

# PET INSURANCE CLAIM FORM

# 寵物保險賠償申請表

Please fill in all details and return this Claim Form to Claims Department of Blue Cross (Asia-Pacific) Insurance Limited (the "Company") within 30 days after the happening of the incident. In addition, relevant claims documents as specified in Section V shall be submitted to the Company as soon as possible to avoid delay in claim process. For claim of third party liability under Section 2 of the Policy, please immediately complete this form to notify the Company.

請填妥此賠償申請表.並於事故發生後 30 日內將此表格交回藍十字(亞太)保險有限公司(「本公司」)的理賠部。此外.為免延誤賠償進程.閣下亦須盡快提交第五部分列明的相關文件致本公司。如屬保單中的第三者責任索償.請立即填妥此表格通知本公司。 Completion and submission of this Claim Form shall not be construed as admission of liability on the part of the Company. 填寫及遞交此賠償申請表並不表示本公司承擔賠償責任。



「智」易Claims

I. Particulars of Policyholder 保單持有人資料		Claim No. (Office use) 賠償編號(本公司專用)		
Policy No. 保單編號	Name of	Name of Policyholder 保單持有人姓名		
Correspondence Address 通訊地址				
E-mail Address 電郵地址		Contact Phone No. 聯絡電話號碼		
II. Particulars of Insured Pet 受保寵物資料(Please tick the following box(es), if appropriate 請選擇適當項目)				
Name of the Pet 受保寵物名稱				
Breed of the Pet 受保寵物品種	Sex 性別	Sex 性別		
Microchip No. 晶片號碼	Species 種	Species 種類: Dog 狗 Cat 貓		
Age 年齡	Colour 顏	Colour 顏色		
III. Claimed Items 索償項目 ( Please tick the appropriate item(s) 請選擇適當項目 )				
Medical Coverage Benefit		□ Funeral Service Benefit 身故服務保障		
Holiday Cancellation Benefit	Benefit	□ Overseas Cover Benefit 海外保障		

ME509/08.2022

# IV. Claim Information 索償資料

(Please complete where applicable and use a separate sheet if insufficient space 請填寫適當項目。若空位不足.請另頁詳加說明)

