - Name of insurance company(ies) and their policy number(s) of the vehicle(s) involved;
   - Personal particulars of the injured person(s) involved;
   - Extent of injury of the injured person(s) involved;
   - Police reporting case number.

3. To protect your own interest, lodge a compliant to the police within ten days if the incident was caused by the negligence of the third party(ies).

4. Do not make any written or verbal agreement with the third party(ies) because it may discharge them from responsibility and you may sign away your right of recovery.

5. No admission of liability or offer of settlement should be made without our consent.

6. Complete the attached Motor Claim Form, Application for Certificate Relating to Previous Conviction, and all Letter of Authorization and send us together with copy of all the requested documents as follow:-
   - Vehicle Registration Document of the Insured Vehicle
   - Police Report Number and Intended Prosecution Notice from the Police
   - Drink Driving Procedure Form (Screening Test) issued by the Police
   - Statement to the Police from Insured Driver and/ or Insured and all other relevant documents
   - Driving License and ID Card or all relevant Identity Documents of the Insured Driver

7. All correspondence in relation to the incident must be unanswered and forwarded to our Company immediately.

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CLAIM FORM – MOTOR VEHICLE ACCIDENT
汽車意外報告書

重要事項:

1. 此表僅供審核之用未能視作承擔責任之根據
2. 填報此表務須詳盡以免阻延及將不適當項目刪去(N.A.)
3. 保戶或駕駛人如收到警署或第三方面之函件請即寄交本公司
4. 請附上駕駛人之駕駛執照、身份証及香港車輛登記文件副本
5. 估價單必需先交本公司審查及批核方得開工修理
6. 上述第四項之文件及此報告書連所有同意書必須於意外發生後14天內呈交敝公司審閱

Important

1. No liability is admitted by issuing this form
2. Insured is requested to answer all questions fully in order to avoid unnecessary delay in the settlement of claim and delete the inapplicable item (N.A.)
3. Insured is requested to forward to the Company all communications, or copies thereof, which you or the driver may receive from the police and/ or third party in connection with this accident
4. Please submit copy of the driver's Driving License, Identity Card and Hong Kong Vehicle Registration Document
5. An estimate of repair cost must be submitted to the Company for approval before repairs are commenced
6. This claim form and the requisite documents (on item 4) together with all Letter of Consent must be submitted to the Company for reference within 14 days after the accident

1. Particulars of Insured 保戶資料

Policy no. 保單號碼		Period of Insurance 保險期	From 由	To 至
Name 保戶姓名				
Address 地址				
Home no. 住宅電話		Mobile no. 流動電話		
Office no. 辦公室電話		Occupation 職業/行業		

2. Particulars of Driver 駕駛人資料

Name of Driver
姓名 .....

Occupation
職業/ 行業 .....

Address
地址 .....

.....

Date of Birth
出生日期 .....

Driving License no.
駕駛執照號碼 .....

Date of the first driving license issued
首次獲發駕駛執照日期 .....

Place of issue
簽發地區 .....

Office no.
辦公室電話 .....

Home no.
住宅電話 .....

Mobile no.
流動電話 .....

Email
電郵 .....

What is your relationship with the Insured? 保戶與司機的關係

☐ Same person 屬同一人
☐ Relative or friend 親屬或朋友
☐ Hirer or Borrower 出租或借用
☐Employer or Employee 僱主/僱員
☐Others (please state) 其他(請詳述) .....

Was the Driver driving the insured vehicle on the order or permission of the Insured? ☐Yes 是 ☐No 否
駕駛人是否得保戶之許可駕駛肇事之車輛

Was the Driver sober and competent to drive at the time of Accident? ☐Yes 是 ☐No 否
駕駛人是否清醒及勝任駕駛

Has the involved driver been previously involved in any other traffic accident, or been convicted of any driving offences during the past 5 years? If "Yes", please give details. ☐Yes 是 ☐No 否
駕駛人曾否於過去的五年內涉及其他車禍或被警方交通部檢控? 如有，請詳述。

.....

.....

.....

3. Particulars of Reporting to Police 報案資料

Did anyone report to the Police? ☐Yes ☐No
是否已向警方報案? 是 否

Name of Police Station
警署名稱 .....

Police report no.
報案編號 .....

Reason of report
報案原因
☐ Record purpose only 只作紀錄存檔
☐ Complaint against parties concerned 投訴有關人士

Is the Driver released on bail? ☐Yes 是 ☐ No 否 ☐ Not Applicable 不適用
肇事司機是否獲准保釋?

If yes, please provide us the date of reporting to the Police:
如是，請提供指定向警署報到日期及時間

.....

