



Liability Claim Report

Please return to:				
Claim No: (Office Use Only)				
Please answer all relevant questions fully and return this form within seven days. INSURED				
Policy No:				
Full Name: Date of Birth:				
Address:				
Postcode -				
Business or Occupation				
Business Telephone No. Residence Telephone No.				
THE EVENT				
Date of Incident: / / / Time of Loss: AM/F				
Exact place of accident giving rise to claim				
When was the accident reported to you				
Have you any other insurance in force which may cover this loss Yes No				
Policy No: Insurer:				
Policy No: Insurer: Address:				
Address:				
Address: DETAILS OF CLAIM				
Address:				
Address: DETAILS OF CLAIM				
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DAMAGE TO PROPERTY					
Please state name and address of each owner of damaged property and give full details of such damage					
Was any of the above known to the insured before the accident? Yes No No					
ii res , piease state relationship					
PERSONAL INJURY					
		ch injured person and details of the			
Name	Occupation	Employer	Injuries		
If the belowed account to an extreme		ha fallanda a markina			
	ir employees, please also answer t				
How long has he/she been employed by you (a) altogether (b) in his/her present capacity					
Approximately weekly wage inclusive of overtime and any bonus, excluding income tax					
Age	Married or Single	Dependant children of	school age		
If the injured person has been absent from work as a result of the accident					
a) When did the absence begin / / (b) Date of return to work, or expected date if still absent /					
If the injured person has returned to work is he/she now performing full pre-accident work? Yes No					
What was the injured person doing at the time of the accident					
Who was in charge of their work					
Was any machinery involved? If 'Yes', please give details	Yes No No				
Was the accident due to the lack	of or non use of guarding				
Was the accident due to any defect in the premises or plant					
Use this space for any additional information that you may wish to give					

PRIVACY AND YOUR PERSONAL INFORMATION

China Taiping Insurance (UK) Co Ltd are the data controller (as defined by the UK Data Protection Act 2018 and all applicable laws which replace or amend it, including the General Data Protection Regulation) in respect of this contract of insurance. **We** may obtain, collect and process **your** personal information for the purposes of entering into and performing **our** insurance contract with **you**.

For full details of what data **we** collect about **you**, how **we** use it, who **we** share it with, how long **we** keep it and **your** rights relating to **your** personal data, please refer to **our** Privacy Notice which is available on our website at: https://uk.cntaiping.com/uk-privacy/

If you do not have access to the Internet, please write to our Data Protection Officer (at the address shown below) with your name and address and a copy will be sent to you in the post.

In summary, we, may, as part of our agreement with you under this contract, collect personal information about you, including:-

- Name, address, contact details, date of birth and cover required
- Financial information such as previous credit history, bank details
- Details of any previous insurance claims.
- Information for Employers' Liability Database records (if Employers' Liability insurance is included)

We may also collect sensitive personal information about **you**, and any additional people who **you** wish to be insured under the policy, including medical records to validate a claim should **you** be claiming for sickness or an accident.

We collect and process your personal information for the purpose of insurance and claims administration.

Telephone calls may be monitored and recorded and the recordings used for fraud prevention and detection, training and quality control purposes.

Your personal information may be shared with third parties which supply services to us or which process information on our behalf (for example, premium collection and claims validation, or for communication purposes related to your cover). We will ensure that they keep your information secure and do not use it for purposes other than those that we have specified in our Privacy Notice.

Some third parties that process **your** data on **our** behalf may do so outside of the European Economic Area ("EEA"). Where such transfers occur, **we** ensure that they do not occur without **our** prior written authority and that an appropriate transfer agreement is put in place to protect **your** personal information to an equivalent standard to that found in the EEA.

We will keep your personal information only for as long as we believe is necessary to fulfil the purposes for which the personal information was collected (including for the purpose of meeting any legal obligations).

We will share your information if we are required to by law. We may share your information with enforcement authorities if they ask us to, or with a third party in the context of actual or threatened legal proceedings, provided we can do so without breaching data protection laws.

If you have any concerns about how your personal data is being collected and processed, or wish to exercise any of your rights detailed in our Privacy Notice, please contact our Data Protection Officer at:-

China Taiping Insurance (UK) Co Limited; 2, Finch Lane, London EC3V 3NA E-mail: dataprotectionofficer@uk.cntaiping.com Tel: (0044) (0)20 7839 1888

DECLARATION				
I/We hereby declare that to the best of my knowledge and belief these particulars are true and complete.				
Date / / / Signature:				
Position:				
(If signed on behalf of a company)				
Note: The Company does not admit any liability by the issue of this form				