

# eClaims

- 提交索賠申請
- 追蹤索賠進度

Qnect Training - For Internal Use Only



1



無紙化索賠申請

2



用任何設備，隨時隨地  
跟進索賠進度

3



更快批核並賠償

eClaims優點



## 專屬eClaims平台

1. 旅遊保險
2. 家傭保險
3. 家居保險
4. 汽車保險



## 通用eClaims平台

所有產品



(旅遊保險、家傭保險、家居保險  
及汽車保險產品除外)

# eClaims 適用產品



進入eClaims頁面



### Personal Insurance



#### Travel

Lodge your travel insurance claim online. Easy and Quick.

[eClaim Submission](#)

[Frequently Asked Questions](#)

[Claim Status](#)



#### Domestic Helper

Lodge your claim online. Easy and Quick.

[eClaim Submission](#)

[Frequently Asked Questions](#)

[Claim Status](#)



#### Home

Lodge your claim online. Easy and Quick.

Report immediately to the police any incident relating to malicious damage, burglary, robbery, or theft and lodge your claim with a copy of police report.

[eClaim Submission](#)

[Frequently Asked Questions](#)

[Claim Status](#)

進入網上索償系統



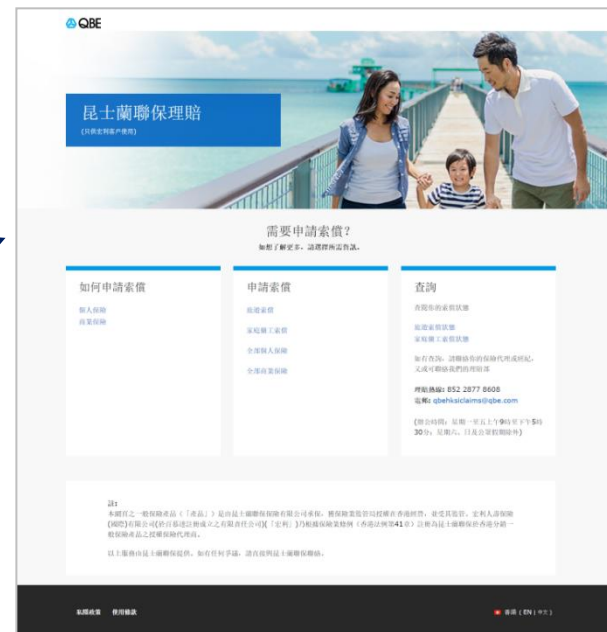
# MIL - ClaimSimple

<https://www.claimsimple.hk/>



點擊進入QBE eClaims頁面

<https://www.qbe.com/hk/zh-hk/mil/claims>



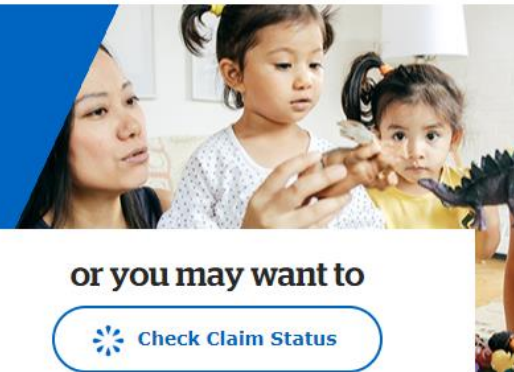
索償需於發生事  
故當天起30天  
內提出申請



中文

# Domestic Helper Insurance Claims

Simple Online Insurance Claim Experience



## Start your claim here

Your Policy Number\*

How to find my policy number?