Date a	and time of Consultation/Incident 診治		Place of Consultation/Incident 診治/事發	·····································	
Date a	IIId tillie of Consultation/meidenc 1/2/14	/	Flace of Consultation/including 1974/ 7-37	(水ビ海口	
Full de	Full description of Illness/Injury/Incident (cause and manner) 疾病/受傷/事故詳情(怎樣發生及細節)				
Who to	ook care of the Pet at material time of	Incident 事發時·誰人照顧受保寵物	_	_	
• F	Relationship with Policyholder 與保單				
Amour	nt claimed for Benefit of "Medical Cov	 erage/Funeral Service /Holiday Cancellati	on/Advertising Expenses/Emergency Boarding	<u>x</u> " (HK\$)	
		告費用/緊急寄宿」保障的索償金額(港	0, 0,		
Third F	- Party Liability 第三者責任 (Please tick	the following boxes, if appropriate 請選擇	- 建適當項目)		
1.	Nature of Incident 事故性質	□ Bodily Injury 身體受傷	☐ Property Damage 財物損毀		
2	Name of Injured/ Property Owner 傷者/ 物主姓名		Age 年齢	Sex 性別	
3.	Nature & extent of injuries/ damage				
4.	受傷/ 損毀性質及程度  Has the third party claimed?	No 沒有 If Yes, what is the amou			
4.	第 三者有否要求賠償? □				
5	Has the Policyholder/anyone admitte third party?	, <u>—</u>	'	How? 什麼方式?	
	保單持有人/任何人有否向第三者承認		知 月 ,唯八小小心:		
Has it	been reported to Police? 有否向警方報	· · · · · · · · · · · · · · · · · · ·			
	·		•		
Any oth	her insurance covering this incident? 有	頁否其他保險承保是次事件? □ No 沒有	☐ Yes 有 If yes, please provide the fo	llowing details. 如有請提供詳情	
Name	of insurance company 保險公司名稱:	Pol	icy No 保單編號:Benefit Type 保障	種類別	
V (	 Claim Documents 索償文				
Claim documents to be submitted to the Company must include, but are not limited to the following documents. The Company may reasonably further request you to provide supplementary information or evidence. For details of the Claims Provisions, please refer to the Terms and Conditions of the Policy.  IN TOTAL T					
則。	C. C. C. R. Cardindon	= 7 7 1 9 7 1 2 mond a discon-	,		
	ble to All Claim Items Listed Below 下列所有索償項目	Proof of identity of the insured pet by m 受保寵物身份證明	eans of		
~	(1/3//////////	(i) Microchip number (applicable	e e e e e e e e e e e e e e e e e e e		
		微型晶片號碼(適用於受保狗 (ii) Vaccination record or medical	隻和貓隻);或 I report to prove the identity of the insured pe	et and the name of its owner (only	
		applicable to cats without mic	crochip) and below claim documents		
1		没	告以確認受保寵物身份及其擁有人姓名(只	適用於木月惟人似空皕戶的細髮)及以	
Medica	al Coverage (include Overseas Cover)	Veterinary consultation (including pr	escribed medication) receipt(s) with the signa	uture of the vet and the company chop of	
- Vet	terinary Consultation Fee and	the licensed vet clinic containing:-		. , .	
	scribed Medication R障(包括海外保障)		據須由獸醫簽署及所屬註冊診所公司蓋印. vner and the insured pet with the microchip r		
	-獸醫診金及處方藥物	date of birth/age, sex, colour and	' '	fulfiber of the fibured per (ii air, ), 5.222,	
I		ŭ .	。 的微型晶片號碼(如有)・寵物的姓名、品種	重、出生日期/年齢、性別、顔色及斑	
I		紋·並須由獸醫核實證明	The state of the s		
		<ul> <li>Diagnosis of the insured pet and 受保寵物診斷結果以及獸醫診金</li> </ul>	,		
		- The fees of itemised prescribed i	medication and medical examination(s), inclu	uding dressings and injection, prescribed	
		medication, x-rays, ultrasound a 每項處方藥物及醫療檢查(包括	ind laboratory tests incurred 包紮及注射、處方藥物、X-光檢查、超聲波標	<sub>僉查</sub> 及化驗)的費用	
	- Medical report / veterinarian certificate containing particulars of the claim, if appropriate				
	列明有關索償詳情(如適用)的醫療報告/獸醫證明書 - Other related medical proof which can support the claim, if appropriate				
		- 其他與索償相關的醫學證明 ( 如			
-Roon	m and Board, Clinical and	- Itemised medical invoice stating	the diagnosis and expenses, original receipt	and medical report (if any)	
	-Room and Board, Clinical and - Itemised medical invoice stating the diagnosis and expenses, original receipt and medical report (if any)  Surgical Expense 列明診斷結果及費用分項的醫療賬單、收據正本及醫療報告(如有)				
住月	。 房、門診及手術費用				

Third Party Liability Local police report or statement to police, if any (include Overseas Cover) 警方報告或警方口供記錄副本(如有)、及第三者索償文件 第三者責任(包括海外保障) Medical report containing particulars of the claim 列明索償詳情的醫療報告 Letter of claim from third parties, any impending prosecution, inquest or fatal injury, indicating the claim nature and circumstances: 第三者索償文件,任何臨近之檢控、研訊或致命事故,並提供有關事件或事故的索償性質及情況 Written confirmation from the policyholder and the family members to confirm that no admission of liability has been made, no promise of payment and no settlement has been made or agreed to 保單持有人及家屬書面確認未有承認任何責任、作出或協議作出任何賠償承諾或協定 Immediate submission of all relevant documentations including but not limited to copies of the summons, court documents, solicitors' and other legal correspondence 任何與第三者的往來書信、擬檢控通知書、死因研訊、致命意外、可能引致索償之事件或事故之性質及詳情、傳票、法庭 文件、律師及其他法律書信 Funeral Service Original receipt for the expenses of cremation, funeral service and / or handling charges from the Veterinarian or funeral (include Overseas Cover) provider 身故服務(包括海外保障) 火化、身故服務費用及/或獸醫或殮葬服務提供者的手續費正本收據 Holiday Cancellation Veterinarian's confirmation to certify the insured pet required emergency life-saving surgery 假日行程取消 由獸醫發出受保寵物須接受緊急且與生死攸關手術的證明 Original travel tickets, receipts, and agreements relevant to the claim and documentary proof of trip cancellation or curtailment with non-refundable amount 交通票據、收據及此項索償之協議書、及旅程取消或縮短旅程(須列明不獲退回之金額)之證明文件正本 Advertising Expenses Original receipt for the cost of advertising for finding the stolen / lost insured pet in the local newspaper, magazine or 廣告費用 因受保寵物失竊/失蹤而涉及的本地報章、雜誌或大眾傳媒刊登尋找廣告的費用收據正本 Overseas Cover In addition to the relevant items 2, 3 and 4, provide travel record of the policyholder or family members and the insured pet

