

Greater Bay Area Personal Accident Comprehensive Protection Plan

Claim Form must be submitted to Bank of China Group Insurance Company Limited (“BOCG Insurance”) not later than 30 days from the accident.

Address: Claims Department, 8/F., Wing On House, 71 Des Voeux Road Central, Hong Kong

Claim Procedure

Please submit the required documents together with your completed Personal Accident Comprehensive Protection Plan Claim Form to BOCG Insurance.

Claim items	Claim documents
Accidental Death or Permanent/ Double Indemnity for Accidental Death or Permanent Total Disablement/ Compassionate Death Cash Benefit/ Credit Card Outstanding Balance Protection	<ul style="list-style-type: none"> ✓ Medical report issued by Hospital and/or physician which includes but not limited to the nature and the extent of the injury of the insured person. ✓ Medical report issued by Hospital and/or physician which confirms the extent of Permanent Total Disability (if applicable). ✓ For accidental death claim, please submit the incident report (if applicable), Death Certificate, relationship proof between the Claimant and Deceased. (e.g. marriage certificate, birth certificate, letter of administration or probate) ✓ Police investigation report and/or copies of police statement taken by the claimant.(if applicable) ✓ For the claim under “Personal Accident Comprehensive Protection Plan (Greater Bay Area)”, except the required document mentioned above, please provide us copies of identity of the policy holder and insured person and the documentary proof of their residence in Greater Bay Area* for 6 months prior to the accident. ✓ Credit card outstanding balance statement during the Period of Insurance (if applicable).
Medical Expenses	<ul style="list-style-type: none"> ✓ Original medical receipts which includes name, address and contact no of the clinic / hospital. ✓ Physician’s report which confirms the insured person’s diagnosis, date of injury, consultation period. ✓ For the claim of laboratory test; x-ray, physiotherapy and / or chiropractic expenses; referral letter issued by HK registered western physician is required. (if applicable)

	<ul style="list-style-type: none"> ✓ For the claim under “Personal Accident Comprehensive Protection Plan (Greater Bay Area)”, except the required document mentioned above, please provide us copies of identity of the insured and insured person and the documentary proof of their residence in Greater Bay Area* for 6 months prior to the accident.
Home Nursing Allowance	<ul style="list-style-type: none"> ✓ Physician’s report which confirms the insured person’s diagnosis, date of injury, consultation period, ✓ HK Register western Physician’s referral letter. ✓ Original receipt(s) for the expenses of services rendered by a Qualified Nurse.

*Greater Bay Area refers to Hong Kong, Macau, Guangzhou, Shenzhen, Zhuhai, Foshan, Zhongshan, Dongguan, Zhaoqing, Huizhou and Jiangmen.

Notes for making a claim (For more details, please refer to the provisions of the relevant policy)

- This material is for reference only. In order to proceed with your claim, BOCG Insurance reserves the right to request for additional documents if needed.
- The submission of an incomplete form or insufficient information or supporting documents may delay your claim processing or result in the denial of your claim.