

強制檢疫現金資助申請書

Application Form for Mandatory Quarantine Subsidy



申請人的詳細資料 Details of the Applicant			
姓名 Full Name	中文 in Chinese	英文 in English	
出生日期 (日/月/年) Date of birth (DD/MM/YY)		香港身分證號碼 HKID number	
手機號碼 Mobile number		電子郵件地址 Email address	
通訊地址 Correspondence address			
強制檢疫之詳情(必須填寫所有資料) Details of Mandatory Quarantine (All fields are mandatory)			
強制檢疫之原因 Reason of Mandatory Quarantine			
強制檢疫通知日(日/月/年) (如: 電話、短訊、電郵、信件或指明特定群組需進行強制檢疫的宣告) Date of Mandatory Quarantine Notification (DD/MM/YY) (e.g. telephone, SMS, email, letter, or public announcement which specifies clusters requiring Mandatory Quarantine etc.)			
閣下於強制檢疫通知日的前 30 日內是否曾出境香港? Have you travelled outside of Hong Kong during the period of 30 days prior to the date you are notified of Mandatory Quarantine?		<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No	
如是, 請提供出境日期(日/月/年)。 If yes, please provide the travel period (DD/MM/YY).			
閣下於收到強制檢疫通知的前 30 日內, 你是否屬於被香港政府根據香港法例第 599C 章或第 599E 章獲豁免任何形式檢疫的類別人士, 或是否與此類獲豁免人士同住? During the period of 30 days prior to the Date of Mandatory Quarantine Notification, do you fall under the category of persons being exempted by the government of HKSAR from any form of quarantine in accordance to Chapter 599C or Chapter 599E of the Laws of Hong Kong, or do you reside in the same address as such exempted person?		<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No	
如是, 請提供詳情。 If yes, please provide details.			

個人資料收集聲明**Personal Information Collection Statement**

本人/我們確認本人/我們已閱讀及明白香港人壽保險有限公司(「香港人壽」)個人資料收集聲明。

本人/我們聲明及同意在本申請所載或香港人壽不時以任何方法收集所得、編製或持有的任何個人資料及關於本人/我們或本人/我們的保單或其他資料,可根據個人資料收集聲明收集及使用。本人/我們知悉及同意就個人資料收集聲明所述目的視乎情況轉讓本人/我們的個人資料(不論在香港或海外)予個人資料收集聲明所載的資料承讓人。個人資料收集聲明的最新版本可於以下網址下載:www.hklife.com.hk,及可向香港人壽索取。

I / We confirm that I / we have read and understood the Hong Kong Life Insurance Limited (“Hong Kong Life”) Personal Information Collection Statement (“PICS”).

I / We declare and agree that any personal data and other information relating to me / us or my / our policy(ies) in this application or collected, obtained, compiled or held by Hong Kong Life by any means from time to time may be collected and utilized in accordance with the PICS. I / We acknowledge and consent to the transfer of my / our personal data (whether within or outside Hong Kong) by Hong Kong Life for the purposes and to the types of transferee as set out in the PICS. The updated version of PICS is available for download from its website: www.hklife.com.hk, and is made available upon request.

若不同意根據「個人資料收集聲明」,提供、使用及/或轉移個人資料用作直銷推廣用途,請在左方空格上填上“✓”號。
Please check the box on the left if you do not agree with the provision to provide, use and/or transfer your personal data for direct marketing purposes in accordance with the Personal Information Collection Statement.

申請人簽署
Signature of Applicant

日期(日/月/年)
Date(DD/MM/YY)

備註:**Remarks:**

請將已填妥之強制檢疫現金資助申請書並附上所需文件*提交予香港人壽。

Please submit a completed Application Form for Mandatory Quarantine Subsidy with the required documents* to Hong Kong Life.

電郵至 client_service@hklife.com.hk

Email to client_service@hklife.com.hk

或按照以下指示將申請之所需文件上傳到香港人壽網站

步驟 1: 瀏覽香港人壽網站 www.hklife.com.hk

步驟 2: 點擊「客戶服務」

步驟 3: 點擊「文件上傳」

OR upload the required documents to Hong Kong Life website by following the below instruction.

Step 1: Visit Hong Kong Life website at www.hklife.com.hk

Step 2: Click “CUSTOMER SERVICES”

Step 3: Click “Documents Upload”

或郵寄至:

OR by mail to:

香港人壽保險有限公司

香港皇后大道中 183 號中遠大廈 15 樓

Hong Kong Life Insurance Limited

15/F Cosco Tower, 183 Queen's Road Central, Hong Kong

*所需文件:

Required documents:

1) 申請人之香港身分證副本; 及

Copy of HKID card of the Applicant; and

2) 申請人之居住地址證明; 及

Residential address proof of the Applicant; and

3) 強制檢疫通知書副本

Copy of Mandatory Quarantine Order Notification

若申請獲成功批核,強制檢疫現金資助將以支票形式郵寄至您的通訊地址。

If the application is successfully approved, the Mandatory Quarantine Subsidy will be mailed to your correspondence address by cheque.

如有任何查詢,歡迎致電 2290 2882 與我們聯絡

For any enquiries, please contact us at 2290-2882