Emergency Boarding (if applicable) 緊急寄宿(如適用)

海外保障

Hospital invoice and discharge report of policyholder

保單持有人住院賬單及出院報告

Original invoice and receipt for pet sitting expenses

寵物托管費用賬單及收據正本

#### VI. Authorisation and Declaration 授權及聲明

I/We hereby authorise any veterinary facility, veterinarian, authority, or any third party to disclose to Blue Cross (Asia-Pacific) Insurance Limited ("the Company") or its authorised representative, any and all information with respect to the medical history of the insured pet, my/our loss or police statement made relevant to the insured pet and the like for the purpose of assessing my/our claim request(s). A photocopy of this authorisation shall have the same effect as the original.

本人/我們謹此授權任何獸醫診所、獸醫、有關機構或任何第三方·向藍十字(亞太)保險有限公司(「貴公司」)或其授權代表提供任何或所有有關受保寵物的病歷、本人就有關受保寵物引起之損失、口供或任何相關資料作評估賠償申請之用途。此授權書之正本及副本皆具同等效力。

除上述第2、3及4所需相關文件外,同時提供保單持有人或家屬及受保寵物的外遊記錄

IWe hereby declare that all the above information and particulars given herein are accurate, true and complete and are given to the best of my/our knowledge and belief. I/ We have not withheld any material information and acknowledge that failure to supply true and accurate answers to this request or inform the Company of all material information may render the Company unable to accept or process this request and all rights to recover under the Policy shall be forfeited. I/We understand that the issuance or completion of this Claim Form does not constitute admission of liability or guarantee payment of the claim on behalf of the Company.

本人/我們謹此聲明·上述所有資料及細節均是準確無誤·真實及為事實之全部·並且是盡本人/我們所知及所信而作答的。本人/我們並沒有隱瞞任何重要資料及確認如未能提供真實及準確無誤之資料或通知貴公司任何有關此賠償申請之重要資料·將可能導致貴公司不能接受或處理此索償申請及喪失所有追討保單權益之權利。本人/我們的此索償表格之發出及填妥並不代表貴公司確認責任或保證賠償。

I/We confirm having read and understood the Company's Personal Information Collection Statement as accompanied with this form. 本人/我們確認已閱讀及明白隨本表格附上有關貴公司的收集個人資料聲明。

Signature of Policyholder 保單持有人簽署	:	
Date 日期 dd/mm/yy 日/月/年)	:	
Name 姓名	:	

The Chinese version of this Form is for reference only. In case of any discrepancy between the Chinese and English versions, the English version shall prevail. 此表格的中文譯本僅供參考之用·文義如與英文本有歧異·概以英文為準。

# Veterinarian Certificate 獸醫證明

(To be completed by  $\underline{\text{Veterinarian}}$  at the expenses of the Policyholder 由歐醫填寫,所需費用由保單持有人承擔。)

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Particulars of the Inst	ured Pet				

Name of the Pet		Microchip No.			
Breed of the Pet		Pet Owner's Name			
Information about Illness / Injury / Deat	h of the Insured Pe	et			
Nature of injury/diagnosis	Treatment / Operation	on	Date of Service		
Confinement (Brief discharge summary, including	ing treatments, examin	nations and results)	Period of Confinement		
			From (dd/mm/yy) : To (dd/mm/yy) :		
Cause of Death (please state reason if euthanas	sia)		Date of Death		
Breakdown of treatment costs for each c	condition (HK\$)				
Consultation \$		Medication \$	Medication \$		
Room and Board \$		Surgery \$			
X-Ray & Laboratory \$		Anaesthesia \$			
Euthanasia \$		Dentistry \$			
Vaccination \$		Food \$			
Others (please specify) \$		Total \$			
Veterinarian's Notes (case summary)					
1. With respect to the insured pet, ho	w long has this pet	owner been a client of your cli	nic?		
☐ Less than 6 months ☐ More	than 6 months				
2. Have any conditions or symptoms occurred previously which are related to the above illness/ injury/ death of the insured pet? ☐ No ☐ Yes, please give dates (dd/mm/yy):					
According to your record of the insured pet, how long were the symptoms present before the first consultation:					
4. Is the treatment received by the insured pet likely to be ongoing? □No □Yes					
5. Is any condition specified above of a congenital nature? ☐ No ☐Yes					
6. Was the treatment / operation rendered to the insured pet regarded as an emergency life saving measures?  □No □Yes					
Declaration of the Veterinarian					
I hereby declare the information and particulars stated as above to be true, correct, accurate and to the best of my knowledge and belief.					
Signature of Veterinarian Date : (with Company Chop of the Veterinary Facility) (dd/mm/yy)					
Name of Veterinarian					



