

## 僱員補償保險之一般索償程序

1. 假若有僱員因工而致重傷或死亡，請即致電本公司或閣下/貴公司的保險代理，本公司有可能委派公証行即時展開調查。如情況許可，應即時拍攝事發後的現場環境，並將照片交本公司處理。
2. 無論傷勢是否嚴重，請向勞工署索取表格二或表格二B，於填報勞工署之同時，將該表格之副本，直接或經由保險代理交來本公司。此外，無需填寫任何索償表格。
3. 假若僱員獲批病假少於七天，而沒有因是次工傷引致永久喪失工作能力，請依據勞工署所訂方法，與僱員訂定賠償額；於雙方同意後，僱員需於有關之表格二或表格二B的賠償金額一項旁邊簽署確認，事後，請送下列文件以完成索償手續。
  - 附有僱員簽名確認賠償額之表格二或表格二B副本
  - 所有病假紙正本
  - 所有醫療收據正本
4. 假若僱員獲批病假超過七天而沒有永久喪失工作能力，請送來下列文件：
  - 表格五(補償評估證明書)
  - 所有病假紙正本
  - 所有醫療收據正本
5. 假若僱員因工喪失工作能力，請儘快交來下列文件正本：
  - 表格七(評估證明書)
  - 表格五(補償評估證明書)
  - 所有病假紙正本
  - 所有醫療收據正本

## Claims Procedures - Employees' Compensation Insurance

1. **If any of your employees is injured at work resulting in fatal or serious injuries**, call us or our insurance agent/broker immediately. We may need to send an adjuster to investigate the accident right away. Where possible, take photographs of the accident scene immediately after the accident and submit them to us.
2. Whether the injury is serious or not, obtain either the Form 2 or Form 2B from any Labour Department Offices. Complete either of the Forms in duplicate and send the original to the Labour Department with a copy to us. You may also send the copy to us through your insurance agent/broker. There is no need to fill out any claim form.
3. For claims with sick leave less than 7 days and not involving permanent disability, you may settle the compensation with the employee in accordance to the formula set by the Labour Department. Upon settlement, arrange the employee to sign against the agreed settlement as stated on the Form 2 or Form 2B. For our claim settlement process, submit to us the followings:
  - a copy of the Form 2 or Form 2B which bears the original signature of the employee confirming his acceptance of the settlement amount.
  - all original sick leave certificates
  - all original medical receipts
4. For claims with sick leave exceeding 7 days and not involving permanent disability, submit the followings to us:
  - Form 5 – Certificate of Compensation assessment, if any
  - all original sick leave certificates
  - all original medical receipts
5. For claims involving permanent disability, submit the original of the following documents to us immediately when they are available:
  - Form 7 – Certificate of Assessment
  - Form 5 – Certificate of Compensation Assessment
  - all original sick leave certificates
  - all original medical expenses receipts