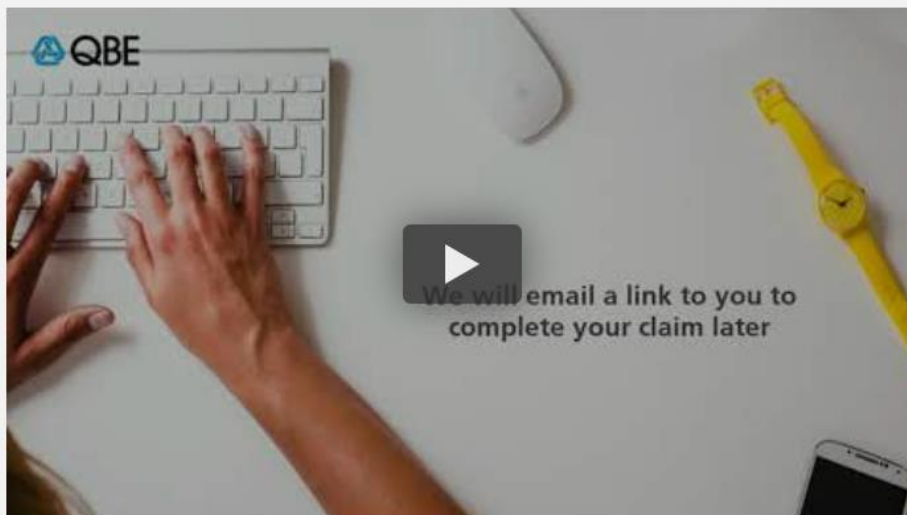
Date of Loss/Incident\*

Start >

## or you may want to

Check Claim Status

Read the FAQ



## Documents to prepare

Select claim types

- Clinical Expenses
- Dental Expenses
- Hospitalization of helper
- Permanent disability or Death
- Repatriation
- Helper's Liability
- Dishonesty of helper
- Employee's Compensation
- Other Claim

右欄已列出所需  
預備的文件

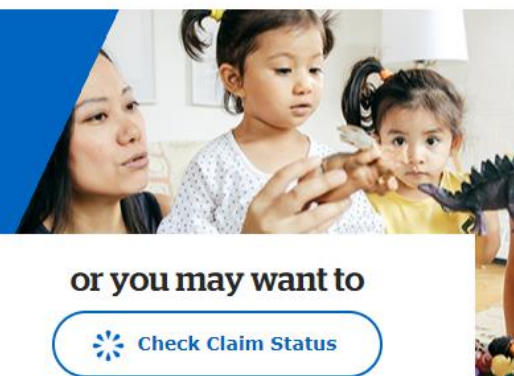
索償需於發生事  
故當天起30天  
內提出申請



中文

# Domestic Helper Insurance Claims

Simple Online Insurance Claim Experience



## Start your claim here

Your Policy Number\*

Date of Loss/Incident\*

DD/MM/YYYY



Start >

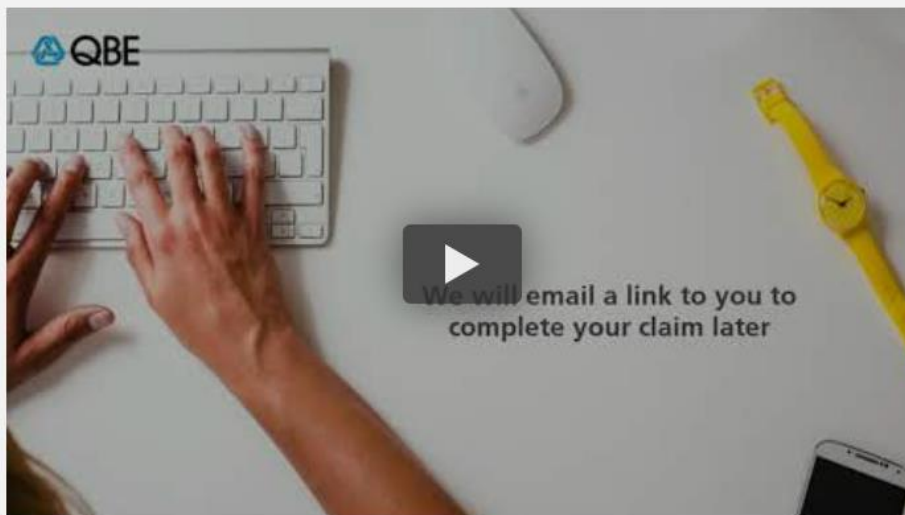
[How to find my policy number?](#)

## or you may want to

[Check Claim Status](#)

[Read the FAQ](#)

輸入保單編號  
及意外發生日  
期



## Documents to prepare

Select claim types

- Clinical Expenses
- Dental Expenses
- Hospitalization of helper
- Permanent disability or Death
- Repatriation
- Helper's Liability
- Dishonesty of helper
- Employee's Compensation
- Other Claim



索償需於發生事  
故當天起30天  
內提出申請



中文

## Domestic Helper Insurance Claims

Simple Online Insurance Claim Experience

點擊[Start],  
提交所需資料

### Start your claim here

Your Policy Number\*

How to find my policy  
number?