## 個人資料(私隱)條例 — 收集個人資料聲明(「本聲明」)

藍十字(亞太)保險有限公司(「本公司」)乃友邦保險控股有限公司的全資附屬公司。在本聲明內,友邦保險控股有限公司連同其附屬公司及聯營公司將統稱為「友邦保險集團」。

為依從個人資料(私隱)條例(「條例」),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

本公司所存下或收集的關於閣下的個人資料(包括但不限於信用資料和以往申 索紀錄)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、結清保險索償及就索償抗辯,包括進行任何附帶調查,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);
- (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及/或友邦保險集團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(例如稅務條例及當中的條款,包括與自動交換財務帳戶資料相關的條款);或
  - (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(例如稅務局作出或發出的指引或指導,包括與自動交換財務帳戶資料相關的指引或指導);或
  - (c) 本公司或友邦保險集團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) 遵守友邦保險集團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方案就於友邦保險集團內共用資料及資訊及/或資 料及資訊的任何其他使用而指定的任何義務、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、承包人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(如保險理算人、理賠調查員、收數公司、資料處理公司及專業顧問);
- (ii) 任何對本公司或友邦保險集團負有保密責任的其他人士,包括承諾保密該等資料的友邦保險集團任何成員公司;
- (iii) 與本公司有或將有商業往來的再保險公司;
- (iv) 本公司或友邦保險集團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或友邦保險集團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,或根據本公司或友邦保險集 團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;
- (vii) 本公司及/或友邦保險集團任何成員公司的品牌合作夥伴(該等品牌合作 夥伴的名稱會在有關服務和產品的申請表格及/或宣傳資料上列明);
- (viii) 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 (包括但不限於郵寄公司、電訊公司、電話銷售和直接促銷代理、電話服 務中心、數據處理公司和資訊科技公司);及
- (ix) 為履行任何本聲明第(2)(i)-(2)(iii)段所列明的用途的以下人士:保險理算人、代理和經紀;僱主;醫護專業人士;醫院;會計師;財務顧問;律師;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)。

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、銀行及相關服務及產品;
  - (b) 獎賞、客戶或會員或優惠計劃及相關服務及產品;及
  - (c) 本公司及/或友邦保險集團任何成員公司的品牌合作夥伴提供之服務及產品(該等品牌合作夥伴的名稱會在有關服務和產品的申請表格及/或宣傳資料上列明);
- (iii) 上述服務、產品及促銷標的可能由本公司及/或下列各方提供:
  - (a) 友邦保險集團任何成員公司;
  - (b) 第三方獎賞、客戶或會員、品牌合作或優惠計劃供應商;及/或
  - (c) 本公司及/或友邦保險集團任何成員公司之品牌合作夥伴(該等品牌合作夥伴的名稱會在有關服務和產品的申請表格及/或宣傳資料上列明)。

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 書面向本公司的個人資料保障主任提出有關要求,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的個人資料保障主任提出:

香港九龍觀塘道 418 號創紀之城 5 期東亞銀行中心 29 樓藍十字(亞太)保險有限公司個人資料保障主任

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向本公司的個人資料保障主任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,請致電本公司的客戶服務熱線 3608 2988。
- (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。

由藍十字(亞太)保險有限公司發出 (20220801)



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

Blue Cross (Asia-Pacific) Insurance Limited (the "Company") is a wholly owned subsidiary of AIA Group Limited. AIA Group Limited, together with its subsidiaries and affiliates are collectively referred to in this Statement as the "AIA Group".

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

From time to time, it is necessary for you to supply the Company with personal data in rrom 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 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.

