

# Labor Occupational Accident Insurance Missing Allowance Application Form and Receipt

Serial no.

Date of application    year    month    day (Please read carefully the instructions on the reverse)

Name of the insured person		Date of birth	Republic of China year Year    month    day	ID no. A business tax ID number		Date of missing	year    month    day
Name of Beneficiary		Date of birth	Republic of China year Year    month    day	ID no. A business tax ID		Relationship with the insured person : _____	
Name of legal representative	(A minor as a beneficiary must fill)	Date of birth	Republic of China year Year    month    day	ID no. A business tax ID number		If there are other beneficiaries jointly owning, please fill in the floating and sign or seal in this format.	

Post code :  Telephone: (    )  
 The correspondence address : \_\_\_\_\_ Mobile phone no.: \_\_\_\_\_

Insurance accidents	<b>Reasons and process of missing</b>		Date of survival declaration	
			Date of deceased declaration	year    month    day
			Place of missing	

Time Frame for Application    From year    month    day    to    year    month    day    \_\_\_years and \_\_\_months in total.

Amount of the benefits claimed    \_\_\_\_\_ (Please do not fill in this field if the claim amount is not available)

• • • • • Please attach here a copy of the front page of the applicant's passbook • • • • •

**Payment methods (Please select one)**

※  
 1. Please provide the complete name of the financial institution (not including post offices) and its branch(es), as well as the head office code and account number, from left to right. It is not necessary to add leading zeros for the purpose of padding.  
 2. If the post office code number and the account number of the passbook (including check number) is less than seven, please fill in zeros on the left.  
 3. A copy of the first page of the passbook with a financial institution or a post office should be attached, which shall be clearly legible. The account name shall be identical with the name of the insured registered with the BLI, so as to avoid any unsuccessful fund transfer.

1.  Remit the fund to the applicant's account with a financial institution:    Name of the financial institution    Bank    Branch

Bank/Institution code		Account No.	The account number of the financial institution

2.  Remit the fund to the applicant's with Chungwa Post: Post Office Code :  —  Account no  —

3.  Remit to the designated account of the Applicant:

The BLI is requested to mail the " Notice for the Opening of a Designated Account " to the Applicant, who will visit the appointed financial institution to open the account.  
 Please attach a photocopy of the front cover of the applicant's passbook for the designated account with the Land Bank of Taiwan or the Post Office for the benefit payment of labor insurance/occupational accident insurance/national pension/employment insurance/labor pension/farmer pension.  
 ※ If the Applicant, due to debt issues, has concerns over possible seizure, he/she may apply for a designated account exclusively for deposits of the insurance benefits. Deposits in the designated account shall not be the object of seizure or compulsory execution.

In accordance with the provisions of Paragraph 1, Article 55, of the Labor Occupational Accident Insurance and Protection Act, I apply for an insured's missing allowance. If there are other unnamed beneficiaries in the same order, I am willing to be responsible for them. All the above fields are filled in truthfully. If required in the review process, the BLI may retrieve relevant information from relevant agencies. If there is any surplus payment of the insurance benefit, the under signed also agrees that the BLI may deduct such surplus payment from the amount receivable thereby.

Personal seal or signature of the beneficiary \_\_\_\_\_ (Sign in person)      Personal seal or signature of legal representative : \_\_\_\_\_ (Sign in person)

Verification by insured units	We have checked the above information and confirm it is true and correct.  Labor insurance certificate number: _____ Name of the insured unit _____  Responsible person : _____ Person in-charge : _____  Telephone : (    ) _____  Address : _____	<div style="border: 1px dashed black; width: 100%; height: 100%; display: flex; align-items: center; justify-content: center;"> <span style="font-size: 1.2em;">(Units' stamp)</span> </div>
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※The service is free and convenient. It is not necessary to engage an agent. Please ensure all the information provided is true and correct. Any illegal behaviors such as fraud or counterfeiting shall be subject to legal actions. If you have any question, please feel free to contact the BLI at (02) 2396- 1266 Ext.2263. Address for mailing or delivery in person: 100232 Bureau of Labor Insurance, Ministry of Labor, No.4, Section1, Roosevelt Road, Zhongzheng District, Taipei City.

