

Fire Protection

Impairment Form

Completing this Form

All impairments to fire protection equipment should be recorded and strictly controlled by site management. This form should be used to notify Chubb Insurance Hong Kong Limited when fire protection systems (sprinkler systems, fire detection systems, gaseous agent fire suppression systems, etc.) are impaired in accordance with the following criteria:

- Impairment/isolation exceeds 8 hours duration or extends overnight and
- Impairment/isolation affecting more than 10% of the complex/building.

The completed form should be emailed to Chubb at **FireImpairment.HK@chubb.com**

The relevant section of the form should be completed and further notification provided once protection is restored.

**** The Extend Of The Impairment Should Be Limited To Specific Areas of Alarm Zones ****

Section A - to be completed by the Insured

Insured Name:			
Location/Site Address:			
Systems Impaired:	<input type="checkbox"/> Smoke Detectors	<input type="checkbox"/> Thermal Detector	<input type="checkbox"/> Fire Pumps
	<input type="checkbox"/> Alarm Panel	<input type="checkbox"/> Alarm Connection	<input type="checkbox"/> Water Supply
	<input type="checkbox"/> Sprinklers	<input type="checkbox"/> Hydrants	<input type="checkbox"/> Other:
Description of Impairment:			
Reason for Impairment:			
Impairment Start Date:		Time:	
Impairment End Date:		Time:	
Impairment Reported By:			
Name:			
Title:		Phone:	
Email:			

Please indicate the precautions by local management below:

Fire brigade notified?	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Managers and/or supervisors in the impaired area notified?	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the impaired area monitored by a heat/smoke detection system?	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are additional fire extinguishers available in the impaired area?	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is hydrant/hose reel system operational in the impaired area?	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are additional security patrols or a fire watch in place?	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have hazardous operations such as hot work been discontinued?	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Additional Precautions or Comments:

Section B - to be completed by Chubb

Additional Recommended Actions:			
Submitted By:			
Date:		Phone:	

Section C - to be completed by the Insured once Fire Protection Systems are Restored

Date System Restored:			
Restoration Notified By:		Phone:	

Section D - Statutory Declaration

Personal Information Collection Statement

The Company ("We/Us") want to ensure that Our **Insured Persons** ("**You**") are confident that any personal data collected by **Us** is treated with the appropriate degree of confidentiality and privacy.

This Personal Information Collection Statement sets out the purposes for which **We** collect and use personally identifiable information provided by **You** ("**Personal Data**"), the circumstances when **Personal Data** may be disclosed and information regarding Your rights to request access to and correction of **Personal Data**.

(a) **Purposes of Collection of Personal Data**

We will collect and use **Personal Data** for the purposes of providing competitive insurance products and services to **You**, including considering Your application(s) for any new insurance policies and administering policies to be taken out with **Us**, arranging the cover and administering and managing Your and Our rights and obligations in relation to such cover. **We** also collect the **Personal Data** to be able to develop and identify products and services that may interest **You**, to conduct market or customer satisfaction research, and to develop, establish and administer alliances and other arrangements with other organisations in relation to the promotion, administration and use of Our respective products and services. **We** may also use your **Personal Data** in other ways with your consent.

(b) **Direct marketing**

Only with your consent, **We** may also use your contact, demographic, policy and payment details to contact **You** with marketing information regarding our insurance products by mail, email, phone or SMS.

(c) **Transfer of Personal Data**

Personal Data will be kept confidential and **We** will not sell Your **Personal Data** to any third party. **We** limit the disclosure of Your **Personal Data** but, subject to the provisions of any applicable law, Your **Personal Data** may be disclosed to:

- (i) third parties who assist **Us** to achieve the purposes set out in paragraphs a and b above. For example, **We** provide it to Our relevant staff and contractors, agents and others involved in the above purposes such as data processors, professional advisers, loss adjudicators and claims investigators, doctors and other medical service providers, emergency assistance providers, insurance reference bureaus or credit reference bureaus, government agencies, reinsurers and reinsurance brokers (which may include third parties located outside Hong Kong SAR);
- (ii) Our parent and affiliated companies, or any company within Chubb local and outside Hong Kong SAR;
- (iii) the insurance intermediary through which **You** accessed the system;
- (iv) provided to others for the purposes of public safety and law enforcement; and
- (v) other third parties with your consent.

With regard to the above transfers of **Personal Data**, where applicable, **You** consent to the transfer of Your **Personal Data** outside of Hong Kong.

(d) **Access and correction of Personal Data**

Under the **Personal Data** (Privacy) Ordinance ("PDPO"), **You** have the right to request access to and correction of **Personal Data** held by **Us** about **You** and **We** will grant **You** access to and correct Your **Personal Data** as requested by **You** unless there is an applicable exemption under the PDPO under which **We** may refuse to do so. **You** may also request **Us** to inform **You** of the type of **Personal Data** held by **Us** about **You**.

Requests for access or correction of **Personal Data** should be addressed in writing to:

Chubb Data Privacy Officer
39/F, One Taikoo Place,
Taikoo Place, 979 King's Road,
Quarry Bay, Hong Kong
O +852 3191 6222
F +852 2519 3233
E Privacy.HK@chubb.com

Your request to obtain access or correction will be considered within forty (40) days of Our receipt of Your request. **We** will not charge **You** for lodging a request for access to Your **Personal Data** and if **We** levy any charges for providing information, such charges will not be excessive. No fee is charged for data correction requests.

About Chubb in Hong Kong SAR

Chubb is the world's largest publicly traded property and casualty insurer. With both general and life insurance operations, Chubb has been present in Hong Kong SAR for more than 90 years via acquisitions by its predecessor companies. Its general insurance operation in Hong Kong SAR (Chubb Insurance Hong Kong Limited) is a niche and specialist general insurer. The company's product offerings include Property, Casualty, Marine, as well as Accident & Health programs for large corporates, midsized commercial and small business customers. Over the years, it has established strong client relationships by offering responsive service, developing innovative products and providing market leadership built on financial strength.

More information can be found at www.chubb.com/hk.

Contact Us

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