#### PURPOSES FOR COLLECTING PERSONAL DATA

Personal data relating to you held or collected by the Company (including but not limited to credit information and claims history) may be used for the following purposes:

(i) processing applications for insurance products and services;

- processing applications for insurance products and services; 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; processing, adjudicating, settling and defending insurance claims as well as conducting any incidental investigation, detecting and preventing fraud (whether or not relating to the policy issued in respect of this application); performing functions and activities incidental to the provision of insurance products and services such as identity verification, data matching and reinsurance
- products and services such as identity verification, data matching and reinsurance
- 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;
- designing insurance products and services with a view to improving the Company's
- preparing statistics and conducting research;
- (viii) marketing services, products and other subjects (please see further details in paragraph (4) of this Statement);
- complying with the obligations, requirements and/or arrangements for disclosing and using data that bind on or apply to the Company and/or the AIA Group or that
  - and using data that bind on or apply to the Company and/or the Coroit 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 (e.g.
    the Inland Revenue Ordinance and its provisions including those concerning automatic exchange of financial account information);
  - automatic exchange of manical account information); 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 (e.g. guidelines or guidance given or issued by the Inland Revenue Department including those concerning automatic exchange of financial account information; or information); or
  - 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 or the AlA Group 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
- legal, regulatory, governmental, tax, law enforcement or other authorities, or self-regulatory or industry bodies or associations; complying with any obligations, requirements, policies, procedures, measures or arrangements for sharing data and information within the AIA Group and/or any other use of data and information in accordance with any group-wide programs for compliance with sanctions or prevention or detection of money laundering, terrorist financing or other unlawful activities; 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 any other purposes relating to the purposes listed above.
- (xii) any other purposes relating to the purposes listed above.

### 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 insurance adjusters, claim investigators, debt collection agencies, data processing companies and professional advisors):
- any other person or entity under a duty of confidentiality to the Company or the AIA Group including a member of the AIA Group which has undertaken to keep such data confidential;
- reinsurance companies with whom the Company has or proposes to have dealings; any person or entity to whom the Company or the AIA Group 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 the AIA Group or with which the Company or the AIA Group is expected to comply, or any disclosure pursuant to any contractual or other commitment of the Company or the AIA Group 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;

- 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;
  (vii) co-branding partners of the Company and/or any member of the AIA Group (the names of such co-branding partners can be found in the application form(s) and/or promotional material for the relevant services and products, as the case may be);
- promotional material for the relevant services and products, as the case may be); external service providers (including but not limited to mailing houses, telecommunication companies, telemarketing and direct sales agents, call centres, data processing companies and information technology companies) that the Company engages for the purposes set out in paragraph (2)(viii) of this Statement;
- and the following persons who carry out any of the purposes described in paragraphs (2)(i)-(2)(iii) of this Statement: insurance adjusters, agents and brokers, employers, health care professionals, hospitals, accountants, financial advisors, solicitors, organisations that consolidate claims and underwriting information for the insurance industry, fraud prevention organisations, other insurance companies (whether directly or through fraud prevention organisation or other persons named in this paragraph), the color and statebacters positive (and their paragraph) and the color and statebacters positive (and their paragraph). in this paragraph), the police and databases or registers (and their operators) used by the insurance industry to analyse and check information provided against existing information.
  Such information may be transferred to a place outside Hong Kong.

#### 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

- 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; the following services, products and subjects may be marketed:
- - insurance, financial, banking and related services and products; reward, loyalty or privileges programs and related services and products; and services and products offered by the co-branding partners of the Company and/or any member of the AIA Group (the names of such co-branding partners can be found in the application form(s) and/or promotional material for the relevant services and products, as the case may be);
- (iii) the above services, products and subjects may be provided by the Company and/or:(a) any member of the AIA Group;

  - any member of the AIA Group; third party reward, loyalty, co-branding or privileges program providers; and/or co-branding partners of the Company and/or any member of the AIA Group (the names of such co-branding partners can be found in the application form(s) and/or promotional material for the relevant services and products, as the case

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 Corporate Data Protection Officer of the Company at the address provided in paragraph (5) of this Statement, or provide the Company with your opt-out choice in the relevant application form (if applicable).

## 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 Corporate Data Protection Officer of the Company at the following

The Corporate Data Protection Officer Blue Cross (Asia-Pacific) Insurance Limited 29th Floor, BEA Tower, Millennium City 5, 418 Kwun Tong Road, Kwun Tong, Kowloon Hong Kong

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

- You also have the right, by writing to the Company's Corporate Data Protection Officer at the address 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.
- 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.
- Should you have any query with this Statement, please do not hesitate to contact our Customer Service Hotline at 3608 2988.
- Nothing in this Statement shall limit the rights of the customers under the Ordinance.
- (10) The Company retains the right to change this Statement.

Issued by Blue Cross (Asia-Pacific) Insurance Limited (20220801)