

僱員補償援助基金管理局
Employees Compensation Assistance Fund Board

香港北角馬寶道二十八號華匯中心十九樓
19/E, China United Centre, 28 Marble Road, North Point, Hong Kong.
電話 Tel: 2739 9377 傳真 Fax: 2739 9779

Joyce
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Ms. Joyce Wong,
Director of Practitioners Affairs,
The Law Society of Hong Kong,
3rd Floor, Wing On House,
71 Des Voeux Road Central,
Hong Kong.

Our Ref : ECAFB/BD/4/5434

17 October 2002

THE LAW SOCIETY OF H.K.

Dear Ms. Wong,

21 OCT 02 11: 05

Re : New Amendments to the Employees Compensation Assistance Ordinance ("Cap.365")

I write on behalf of the Employees Compensation Assistance Fund Board, which was established under the captioned Ordinance in 1991 to assist, inter alia, injured employees who were not covered by any employees' compensation insurance policy when a work-related accident happened.

Recently, new amendments have been made to the Ordinance which came into effect on 1st July 2002. One of the new amendments relates to notification of proceedings by Applicants to the Fund Board. Under the new Section 25B, with effect from 1st July 2002, a notice of proceedings in the prescribed form is required to be served by Applicants on the Fund Board not later than 30 days after filing of the writ or an application for Employees' Compensation in court ("the Notice"). I enclose with this letter a specimen of the abovementioned prescribed form for your reference.

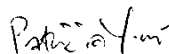
Also under the same Section 25B, an Applicant who has served the Notice on the Fund Board and who intends to enter into an agreement with the other party in respect of the settlement of the claim or obtain a judgment against the other party within 45 days after the date of service of the Notice on the Fund Board must serve a notice in writing on the Fund Board not less than 10 days before the date of such agreement or judgment.

Pursuant to Section 25B(6), an Applicant who fails to observe the above requirements shall not be entitled to any payment under the Ordinance.

I should be grateful if you could circulate this letter and the specimen prescribed form to your members for their kind attention.

If you have any question, please do not hesitate to contact the undersigned at 2116 5673.

Yours sincerely,



Patricia Yim
Secretary

Encl.

PY/tw

Employees Compensation Assistance Ordinance
Section 25B(1)(a)
Notice of Proceedings

Pursuant to Section 25B(1) of the Ordinance, a notice of proceedings is required to be served on the Employees Compensation Assistance Fund Board (and if applicable, also on the insurer concerned) not later than 30 days after the filing of the Writ or Application particularized under Part VIII of this notice.

Section 25B(1) provides –

“Where, after the commencement of this section, a person commences by writ proceedings in respect of a claim for compensation or damages, the person shall serve on the Board and, where applicable, the insurer concerned a notice of the proceedings –

- (a) in writing in a form specified by the Board, signed by the person and accompanied by a copy of the writ ;
- (b) by registered post; and
- (c) subject to subsection (2), not later than 30 days after the date on which the writ is filed with the Court.”

To: Employees Compensation Assistance Fund Board

Part I: Particulars of Applicant/Plaintiff

*** Delete if appropriate**

Name Chinese English	Age	ID Card No.
Mr/Mrs/Miss/Ms*		
Address	Tel No. Home: Office:	Date of Injury/Death*

Part II: Particulars of Employee (Not applicable if same as Part I)

Name Chinese English	Age	ID Card No.
Mr/Mrs/Miss/Ms*		
Address	Tel No. Home: Office:	Date of Injury/Death*

Part III: Particulars of Respondent(s)/Defendant(s)

Name Chinese English	Name of Person-in-charge	
Relationship With Employee:	Mr/Mrs/Miss/Ms*	
Address	Tel No. Fax No.	Business Registration Certificate No. / ID Card No.

Part IV: Particulars of Employer(s) and Principal Contractor(s)
(Not applicable if same as Part III)

Name Chinese English		Name of Person-in-charge	
Relationship with Employee:		Mr/Mrs/Miss/Ms*	
Address		Tel No. Fax No.	Business Registration Certificate No. / ID Card No.

Part V: Particulars of Insurer(s)

Name	Policy No.
Address	Period of Insurance
Notice to Insurer served? If yes, the date of service.	Yes / No*
Notice to Insurer enclosed	Yes / No*

Part VI: Particulars of Claims

Employees Compensation	E. C. Case No.	Amount of Claim Whether paid Yes / No*
Common Law Damages	High Court Personal Injuries Action No.	Amount of Claim (net of employee's compensation claim, if any):

Part VII: Particulars of Legal Representative of Applicant/Plaintiff & Respondent(s)/Defendant(s)(if applicable)

Legal Representative	For Applicant/Plaintiff:	For Respondent(s) /Defendant(s) (if known):
Address, Tel No. & Fax No. & Contact Person of Legal Representative		

Part VIII: Court Proceedings

Present Status of the Proceedings	
Date & Mode of Service of Application/Writ on Respondent/Defendant	
E.C. Application / Writ of Summons enclosed	Yes / No*

Signed by : _____ Date : _____
The Applicant / Plaintiff *

If you wish to receive an acknowledgement of this notice, please complete the address below.

..... ✂

Name: _____

Address: _____

Contact Person : _____

E C C / High Court P I No. : _____

Employees Compensation Assistance Fund

Board had received the Notice of Proceedings

on _____