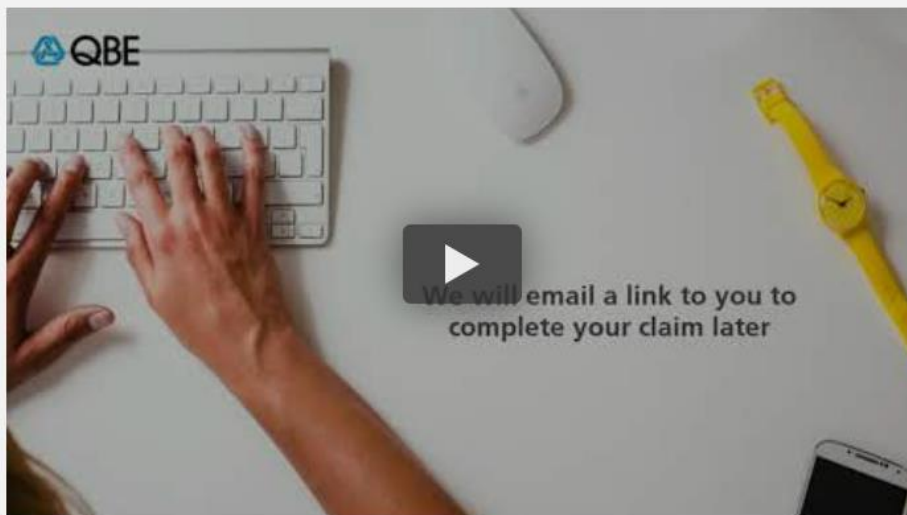
Date of Loss/Incident\*

Start >

### or you may want to

Check Claim Status

Read the FAQ



### Documents to prepare

Select claim types


- Clinical Expenses
- Dental Expenses
- Hospitalization of helper
- Permanent disability or Death
- Repatriation
- Helper's Liability
- Dishonesty of helper
- Employee's Compensation
- Other Claim





## Welcome


Domestic Helper Insurance A0000001

 **Get Started**

 **Select Helper**

 **Claim details**

 **Payment & Contact**

 **Review & Submit**

## Authenticate Yourself

Information of the policy holder name or registered Domestic helper ID for verification

Employer's Full Name    Helper's HKID/Passport Number

輸入保單持有人全名或  
家庭傭工香港身份證或護照  
號碼進行認證

Welcome! Chan Tai Man

Domestic Helper Insurance A0000001

- ✓ Get Started
- ✎ Select Helper
- ✕ Claim details
- ✕ Payment & Contact
- ✕ Review & Submit

## Tell us who is involved in this claim

Select Helper

**Maria, XXX**  
WX35\*\*\*

[Click here](#) if you cannot find the helper details

選擇家庭傭工參與此索賠

Next →

Welcome! Chan Tai Man

Domestic Helper Insurance A0000001

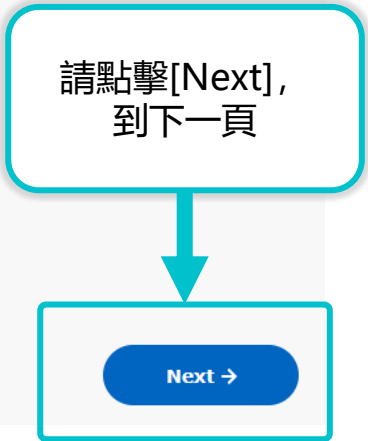
- ✓ Get Started
- ✎ Select Helper
- ✕ Claim details
- ✕ Payment & Contact
- ✕ Review & Submit

### Tell us who is involved in this claim

Select Helper

**Maria, XXX**  
WX35\*\*\*

[Click here](#) if you cannot find the helper details



Welcome Chan Tai Man

Domestic Helper Insurance A0000001

- ✓ Get Started
- ✓ Select Helper
- 🔗 Claim details
- ✗ Payment & Contact
- ✗ Review & Submit

← Back

## Tell us what happened

Select claim type



Clinical Expenses



Dental Expenses



Other Claim

選擇索賠事項  
(醫療費用/牙科費用/其他索賠)

Save for Later

Next →

Welcome Chan Tai Man

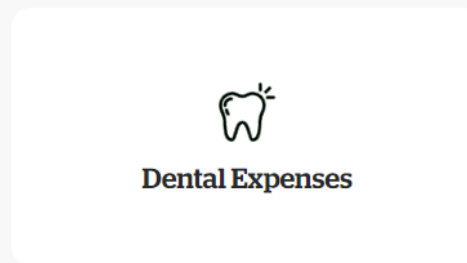
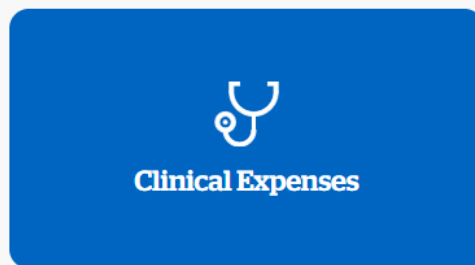
Domestic Helper Insurance A0000001

- ✓ Get Started
- ✓ Select Helper
- 🔗 Claim details
- ✗ Payment & Contact
- ✗ Review & Submit

