

AIA GENERAL INSURANCE (HONG KONG)

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FIRST NOTICE OF LOSS — PROPERTY CLAIM SUBMISSION FORM

Claim Number: **CLM-2026-448931**

Date of Submission: **16/09/2026**

IMPORTANT NOTICE: This form must be completed in full and submitted within 60 days of the date of loss. Failure to provide complete and accurate information may result in delay or denial of your claim. All statements made on this form are subject to verification. If you need assistance completing this form, contact our Claims Department at +852 2232 8888.

Section 1 — Claimant Information

Full Name of Claimant	Li Hoi Yan
Phone Number	+852 6234 8901
Email Address	hoiyan.li@email.hk
Policy Number	HO-63941003

Section 2 — Insured Property

Street Address	Flat 12A, Block 7, Mei Foo Sun Chuen, 33 Broadway
City	Lai Chi Kok
State	Kowloon
ZIP Code	

- ☐ This is the claimant's primary residence
- ☐ Claimant was present at the property at the time of the incident

Section 3 — Incident Details

Date of Incident	13/09/2026
Time of Incident	Approximately 11:00 AM
Type of Incident	Water Damage
Description of Incident	On 13/09/2026, a concealed galvanised water supply pipe inside the bathroom wall burst due to long-term corrosion, sending a jet of water into the bathroom and flooding out into the hallway and adjacent bedroom. The claimant shut off the main stopcock within thirty minutes, but by then water had seeped under the flooring and saturated the bedroom carpet and lower wall sections.

Emergency Response

Police Report Filed	No
Police Report Number	N/A
Emergency Services Called	No
Temporary Repairs Made	Yes
Temporary Repairs Description	Emergency water extraction performed; affected areas dried with industrial fans; temporary plastic sheeting applied to prevent further water ingress.

Section 4 — Damage Inventory (Currency: HKD)

#	Category	Location	Description	Estimated Cost	Repair / Replace
1	Structure - Bathroom	Main Bathroom	Wall tiles and plasterboard removed to access burst pipe, full wall rebuild required	HK\$28,000.00	Replace
2	Structure - Flooring	Hallway & Bedroom	Carpet and underlay soaked and mould risk, vinyl in hallway lifting, 18 sqm total	HK\$15,000.00	Replace
3	Structure - Walls	Bedroom	Lower wall plaster damp-damaged on two walls, paint bubbling and peeling	HK\$9,500.00	Repair
4	Personal Property - Furniture	Bedroom	Wooden bed frame base and bedside cabinet warped from water absorption	HK\$12,000.00	Replace
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Section 5 — Claim Totals

Total Structure Damage	HK\$52,500.00
Total Personal Property	HK\$12,000.00
Total Additional Living Expenses	HK\$0.00
TOTAL CLAIM AMOUNT	HK\$64,500.00

Section 6 — Declaration and Signature

I, the undersigned, hereby declare that the information provided in this claim submission form is true, complete, and accurate to the best of my knowledge. I understand that any false or misleading statement may result in the denial of this claim and may constitute an offence under the Insurance Ordinance (Cap. 41) of Hong Kong. I authorise AIA General Insurance (Hong Kong) and its appointed agents to investigate the circumstances of this claim, including but not limited to obtaining reports from the Hong Kong Police Force, medical providers, and other relevant third parties. I consent to the release of any information necessary for the processing of this claim in accordance with the Personal Data (Privacy) Ordinance (Cap. 486). I acknowledge that submitting a fraudulent insurance claim is a serious offence under the Theft Ordinance (Cap. 210) and the Crimes Ordinance (Cap. 200) of Hong Kong and may result in criminal prosecution, substantial fines, and imprisonment. I affirm that this claim is made in good faith and that all supporting documentation provided is genuine.



16/09/2026

Date

Li Hoi Yan

Signature of Claimant

AIA GENERAL INSURANCE (HONG KONG)
FNOL-HK-2025-01

FOR INTERNAL USE:

Adj. _____ Supv. _____ SIU _____