



i-PASS DAMAGE / MALFUNCTION REPORT 智泊咭損壞 / 失效報告

i-Pass Type

智泊咭種類

 Permanent i-Pass 永久智泊咭 Single Entry i-Pass 單次智泊咭**i-Pass Number:**

智泊咭號碼: _____

Vehicle Plate Number:

車牌號碼: _____

REGISTERED INFORMATION

已登記資料

Company / Applicant Name in FULL*:

公司/申請人全名* : (須以正楷英文填寫) _____

BR / HKID Card Number*:

商業登記/香港身份証號碼* : _____

Contact Person Name in FULL

聯絡人全名 : (須以正楷英文填寫) _____

Contact Number

聯絡電話號碼 : _____

*Please delete the inappropriate item

*請刪除不適用部份

Remark:

備註

1. Unless the User's i-Pass is proved to be malfunction without any damage on the tag, any re-issuance of i-Pass for previously registered vehicle incurs administration fee of HK\$80 each which shall be borne by the User.

除已證實為失效智泊咭外，如已登記車輛須重新簽發智泊咭，使用者必須繳付行政費每張智泊咭為港幣八十元正。

2. In order to protect the i-Pass, please do not staple / stick the i-Pass on this report.

為避免損壞智泊咭，請不要將智泊咭釘/貼在本報告上

3. For i-Pass information amendment, please fill in "Change of Registered Information of i-Pass" form.

如智泊咭資料需要更新，請填寫"更改智泊咭資料"表格。

Authorized Signature and Company Chop

公司印章及授權人簽署

Remarks: Successful applicant will receive notification within 14 working days.

備注:申請者將在十四個工作天內獲通知。

Please return the completed form and i-Pass to Facility Management Office at:

請將填妥之表格及智泊咭交回設施管理處:

Address 地址: Facility Management Office, Terminal 2, Asia Airfreight Terminal Co Ltd, 10 Chun Ping Road, Hong Kong International Airport

香港大嶼山香港國際機場駿坪路10號亞洲空運中心設施管理處

Enquiry Hotline 查詢熱線: 29497300

(Monday to Friday 0900hrs – 1700hrs (except public holidays) 星期一至星期五 上午 9 時正至下午 5 時正 (公眾假期除外))

For AAT use only:

FMO	<input type="checkbox"/> i-Pass Received	Staff ID: _____	Date: _____
ITSI Department	i-Pass Condition Verification: <input type="checkbox"/> Damage <input type="checkbox"/> Malfunction	Staff ID: _____	Date: _____
FMO	Administration Fee Required: <input type="checkbox"/> No <input type="checkbox"/> Yes	Staff ID: _____	Date: _____
Customer Services Counter Section	Administration Fee Collected: <input type="checkbox"/> No <input type="checkbox"/> Yes	Staff ID: _____	Date: _____
FMO	i-Pass Re-issuance: <input type="checkbox"/> No <input type="checkbox"/> Yes, New i-Pass No.: _____	Staff ID: _____	Date: _____