

Informed Consent Form 个人信息处理同意书

To: _____ (**name of the owner, operator, manager, “the owners”**)
致: _____ (船公司、管理公司名称, 以下简称“船东”)
Re: m.v. ___ — Vog. ___ Crew Injury Claim
事涉: _____ 轮— _____ 航次船员受伤索赔

1. Purpose and method of handling personal information

个人信息处理目的和处理方式

In order to deal with the compensation for possible injury to me in the subject voyage, I understand and agree to provide my personal information to the owners for handling, and understand and agree that for the need of handling this claim, my personal information would be provided to third parties.

为处理在题述航次中本人可能受伤的理赔事宜, 本人知悉并同意将个人信息提供给船东处理, 且知晓并同意船东为处理理赔案件之需要, 本人的个人信息将被提供给第三方。

2. Type of personal information and record retention period

处理的个人信息种类、保存期限

I understand and agree to provide my Seafarer’s Employment Agreement or manning agreement, ID card, passport, medical certificate, certificate of competency, certificate of proficiency, service record, and household register book to the owners. Further, depending on the circumstances of the injury, my next of kin shall provide their personal information, including their ID card, household register book and work capacity to the owners (**please keep or delete this sentence as appropriate**). The retention period of my personal information shall be the shortest necessary time for the owners to handle this claim, and I agree that the owners can keep it **for 3 years** after the completion of the claim (**please adjust according to the actual situation**).

本人知悉并同意将我的就业协议或配员协议、身份证、护照、海船船员健康证书、海船船员适任证书、海船船员培训合格证书、船员服务簿、户口簿提供给船东。此外, 根据受伤情况, 我的近亲属也同意将他们的个人信息提供给船东, 包括他们的身份证、户口本和劳动能力情况 (**本句请据实保留或删除**)。对于本人个人信息的保存期限为船东处理本索赔所必要的最短时间, 且本人同意船东可在索赔**完结后保存 3 年** (请根据实际情况调整)。

3. Handling of sensitive personal information

敏感个人信息的处理

I understand and agree to provide my sensitive personal information, such as medical diagnosis, hospital admission records, discharge note, medical bills, disability assessments, and labor capacity assessments to the owners for calculation of compensation amount and provide my personal bank account to the owners for receipt of compensation amount. I understand that the owners’ collection and processing of the aforementioned medical records, identification certificates and other sensitive personal information is for the specific purpose of calculating compensation amount for my injury, which is absolute necessary, and the owners will take strict measures to protect the aforementioned information. In addition, I confirm that the owners have fully informed me of the consequence of processing my sensitive personal information on my rights and interests and agree to bear such consequence.

本人知悉并同意将医疗机构诊断证明、入院记录、出院记录、医疗费单据、伤残等级鉴定和劳动能力鉴定等敏感个人信息提供给船东以供核算赔偿款项，并将我的个人银行账户提供给船东以供支付赔偿款项之用。本人知悉船东收集并处理前述医疗记录和鉴定证明等敏感个人信息是为了核算针对本人受伤的赔偿款项这一特定目的之用，该行为具有充分必要性，且船东将对前述个人信息采取严格保护措施。此外，本人确认船东已充分告知处理本人的敏感个人信息对本人权益的影响，且自愿承受该等影响。

4. Sharing personal information and sensitive personal information to third parties

将个人信息提供给第三方

In order to process the claim, I know and agree that the owners will provide my personal information and sensitive personal information listed in Articles 2 and 3 of this Form to third parties, including the owners' P&I Club, attorneys, correspondents and ship agents (Please add more if any), and the owners will require such third parties to keep my personal information strictly confidential. The owners have informed me of the contact details of the third parties as follows:

为处理题述索赔，本人知晓并同意船东将本同意书第 2 条和第 3 条所列本人的个人信息及敏感个人信息提供给第三方，包括船东的保赔协会、律师、通讯代理及船舶代理（如有请补充），且船东将要求该等第三方对本人的个人信息严格保密。船东已向本人告知第三方的联系方式如下：

- | | |
|-----------------|--------------------|
| a) Owners: | b) P&I Club: |
| Contact: | Contact: |
| c) Attorneys: | d) Correspondents: |
| Contact: | Contact: |
| e) Ship agents: | |
| Contact: | |

5. Cross-border transmission

跨境传输

I am fully aware that the owners, the P&I Club, their lawyers and the correspondents may be out of the territory of China, and my personal information listed in Article 2 of this Form may therefore be transmitted out of China. I have been fully informed of the names, contact details, processing purposes, processing methods, types of personal information to be disclosed to such overseas recipients, and my rights and procedures that I have against the overseas recipients, and hereby I authorize and agree separately such disclosure of my personal information to the overseas recipients.

我知悉由于船东、保赔协会及处理索赔的律师、通讯代理可能在中国境外，本同意书第 2 条和第 3 条中记载的本人的个人信息会被发送至中国境外。本人已被充分告知该等境外接收方的名称、联系方式、处理目的、处理方式、个人信息的种类以及本人向境外接收方所享有的权利和程序，并在此单独授权同意。

6. Knowledge of my rights and the procedure

我享有的权利及程序

With respect to the personal information and sensitive personal information provided by me, I clearly know that I enjoy the following rights:

本人清楚知晓就本人提供的个人信息和敏感个人信息，本人享有的权利如下：

- i) the right to know, the right to make decisions over the handling of my personal information, and the right to restrict or refuse the processing of personal information by others, unless otherwise provided by laws and administrative regulations;
对个人信息处理享有知情权、决定权, 有权限制或者拒绝他人对其个人信息进行处理, 除法律、行政法规另有规定外;
- ii) the right to Consult and copy personal information from personal information processors, unless otherwise provided by laws and administrative regulations;
向个人信息处理者查阅、复制其个人信息, 除法律、行政法规另有规定外;
- iii) request for correction of personal information, supplement and correct these incorrect or incomplete personal information;
请求个人信息处理者更正、补充本人不正确或不完整的个人信息;
- iv) the right to request personal information processors to delete my personal information;
有权请求个人信息处理者删除本人的个人信息;
- v) request personal information processors to explain their personal information processing rules;
要求个人信息处理者对本人的个人信息处理规则进行解释说明;
- vi) if the personal information processor refuses my request to exercise my rights, I have the right to file a lawsuit before the People's Court of China in accordance with the law.
如果个人信息处理者拒绝本人行使权利的请求的, 本人可以依法向中国的人民法院提起诉讼。

I clearly understand that the above rights can be exercised directly through the contact details of the owners and third parties listed in Article 5 of this Form.

本人清楚知晓上述权利可直接通过联系本同意书第 4 条所列船东及第三方的联系方式行使。

7. I understand that I am free to choose whether to provide personal information. The above confirmation is made voluntarily and clearly with the full knowledge of me. I promise to be responsible for the authenticity of the personal information provided and the above statement.
本人知悉本人可自由选择是否提供个人资料。以上确认是在个人充分知情的前提下自愿、明确作出。本人保证对提供的个人信息及以上陈述的真实性负责。

确认人: _____ (the injured crew)

My Signature: (printed name) (签名)

确认人: _____

(Spouse of the injured crew)

My Signature: (printed name) (签名)

确认人: _____

(Children of the injured crew)

My Signature: (printed name) (签名)

确认人: _____

(Father of the injured crew)

My Signature: (printed name) (签名)

确认人: _____

(Mother of the injured crew)

My Signature: (printed name) (签名)

确认人: _____

(Brothers or sisters of the injured crew)

My Signature: (printed name) (签名)

In this Date of _____