← Back

### Tell us what happened

Select claim type



Save for Later

請點擊[Next],  
到下一頁

Next →

Welcome Chan Tai Man

Domestic Helper Insurance / A0000001

✓ Get Started

✓ Select Helper

✓ Claim details

✗ Clinical Expenses Remove

Details of the illness/injury

Related conditions

Details of consultation

Supporting documents

✗ Payment & Contact

✗ Review & Submit

← Back

## Tell us what happened

Details of the Illness/Injury

Where was the helper when subject Illness/Injury occurred?\*

HONG KONG

Nature of the illness/injury\*

Please select

Please select

Sickness

Injury

選擇疾病或受傷之性質

Save for Later

Next →

Welcome Chan Tai Man

Domestic Helper Insurance / A0000001

✓ Get Started

✓ Select Helper

✓ Claim details

✗ Clinical Expenses Remove

Details of the illness/injury

Related conditions

Details of consultation

Supporting documents

✗ Payment & Contact

✗ Review & Submit

← Back

## Tell us what happened

Details of the Illness/Injury

Where was the helper when subject Illness/Injury occurred?\*

HONG KONG

Nature of the illness/injury\*

Sickness

Save for Later

請點擊[Next],  
到下一頁

Next →



Welcome Chan Tai Man  
Domestic Helper Insurance A0000001

- ✓ Get Started
- ✓ Select Helper
- ✓ Claim details
- ✗ Clinical Expenses Remove
  - Details of the illness/injury
  - Related conditions
  - Details of consultation
  - Supporting documents
- ✗ Payment & Contact
- ✗ Review & Submit

← Back

## Tell us what happened

Details of the Illness/Injury

### Where was the helper when subject ill?

HONG KONG

### Nature of the illness/injury\*

Sickness

1

← Back

## Tell us what happened

Related conditions

Is the helper's condition related to one of the following?

- Pregnancy / Contraception
- Nervous / mental disease / disorder
- Physical check-ups / rest cure
- Vaccinations / immunization / injections / preventive medication
- Intoxicated by alcohol / narcotics / drugs not prescribed by a doctor
- Sexually transmitted diseases / venereal disease / AIDS
- Any pre-existing sickness / disease resulting in medical treatment being received within 3 consecutive months immediately prior to the effective date of the insured person

None of the above

1 or more conditions

回覆簡單問題

Save for Later

Next →

Save for Later

Next →

Welcome Chan Tai Man  
Domestic Helper Insurance A0000001

- ✓ Get Started
- ✓ Select Helper
- ✓ Claim details
- ✗ Clinical Expenses Remove
  - Details of the illness/injury
  - Related conditions
  - Details of consultation
  - Supporting documents
- ✗ Payment & Contact
- ✗ Review & Submit

← Back

## Tell us what happened

Details of the Illness/Injury

### Where was the helper when subject to the illness/injury?

HONG KONG

### Nature of the illness/injury\*

Injury **2**

### Was the injury/accident reported to the police?

Yes

No

## Tell us what happened

Related conditions

Is the helper's condition related to one of the following?

- Injury occurring outside the rest days of the Insured Person
- Self-inflicted injury or suicide
- Dental Treatment
- Intoxicated by alcohol, narcotics or drugs not prescribed by a doctor
- Engaging in or taking part in illegal activities
- Driving or riding in any kind of motor race
- Underwater activities involving the use of breathing apparatus
- Cosmetic or plastic surgery unless to correct an Injury for which this Policy covers

Yes

No

Save for Later

回覆簡單問題

Next →

Save for Later

Next →

Welcome! Chan Tai Man

Domestic Helper Insurance A0000001

✓ Get Started

✓ Select Helper

✓ Claim details

✗ Clinical Expenses Remove

Details of the illness/injury

Related conditions

Details of consultation

Supporting documents

✗ Payment & Contact

✗ Review & Submit

[← Back](#)

## Tell us what happened

Details of consultation

Please note for any consultation, treatment, &/or medication is only payable under appointed medical service provider network, utilising the cashless card.

Please select the type of illness/Injury suffered\*

Please select



Date of Visit\*

11/10/2023



Medical attention received from/for\*

Please select



Total amount of the clinical expenses\*

HKD



回覆簡單問題

[Save for Later](#)

[Next →](#)

Welcome Chan Tai Man

Domestic helper insurance A0000001

✓ Get Started

✓ Select Helper

✓ Claim details

✓ Clinical Expenses Remove

Details of the illness/injury

Related conditions

Details of consultation

Supporting documents

✗ Payment & Contact

✗ Review & Submit

[← Back](#)

## Tell us what happened

Details of consultation

Please note for any consultation, treatment, &/or medication is only payable under appointed medical service provider network, utilising the cashless card.