4. Particulars of Insured Vehicle Concerned in Accident 肇事車輛之詳情

Registration no.
車牌號碼 .....

Make & Model
車輛名稱及款式 .....

Year of Manufacturer
車輛製造年份 .....

Cubic Capacity
汽缸容量 .....

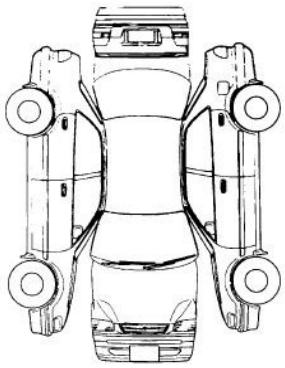
For what purpose was the vehicle being used at the time of accident?
事件發生時該車輛是用作何用途?

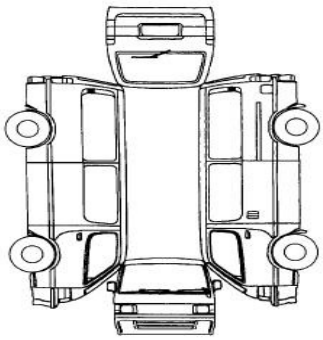
☐ Social Domestic & Pleasure 社交家庭/娛樂
☐ Insured's Business or Profession 保戶業務
☐ Hire or Reward 供出租或以報酬式借予他人
☐ Parking 停泊
☐ Towing 拖運
☐ Motor Trade 車輛修理及買賣
☐ Other purpose (please give details) 其他用途(請詳述)

Extent of damage of the vehicle?
受保之車輛損毀程度

☐Minor 輕微 ☐Normal 一般 ☐Serious 嚴重

Please mark the damaged area(s) of the vehicle at the diagram below
請於下列圖案上劃出車輛之損毀地方





If the policy is comprehensive cover, please advise if you wish to claim own damage under the Policy.
若購有綜合保險，是否擬於本公司賠償台端汽車之損毀

☐Yes 是 ☐No 否

What is the name and contact no of the repairer? (Please attach the repairer's estimate if obtained)
維修車廠之名稱及聯絡電話? (請附上持有的估價單)

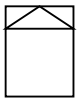
Was the vehicle in a safe and roadworthy condition? ☐Yes 是 ☐No 否
肇事時受保之汽車的機件是否妥當?

5. Particulars of Accident 意外詳情

Date of Accident 肇事日期		Time 時間	
Estimated speed of the vehicle at time of incident 肇事時估計之車速			Km/hr 公里/每小時
Weather conditions 天氣情況	☐Fine 晴天 ☐Typhoon 颱風	☐Rainy 雨天 ☐Rainstorm 暴雨	☐Thunder/ Lightning 雷電 ☐Foggy 大霧
Condition of the road surface 路面情況	☐Dry 乾爽 ☐Smooth 平滑 ☐Oily 滿佈油污	☐Wet 濕滑 ☐Rough 崎嶇 ☐Steep 陡峭	☐Flooded 水浸
Place of the incident occur 肇事地點			
Lighting 光線	☐Day light 日間 ☐Street light on 街燈亮着	☐Dusk 黃昏 ☐Insufficient lighting 街燈未亮	☐Night 夜間

How did the incident occur? (Please give details) 請詳述意外情形

Incident explanatory sketch (please indicate the direction of vehicles at the time of the incident)
請作圖解顯示遇事地點並指出有關車輛及行人位置另以箭咀顯示行駛方向



6. Particulars of Witnesses 見証人資料

Name 姓名 Address 地址	Contact no. 聯絡電話號碼	☐Passenger 乘客	☐ Independent Witness 獨立証人
Name 姓名 Address 地址	Contact no. 聯絡電話號碼	☐Passenger 乘客	☐ Independent Witness 獨立証人
Name 姓名 Address 地址	Contact no. 聯絡電話號碼	☐Passenger 乘客	☐ Independent Witness 獨立証人
Name 姓名 Address 地址	Contact no. 聯絡電話號碼	☐Passenger 乘客	☐ Independent Witness 獨立証人

7. Particulars of injury(ies) 傷者資料

Was/Were ther any person(s) injured in the accident?
是次事件是否牽涉人身傷亡? ☐ Yes 是 ☐ No 否

If "Yes", please state the total number of injured person
如 "是"請敍述傷者或死者之人數 ☐

Please state the details of the injured person(s) involved in the incident. 請敍述是次事件所有牽涉之傷者資料:

Sex/ Age 性別/年齡	Name /Contact No. 姓名/聯絡電話	Nature of injury 傷者傷勢	Conscious? 是否清醒	Carried by the Stretcher to the ambulance 是否須用擔架抬上救護車?	Identity of the Injured 傷者身份
☐ M 男 ☐ F 女 Age 年齡		☐Slight 輕傷☐Serious 嚴重 ☐Death 死亡 Please describe the extent of injury and part of body injured 請詳述受傷情況及部位	☐ Yes 是 ☐ No 否 ☐Unknown 不詳	☐ Yes 是 ☐ No 否 ☐ Unknown 不詳	☐ Insured's vehicle Passenger 受保車輛乘客 ☐Third party vehicle passenger/driver/pedestrian 第三者車輛之乘客/司機/途人
☐ M 男 ☐ F 女 Age 年齡		☐Slight 輕傷☐Serious 嚴重 ☐Death 死亡 Please describe the extent of injury and part of body injured 請詳述受傷情況及部位	☐ Yes 是 ☐ No 否 ☐Unknown 不詳	☐ Yes 是 ☐ No 否 ☐ Unknown 不詳	☐ Insured's vehicle Passenger 受保車輛乘客 ☐Third party vehicle passenger/driver/pedestrian 第三者車輛之乘客/司機/途人
☐ M 男 ☐ F 女 Age 年齡		☐Slight 輕傷☐Serious 嚴重 ☐Death 死亡 Please describe the extent of injury and part of body injured 請詳述受傷情況及部位	☐ Yes 是 ☐ No 否 ☐Unknown 不詳	☐ Yes 是 ☐ No 否 ☐ Unknown 不詳	☐ Insured's vehicle Passenger 受保車輛乘客 ☐Third party vehicle passenger/driver/pedestrian 第三者車輛之乘客/司機/途人

8. Particulars of third party(ies) involved 事件涉及之第三者詳情

Was/ Were there any other vehicle(s) involved in the incident? ☐ Yes 是 ☐ No 否
是次事件是否牽涉其他車輛?

If "Yes", please state the total number of vehicle(s) involved
如 "是"，請敍述被牽涉之車輛數目。

Number of Vehicles:
車輛數目:

Please state the details of any other vehicle(s) involved in the incident.
請詳述此次事件之其他被牽涉之車輛資料

Third party registration no. 第三者車牌號碼	Year, Make & Model 車輛年份、牌子及型號	Brief details of damage 簡述損毀情況	Name & contact of third party driver 第三者司機之姓名及聯絡資料

In your opinion, who should be held responsible for the incident?
依閣下所見，該事件是那一方面的責任?

☐ Myself/ Person who was driving my car 本人/駕駛本人車輛之司機
☐ Driver of vehicle(s) _____ (Registration No.) _____(車牌號碼)之司機
☐ Other (please state) 其他 (請詳述)

Other than damage to vehicle(s), was any other third party property damaged?
除車輛外，是次事件是否牽涉其他第三者之財物損毀?

☐ Yes 是
☐ No 否

If "Yes", please state: 如 "是" 請詳述。

9. Statement of Truth/ 真實聲明

I/ We confirm that I/ we have read and fully understand the Purpose of Collection of my personal data. I/ We agree to the transfer to my data to the relevant parties as stated in the section of Transfer of personal Data.
本人/吾等確認已閱讀，並清楚明白收集本人/吾等個人資料之目的。本人/吾等同意利寶國際保險有限公司，將本人/吾等的個人資料，根據 "個人資料轉交" 一項所列，移交予有關人仕。

I believe that the facts stated in this Motor Vehicle Accident Claim Form are true and the opinion expressed in it is honestly held.
本人相信本汽車意外報告書所述事實屬實，而其中所表達的意見屬真誠地持有的。

Insured's Signature 保戶簽名	Driver's Signature 駕駛人簽名
Date 日期:	Date 日期:

Your Ref 貴處檔案編號 :

Our Ref: 本司檔案編號:

Letter of Consent 同意書

Incident on:
事故日期:

Involving vehicle:
牽涉車輛:

I, _____ , consent to the relevant party(ies) releasing all my relevant documents and information, including but not limited to my statement, personal data, sketches, MVE Report, brief facts and notes of proceeding in relation to the captioned incident to **Liberty International Insurance Ltd.**

I confirm that the copy of this Consent has the same effect as the original.

本人，_____，現同意有關部門就有關於上述事件提供 (包括但並不限於)本人之口供、個人資料，草圖、車輛檢驗報告，案情簡介及審判過程給予利寶國際保險有限公司 。

本人確定同意書的副本，與正本擁有同樣效力。

_____
Signature of driver/involved part(ies) 司機簽署/ 事主簽署

_____
I.D. Card No./ Passport No. 身份証號碼 / 護照號碼