



恒信保險顧問有限公司 Hanson Insurance Services Limited

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The forwarding of this form for completion is not an admission of liability upon the part of the Company.
發出此通知書不能作為保險公司已經承認賠償之責任

MOTOR ACCIDENT REPORT FORM 汽車失事報告表

It is important that a complete answer be given to every question. If insufficient space is provided for your answer please continue on a separate sheet. No admission, offer, payment or indemnity should be made in respect of liability for bodily injury, death, or property damage without the written consent of the Company. Please return this form within 7 days.
請詳細填報本表格上每一項目及於七天內交回本公司，在未得到本公司書面認許之前，不得作出或承擔任何有關人身傷亡或財物損毀賠償之責任。

INSURED 受保人

I believe that the fact stated in this Motor Accident Report Form are true. 本人相信本汽車失事報告表所述事情屬實。

Signature of Insured 保單持有人簽署 : _____ Date 日期 : _____

Full Name 姓名 : _____ I/D No. 身份證號碼 : _____

Chop 公司蓋章 : _____ Title 職位 : _____

Tel No. 電話 : _____

Address 地址 : _____

DRIVER 司機

I believe that the fact stated in this Motor Accident Report Form are true. 本人相信本汽車失事報告表所述事情屬實。

Signature of Driver 駕駛人簽署 : _____ Date 日期 : _____

Full Name 姓名 : _____ Identity Card/Passport No. 身份證號碼 : _____

Tel No. 電話 : _____ Occupation 職業 : _____ Date of Birth 出生日期 : _____

Address 地址 : _____

Important Warning 重要警告 :

Under relevant court rules (O.41A r.5(1) of the Rules of High/District Court) implemented with the Civil Justice Reform on 2nd April 2009, if one did not have honest belief that the facts stated in this document are true by the time s/he signed the Statement of Truth, s/he could be charged with and/or convicted for contempt of court, a charge of criminal nature and might be punishable by imprisonment.

根據於2009年4月2日開始的民事司法制度改革而實施的相關法庭規則，即高等法院或區域法院規則O.41A r 5(1)之規定，假若任何人士在簽署屬實申述時並未誠實地相信此文件中申述的內容為真實，她/他則可能以蔑視法庭一罪(一項刑事性質的控罪)被檢控和/或判罪，並可能受監禁。

VEHICLE 汽車之細節

Policy No. 保單號碼 _____
Registration No. 註冊號碼 _____ Make/Model 廠名及款式 _____
Cubic Capacity 馬力 _____ Year of Make 年份 _____
Carrying Capacity 載客人數 _____ Value before accident 失事前之價值 _____

Is the vehicle under a hire purchase or loan agreement? YES/NO* 該車是否有分期付款合約? 是 / 否*

If YES, state name of the finance or lending company, their address and agreement number.

如是, 請註明該財務公司名稱, 地址及合約號碼。

State fully the purpose for which the vehicle was being used at the time of accident 在交通意外發生時, 該車作為何種用途

Number of trailers attached to the vehicle
該車是否連接有拖車, 如是, 請詳述細節 _____ Value of trailers before accident
意外前之拖車價值 _____

Were goods being carried? YES/NO*
是否載有貨物 是/否*

If YES, state (a) description (b) owner
如有 請(a)說明貨物品類 _____ 物主 _____

Weight of load on (a) vehicle (b) trailers
載貨重量 汽車 _____ 拖車 _____

DRIVER DETAIL 司機之細節

Note: All the questions should be answered, whether or not the Insured was driving.

注意: 不論保單持有人是否駕駛遇事車輛, 必須回答以下各項問題

Is the driver employed by you? Yes/No*
司機是否受僱於閣下 是/否*

Was the vehicle being driven with your permission? Yes/No*
在駕駛該車前, 司機有否徵求閣下同意 有/否*

Was the car normally driven by the above driver? Yes/No*
該車是否經常由該司機駕駛 是/否*

If the driver is not the Insured, please state their relationship
如該司機不是保單持有人, 請寫上與保單持有人之關係 _____

Has the driver been convicted of any offence in connection with any motor vehicle? Yes/No*
司機曾否觸犯交通條例 曾/否*

If YES, give details including dates 如是, 請寫上事情細節及日期 _____

Has the driver ever been refused motor vehicle insurance or continuance thereof? Yes/No*
司機曾否被任何保險公司拒絕投保或續保 曾/否*

Does the driver own a motor vehicle of his / her own? Yes/No*
該司機是否擁有任何屬於自己的車輛 是/否*

If YES, give name and address of his insurer 如是, 請寫上保險公司之名稱及地址 _____

Their Policy No. 保單號碼 _____ Car No. 車牌 _____

Was the driver licensed to drive the vehicle? Yes/No*
該司機是否擁有駕駛車輛之執照? 是/否*

If YES, was the licence full/provisional*? Licence No.
如是, 駕駛執照是正式/臨時? 執照號碼 _____

How long has the driver held a full licence? Date Passed Expiry Date
司機擁有正式執照之時間? 合格日期 _____ 到期日 _____