Please select the type of illness/Injury suffered\*

Headache

Date of Visit\*

11/10/2023

Medical attention received from/for\*

Accident & Emergency (A&E) service

Total amount of the clinical expenses\*

HKD

500.00

[Save for Later](#)

請點擊[Next],  
到下一頁

[Next →](#)

Welcome Chan Tai Man

Domestic Helper Insurance A0000001

✔ Get Started

✔ Select Helper

✔ Claim details

✘ Clinical Expenses [Remove](#)

[Details of the illness/injury](#)

[Related conditions](#)

[Details of consultation](#)

[Supporting documents](#)

✘ Payment & Contact

✘ Review & Submit

[← Back](#)

## Upload your supporting documents

Please submit the following 1 document(s) to process the claim

**Medical/hospital bills/Consultation, Treatment, &/or Medication Receipts with clearly marked diagnosis and certified by a legally qualified and registered medical practitioner or Chinese Medicine Practitioner or Registered physiotherapist.**

Drag and Drop file here or Choose file(s)

提供所需文件

If you have more documents that will help us process your claim. [Upload Here](#)

Please retain the original copy of the submitted documents for 3 months.

[Save for Later](#)

[Next →](#)

Welcome Chan Tai Man

Domestic Helper Insurance A0000001

✔ Get Started

✔ Select Helper

✔ Claim details

✘ Clinical Expenses [Remove](#)

Details of the illness/injury

Related conditions

Details of consultation

Supporting documents

✘ Payment & Contact

✘ Review & Submit

[← Back](#)

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**Medical/hospital bills/Consultation, Treatment, &/or Medication Receipts with clearly marked diagnosis and certified by a legally qualified and registered medical practitioner or Chinese Medicine Practitioner or Registered physiotherapist.**

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請點擊[Next],  
到下一頁

[Next →](#)

Welcome Chan Tai Man

Domestic Helper Insurance A0000001

✓ Get Started

✓ Select Helper

✓ Claim details

✓ Clinical Expenses Remove

Details of the illness/injury

Related conditions

Details of consultation

Supporting documents

✗ Payment & Contact

✗ Review & Submit

← Back

### Covered by another insurance policy?

Is the claim covered by any other insurance policy?\*

Yes

No

回答是否向其他保險公司就是次事件提出索賠

Save for Later

Next →

Welcome Chan Tai Man

Domestic Helper Insurance A0000001

✓ Get Started

✓ Select Helper

✓ Claim details

✓ Clinical Expenses [Remove](#)

Details of the illness/injury

Related conditions

Details of consultation

Supporting documents

✗ Payment & Contact

✗ Review & Submit

[← Back](#)

### Covered by another insurance policy?

Is the claim covered by any other insurance policy?\*

Yes

No

[Save for Later](#)

請點擊[Next],  
到下一頁

[Next →](#)



Welcome Chan Tai Man  
Domestic Helper Insurance A0000001

✓ Get Started

✓ Select Helper

✓ Claim details

✓ Clinical Expenses Remove

Details of the illness/injury

Related conditions

Details of consultation

Supporting documents

✗ Payment & Contact

✗ Review & Submit

← Back

## Payment bank account details

Once your claim is approved, we will direct credit the approved claim amount into your bank account.

Account holder name\*

Chan Tai Man

Bank Code / Bank Name\*

Please select

If you are having difficulties filling up the bank account details

揀選銀行代碼/  
銀行名稱

Bank Code / Bank Name\*

Please select

024 | HANG SENG BANK LIMITED

004 | HSBC

012 | BANK OF CHINA (HONG KONG) LIMITED

014 | BANK OF CHINA (HONG KONG) LIMITED

019 | BANK OF CHINA (HONG KONG) LIMITED

026 | BANK OF CHINA (HONG KONG) LIMITED

030 | BANK OF CHINA (HONG KONG) LIMITED

031 | BANK OF CHINA (HONG KONG) LIMITED

033 | BANK OF CHINA (HONG KONG) LIMITED

Save for Later

Next →

- ✓ **Get Started**
- ✓ **Select Helper**
- ✓ **Claim details**
- ✓ **Clinical Expenses** Remove
- Details of the illness/injury
- Related conditions
- Details of consultation
- Supporting documents
- ✗ **Payment & Contact**
- ✗ **Review & Submit**

[← Back](#)

### Payment bank account details

Once your claim is approved, we will direct credit the approved claim amount into your bank account.

**Account holder name\***

**Bank Code / Bank Name\***

Finding Branch code

### Hang Seng Bank

123

123456 789

Branch Code

Account Number

You can find the Branch Code and Account Number on your Hang Seng Bank ATM Card.

The first 3 digits are the Branch Code and the following 7 or 9 digits are the Account Number.

