

Content

Title :	Regulations for Underwriting and Claim Adjustment Procedures under Compulsory Automobile Liability Insurance <b>Ch</b>
Date :	2021.06.24
Legislative :	Articles 9, 18, and 19 amended and promulgated on 24 June 2021 by Financial Supervisory Commission Order No. Jin-Guan-Bao-Chan-Zi-1100452006B.
Content :	<p>Article 9</p> <p>After executing a contract for this insurance, an insurer shall issue a document containing the policy provisions and an insurance certificate to the proposer.</p> <p>Should there be any amendment to the contract, it shall be amended by endorsement or replacement (re-issuance) of the insurance certificate if necessary.</p> <p>The procedures for replacement (re-issuance) of the insurance certificate upon the title transfer of automobiles and motorcycles are as follows:</p> <p>1.The owner of an automobile may select one of the following procedures upon assignment:</p> <p>(1)The new owner may terminate the original insurance contract and establish a new 1 year insurance contract.</p> <p>(2)Upon the agreement between the new and original owner, the insurer shall directly replace (re-issue) a new insurance certificate to the new owner for vehicle registration.</p> <p>2.The owner of a motorcycle may select one of the following procedures upon the title transfer:</p> <p>(1)The new owner may terminate the original insurance contract and establish a new 1 year or 2 year insurance contract.</p> <p>(2)Upon the agreement between the new and original owner, the insurer shall directly replace (re-issue) a new insurance certificate to the new owner for vehicle modification registration.</p> <p>(3)The owner may follow the provisions on the title transfer notice for motorcycle of the compulsory automobile liability insurance implemented by the competent authority. The insurer shall re-issue the transfer endorsement or insurance certificate to the new owner after receiving relevant information.</p> <p>Article 18</p> <p>The review for disability benefits shall be conducted as follows:</p> <p>1.The determination of the fact, tier, and procedure of disability shall comply with the Payment Standards of Compulsory Automobile Liability Insurance stipulated by the competent authority in conjunction with the central competent authority for transportation and communications.</p> <p>2.If the disability level is in question at the time the claimant submits evidentiary documents claiming disability benefits, the insurer shall make provisional payment of the insurance proceeds based on a disability level already determined by the insurer.</p> <p>Article 19</p> <p>The insurer shall pay for insurance benefits in accordance with the followings:</p> <p>1.The insurer shall pay the benefits directly to the claimant subject to the written notice by the insured, injured party or claimant. Unless the amount of the benefits to be paid to each claimant is NT\$5,000 or less, in which case a claimant may ask the insurer to pay cash to the claimant himself, the benefits shall be paid by direct remittance to the bank account of the claimant, or with a non-assignable crossed check payable to the claimant. However, if the claimant provides relevant documents to prove that he is unable to open an account at a financial institution or that his</p>

account cannot be used, he may ask the insurer to pay with a crossed check payable to the claimant.

2.If the insured has already paid to the injured party partial damages which meet with items listed on the Payment Standard, the insurer is liable for payment of insurance benefits only within the balance of the insurance amount provided herein after deduction of the damages already paid, provided that the claimant and the insured have agreed that no such deduction may be made, such agreement shall govern.

3.The deducted amount in the preceding subparagraph shall be refunded to the insured within the limit of insurance amount as provided herein, provided that this provision shall not apply under the circumstances given in the proviso of the preceding subparagraph.

4.When an automobile traffic accident results in loss of life and the claimant, by presenting evidentiary documents, makes a claim for provisional payment in an amount equivalent to one-half of the insurance benefit, the insurer shall make the payment within 10 working days starting from the next day of presenting evidentiary documents.

5.When a provisional payment of insurance benefit paid by the insurer exceeds the amount of insurance benefits actually payable, the insurer may claim for return of the excess amount against the claimant.

6.If the claimant entitled to the personal injury medical expense benefits or disability benefits can not receive insurance benefit in life, the heirs may succeed the right as the claimant.

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Data Source : Financial Supervisory Commission Laws and Regulations Retrieving System