## Explanation regarding the claim for Labor Occupational Accident Insurance Missing Allowance

### I. Qualifications & Claim Standards

1. A missing allowance equivalent to 70% of the average monthly insurance salary of the past six months shall be payable at the end of every 3-month period commencing from the day an insured person is declared missing in the census registry until the day prior to (1) his/her return alive, (2) the expiration of one year after he/she was declared missing, or (3) he/she is declared dead by the law, whichever happens first.
2. Order of claiming missing allowance :
  - (1) Spouse and children. (2) Father, mother. (3) Grandfather, grandmother. (4) Grandchildren. (5) Brother(s) and Sister(s).The above-mentioned grandchildren, brother(s), and sister(s) are limited to dependents of the insured person.
3. The “Parents” and “Children” refer to natural parents, adoptive parents, legitimate children (including those deemed to be legitimate according to the Civil Code), as well as the children lawfully adopted and properly registered in the household registration for 6 months.
4. If the insured are missing and are declared dead by the court, beneficiaries may apply for deceased benefits in accordance with occupational injuries deceased regulations.

### II. Documentation Requirements

1. The payment is claimed at the end of the period every 3 months. When the beneficiary applies for the missing allowance, the following documents shall be presented:
  - (1). Application form for missing allowance and receipt of benefits payment. ( If there are two or more beneficiaries in the same order, they should jointly sign or affix their names; if there are other beneficiaries, that have not been named, the beneficiaries who have received them shall be responsible for sharing them. If the beneficiary is a minor the application form and payment receipt shall be signed or sealed by the legal representative. )
  - (2). The transcript of household registration of the whole family of the insured and the present transcript of household registration of beneficiaries with the date of disappearance listed (Please do not omit notes, 1 copy is required if the insured and the beneficiaries are registered in the same household).
  - (3) Disaster reports or other disaster certificates
  - (4). Certificates of accidents during performing duties
2. If the name, date of birth and the unified number of the national identity card of the insured are inconsistent with the records in the household registration transcript, insured units should fill in the "Application for updated information of Insured Persons" and send it to the Bureau of Labor Insurance, ministry of labor enclosed along with the preceding documents.
3. If the documents are issued by entities other than the government agencies of the Republic of China, they shall be notarized by the following agencies. If the supporting documents are issued in foreign languages, they shall be verified along with a Chinese translation. Alternatively, they shall be accredited by a domestic notary public. (An English-language diagnosis

statement containing recognizable proof does not require a Chinese translation).

(1) If the certificate is made abroad, it should be certified by a ROC embassy, representative offices, liaison office or any other organization authorized by the Ministry of Foreign Affairs (the diplomatic agencies); If the certificate is issued by foreign ambassador agencies in Taiwan or authorized institutions, it should be verified and certified by the Ministry of Foreign Affairs. If you have any questions, please feel free to contact the Bureau of Consular Affairs, Ministry of Foreign Affairs, TEL: 02-23432888 ) .

(2) If the certificate is completed in Mainland China, it should be certified by the institutes designated or set up by Executive Yuan or the delegated civilian groups. (Straits Exchange Foundation).

(3) If the certificate is completed and issued in Hong Kong or Macau, it should be certified by the institutes designated or set up by Executive Yuan or the delegated civilian groups in Hong Kong or Macau.(Taipei Economic and Cultural Office (HK) or (Macau)).

### III. Time Frame for Application

The right to claim for missing allowance shall be extinguished if such right is not exercised within five years from the date that the benefits can be claimed.

### IV. Notes

1. If a worker, due to debt issues and concerns over possible seizure, has difficulty in providing his/her regular account with a financial institution, he/she may, in accordance with Paragraph 2, Article 33 of the Labor Insurance Act, apply to the BLI for opening a designated account with a financial institution for depositing the insurance benefits. Deposits in the designated account shall not be the object of offset, seizure, mortgage or compulsory execution.
2. Foreign individuals without national ID number shall provide their passport or Alien Resident Certificate number.