**Branch code (3 digits)\***

**Account number (6 - 9 digits)\***

If you are having difficulties filling up the bank account details, [click here](#)

**提供您的收款銀行資料**  
**注意：賠償金額以港元結算**

[Next →](#)

- ✓ Get Started
- ✓ Select Helper
- ✓ Claim details
- ✓ Clinical Expenses Remove
- Details of the illness/injury
- Related conditions
- Details of consultation
- Supporting documents
- ✗ Payment & Contact
- ✗ Review & Submit

[← Back](#)

### Payment bank account details

Once your claim is approved, we will direct credit the approved claim amount into your bank account.

Account holder name\*

Bank Code / Bank Name\*

[Finding Branch code](#)

✕

### Hang Seng Bank

**123**      **123456 789**

Branch Code      Account Number

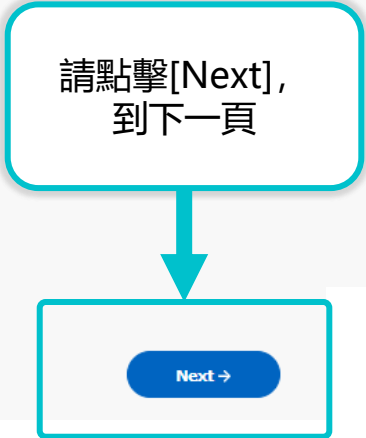
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Account number (6 - 9 digits)\*

If you are having difficulties filling up the bank account details, [click here](#)



Welcome Chan Tai Man

Domestic Helper Insurance A0000001

✓ Get Started

✓ Select Helper

✓ Claim details

✓ Clinical Expenses Remove

Details of the illness/injury

Related conditions

Details of consultation

Supporting documents

✎ Payment & Contact

✕ Review & Submit

← Back

## Contact information

We may contact you for any update of the claim

Name\*

Chan Tai Man

Mobile Number\*

+852 ▾

This number will be used for any whatsapp / sms notification

Email Address\*

chantaiman01@gmail.com

Confirm Email Address\*

Would you like us to send a copy of all email notifications to your agent / broker on this claim?\*

Yes

No

提供您的聯絡資料

Save for Later

Next →

Welcome Chan Tai Man

Domestic Helper Insurance A0000001

✓ Get Started

✓ Select Helper

✓ Claim details

✓ Clinical Expenses Remove

Details of the illness/injury

Related conditions

Details of consultation

Supporting documents

✎ Payment & Contact

✕ Review & Submit

← Back

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Email Address\*

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Confirm Email Address\*

chantaiman01@gmail.com

Would you like us to send a copy of all email notifications to your agent / broker on this claim?\*

Yes

No

Save for Later

請點擊[Next],  
到下一頁

Next →

Welcome Chan Tai Man  
Domestic Helper Insurance A0000001

- ✓ Get Started
- ✓ Select Helper
- ✓ Claim details
- ✓ Clinical Expenses Remove

Details of the illness/injury  
Related conditions  
Details of consultation  
Supporting documents

✓ Payment & Contact

📝 Review & Submit

[← Back](#)

## Summary of claim submission

Please review your claim details before submitting

確認資料

### Policy A0000001

Insured Person  
HKID/Passport Number  
Date of Birth

**Maria, XXX**  
**WX3**  
**01/01/1979**

### Clinical Expenses

#### Details of the Illness/Injury

Where was the helper when subject Illness/Injury occurred?  
Nature of the illness/injury

**HONG KONG**  
**Sickness**

#### Related conditions

Is the helper's condition related to one of the following?

**None of the above**

- Pregnancy / Contraception
- Nervous / mental disease / disorder
- Physical check-ups / rest cure
- Vaccinations / immunization / injections / preventive medication
- Intoxicated by alcohol / narcotics / drugs not prescribed by a doctor
- Sexually transmitted diseases / venereal disease / AIDS
- Any pre-existing sickness / disease resulting in medical treatment being received within 3 consecutive months immediately prior to the effective date of the insured person

### Details of consultation

Please select the type of illness/Injury suffered  
Date of Visit  
Medical attention received from/for  
Total amount of the clinical expenses

**Headache**  
**11/10/2023**  
**Accident & Emergency (A&E) service**  
**HKD 500.00**

確認資料

### Supporting documents

Medical/hospital bills/Consultation, Treatment, &/or Medication Receipts with clearly marked diagnosis and certified by a legally qualified and registered medical practitioner or Chinese Medicine Practitioner or Registered physiotherapist.

x Document Not Uploaded

### Another insurance?

Is the claim covered by any other insurance policy?

No

### Payment & Contact

#### Payment information

Account holder name  
Bank Code / Bank Name  
Branch code  
Account number

Chan Tai Man  
**024 | HANG SENG BANK LIMITED**  
**024**  
**123445678**

#### Contact Information

Name  
Mobile  
Email  
Would you like us to send a copy of all email notifications to your agent / broker on this claim?