ACCIDENT 意外發生情況

Date 日期 _____ Time 時間 _____ 上午/下午*
am/pm*

Place 地點 _____

Weather 天氣情況 _____ Visibility 視野 _____

What lights were lit on the vehicle? 汽車之何種燈光在開亮 _____

Speed: (a) before the accident (b) at the moment of the accident

時速: 意外前 _____ km/h 公里 意外時 _____ km/h 公里

Speed limit on the road Was the insured in or on the vehicle? Yes/No*

行車速度限制 _____ km/h 公里 保單持有人是否在車上 是/否*

Condition and type of road surface

道路情況 _____

Distance from the nearside at moment of accident

發生意外時受保車輛與路邊距離 _____ metres 公尺

State fully what happened 請詳述遇事經過 _____

Positions just before the accident
意外發生前之位置

Positions at the moment of the accident
意外發生時之位置

State names and address of all 請在以下各項填上姓名及地址

(a) Passengers 乘客 _____

(b) Independent Witnesses 在場目擊證人 _____

DAMAGE TO INSURED VEHICLE 受保車輛之損壞情形

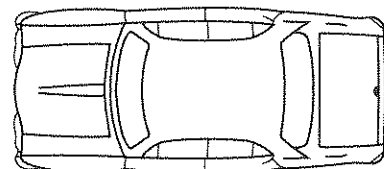
What is the extent of damage to the insured vehicle? 受保車輛之損壞程度 _____

Repairer's name 修理廠名稱 _____

Address 地址 _____

Tel. No. 電話 _____

請在圖上用箭咀指出被撞部份及用X列出
Show area of impact by arrow and extent of
damage by crosses on the diagram



Is the vehicle at the repairers premises? Yes/No*
現該車是否在修理廠 是/否*

If not, when will it be taken in for repair? (See also guidance notes) _____
如否, 將會在何時送往修理廠

In all cases where your vehicle is damaged and you are entitled to claim under the policy, please send an estimate for repairs to the Company immediately. 任何情形下, 如閣下打算從保單獲得賠償, 請附上估價單

OTHER VEHICLES INVOLVED 第三者之車輛損壞情形

Name and address of driver and/or owner 第三者之姓名地址

No. 1 Third Party Registration No. 第一車輛之第三者汽車登記號碼 _____ Name 姓名 _____

Address 地址 _____

Insurers and Policy No.

保險公司名稱及保單號碼 _____ Make/Model 廠名及款式 _____

Apparent damage

明顯之損壞程度 _____

No. 2 Third Party Registration No. 第二車輛之第三者汽車登記號碼 _____ Name 姓名 _____

Address 地址 _____

Insurers and Policy No.

保險公司名稱及保單號碼 _____ Make/Model 廠名及款式 _____

Apparent damage

明顯之損壞程度 _____

OTHER PROPERTY DAMAGED (APART FROM VEHICLES) 第三者之財物損壞情形 (不包括汽車)

Name and address of owner (if known) 物主之姓名及地址 _____

Nature of damage 損壞程度 _____

PERSONS INJURED 受傷者之情況

Name and address 姓名及地址

(State whether driver, passenger and in which vehicle or pedestrian)

請註明是司機，乘客或是行人 (年紀及性別)

Apparent injuries

明顯的受傷程度

Taken to hospital

有否被送往醫院

YES/NO*

有 / 否*

YES/NO*

有 / 否*

YES/NO*

有 / 否*

YES/NO*

有 / 否*

YES/NO*

有 / 否*

POLICE 警方

Were particulars taken by or reported to the Police? 當時有無警方在場處理此事或向警署報告

YES/NO*

If YES, (a) give name of Station

有 / 否*

如有請寫上那一區警署人員 _____ (b) attach a copy of their report. 請附上警方報告

Police Report Book No. 報案號碼 _____

Has any person been or may any person be charged with any offence arising from the accident?

YES/NO*

有否任何人因這次意外而被檢控

有 / 否*

If YES, give (a) name of person

(b) offence

如有，請列明被檢控者姓名 _____ 檢控罪名 _____

Was the driver of the Insured Vehicle tested for alcohol or drugs? 受保車輛之司機有否接受酒精或藥物試驗?

YES/NO*

有 / 否*

If YES, what was the result? 如有，結果如何? _____

Any communications including summons you receive about the accident should not be answered but sent immediately to the Company. If the accident did not involve injury and was caused by the other party, complaint shall be made by the driver regarding the driving manner of the opposite driver so that police can carry out further investigation and may assist recovery.

始接獲有關任何函件包括告票請勿作答必須先交來本公司以便採取適當行動。如意外中並無傷亡而肇事由對方引致，司機應於意外起十天內向警方投訴對方司機之駕駛態度，以便警方作進一步調查及有助向對方追索賠償。

DECLARATION 聲明

I/We hereby declare the foregoing particulars are true in every respect and that I/we have no other policy of insurance indemnifying me/us in respect of this accident and I/we undertake to give the Company all assistance in my/our power in dealing with the matter.

以上所列乃屬真實並無重複保險且願協助公司辦理一切。

敬啓者:

關於交通意外日期: _____ 年 月 日 (必須填寫)
意外地點: _____ (必須填寫)
涉及車輛編號: _____ (必須填寫)

本人中文/英文 全名為 _____ (必須填寫)

持有香港身份證編號 _____ (必須填寫)

乃上述交通意外時車輛編號 _____ (必須填寫) 之司機

現通知 台端本人已委托恆信保險顧問有限公司及其所委任之代表律師行代表本人向台端申請提供以下之副本文件:

- (1) 所有本人已給與警方之警誡或非警誡口供;
- (2) 所有其他証人所給與警方之警誡或非警誡口供;
- (3) 所有由本人及其他証人所畫之草圖;
- (4) 警方所畫之草圖及在現場所拍攝之相片; 及
- (5) 有關上述車輛編號之車輛檢驗報告。

此致

交通意外調查組

司機簽名 :

_____ (必須簽署並與口供簽名相同)

*****請注意: 授權人仕必需填寫中文或英文全名(與身份證相同), 香港身份證編號, 授權人的身份 (例如:司機/車主), 意外日期, 意外地點, 車輛編號, 及寄回正本簽名(而簽名必需與口供相同),如果上述資料有任何不全, 警方是一律不與辦理並且會影響保險的索償進度。*****