Chan Tai Man  
**+852 91234567**  
**chantaiman01@gmail.com**  
**Yes**

### Terms and Conditions:

- I / We hereby confirm that I / we have read and fully understood the below documents / notice.
- [Personal Information Collection Statement "PICS" Acknowledgment](#)
  - [Declaration & Authorization](#)

[Save for Later](#)

[Submit →](#)

### Details of consultation

Please select the type of illness/Injury suffered  
Date of Visit  
Medical attention received from/for  
Total amount of the clinical expenses

**Headache**  
**11/10/2023**  
**Accident & Emergency (A&E) service**  
**HKD 500.00**

### Supporting documents

Medical/hospital bills/Consultation, Treatment, &/or Medication Receipts with clearly marked diagnosis and certified by a legally qualified and registered medical practitioner or Chinese Medicine Practitioner or Registered physiotherapist.  
x Document Not Uploaded

### Another insurance?

Is the claim covered by any other insurance policy? **No**

### Payment & Contact

#### Payment information

Account holder name **Chan Tai Man**  
Bank Code / Bank Name **024 | HANG SENG BANK LIMITED**  
Branch code **024**  
Account number **123445678**

Chan Tai Man  
**+852 91234567**  
**chantaiman01@gmail.com**  
**Yes**

確認所有資料無誤後，拉到頁面底部，點擊同意

Would you like us to send a copy of all email notifications to your agent / broker on this claim?

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[Save for Later](#)

[Submit →](#)



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x Document Not Uploaded

### Another insurance?

Is the claim covered by any other insurance policy?

No

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#### Payment information

Account holder name  
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Branch code  
Account number

Chan Tai Man  
024 | HANG SENG BANK LIMITED  
024  
123445678

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Name  
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+852 91234567  
chantaiman01@gmail.com  
Yes

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  - Declaration & Authorization

Save for Later

點擊 [Submit]  
提交

Submit →

# 提交索賠申請 - 家傭保險 - 中途儲存



Welcome Chan Tai Man

Domestic Helper Insurance A0000001

✔ Get Started

✔ Select Helper

✔ Claim details

✔ Clinical Expenses Remove

Details of the illness/injury

Related conditions

Details of consultation

Supporting documents

✔ Payment &amp; Contact

✘ Review &amp; Submit

[← Back](#)

## Tell us what happened

Details of consultation

Please note for any consultation, treatment, &/or medication is only payable under appointed medical service provider network, utilising the cashless card.

**Please select the type of illness/Injury suffered\***

Headache

**Date of Visit\***

11/10/2023

**Medical attention received from/for\***

Accident &amp; Emergency (A&amp;E) service

**Total amount of the clinical expenses\***

HKD

500.00

[Save for Later](#)[Next →](#)

Welcome Chan Tai Man

Domestic Helper Insurance A0000001

✓ Get Started

✓ Select Helper

✓ Claim details

✓ Clinical Expenses Remove

Details of the illness/injury

Related conditions

Details of consultation

Supporting documents

✓ Payment & Contact

✗ Review & Submit

← Back

## Tell us what happened

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Please select the type of illness/Injury suffered\*

Headache

Date of Visit\*

11/10/2023

Medical attention received from/for\*

Accident & Emergency (A&E) service

Total amount of the clinical expenses\*

500.00

點擊 [Save for Later]

Save for Later

Next →

Welcome Chan Tai Man

Domestic Helper Insurance A0000001

- ✓ Get Started
- ✓ Select Helper
- ✓ Claim details
- ✓ Clinical Expenses Remove
  - Details of the illness/injury
  - Related conditions
  - Details of consultation
  - Supporting documents
- ✓ Payment & Contact
- ⊗ Review & Submit

[← Back](#)

## Tell us what happened

Details of consultation

Please note for any consultation, treatment, &/or medication is only payable under appointed medical service provider network, utilising the cashless card.

Please select the type of illness/injury suffered\*

Headache

Date of Visit\*

11/10/2023

Medical attention received from/for\*

Accident & Emergency (A&E) service

Total amount of the clinical expenses\*

HKD 500.00

[Save for Later](#)

[Next →](#)

### Save for later

Please provide your email address below and we will email you the link for resuming your claim submission.

[Send →](#)

輸入您的電郵地址，系統會儲存您早前輸入過的所有資料，並把連結發送到此電郵地址，供您下次繼續索償申請


繼續進行上次索償  
申請電郵

A0000001 - Resume your online claim lodgement 繼續您的網上索償申請



QnectAsia@qbe.com

To

 If there are problems with how this message is displayed, click here to view it in a web browser.



## Online Insurance Claims Lodgement

### 網上保險索償申請

Thank you for using our online claims service. Please be reminded that you're halfway towards completing the claims submission. Your claims data is only now saved and we **DO NOT** process any data until you complete the claims submission.

感謝你使用我們的網上索償服務。請注意你的索償申請尚未完成，我們已為你所填寫的索償資料暫存。在你還沒完成提交索償申請之前，我們並不會處理你所暫存的資料。

If you wish to resume your claims submission, please click the button below

如果你想繼續填寫你的索償申請，請點擊下面的按鈕

[Resume 繼續索償](#)

The above link will be expired in 7 days. 以上連結將於7天後失效。

QBE Hong Kong

點擊連結，繼續您的  
索償申請

# 追蹤索賠進度-家傭保險



# Domestic Helper Insurance Claims

Simple Online Insurance Claim Experience



## Start your claim here

Your Policy Number\*

How to find my policy number?

Date of Loss/Incident\*

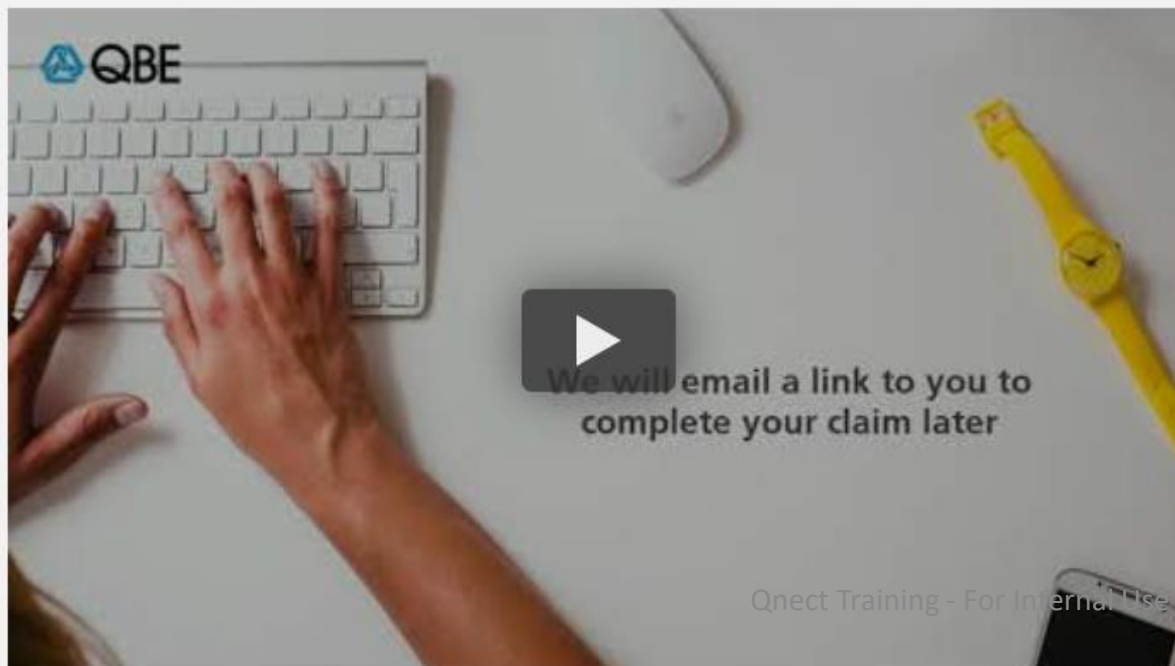
Start >

## or you may want to

[Check Claim Status](#)

[Read the FAQ](#)

點擊  
[Check Claim Status]



We will email a link to you to complete your claim later

## Documents to prepare

### Select claim types

- Clinical Expenses
- Dental Expenses
- Hospitalization of helper
- Permanent disability or Death
- Repatriation
- Helper's Liability
- Dishonesty of helper
- Employee's Compensation
- Other Claim



# Claim Status Checking

提供所需資料

**Product\***

Domestic Helper

**Policy Number | Claim Number**

A0000001

[How to find my policy number?](#)

**Employer's Full Name | Helper's HKID/Passport Number**

CHAN TAI MAN

Check

# Claim Status Checking

**Product\***

**Policy Number | Claim Number**

[How to find my policy number?](#)

**Employer's Full Name | Helper's HKID/Passport Number**



# Claim Status Checking

## Status of claims related to

Product  
**Domestic  
Helper  
Insurance**

Policy Number  
**A0000001**

[Check for another policy](#)

Filter by date of loss/incident



Filter by status



Claim Number: AC814451

[Claim Lodgement](#)

查看申請進度



## In assessment

Your claim is currently under review.

Policyholder: **CHAN TAI MAN**

Date of Loss/Incident: **11 Oct 2023**

Update as of: **11 October 2023**