

Tung Wah Hospital 東華醫院 Medical Records Office | 醫療檔案部

LG/F, Centenary Building, Tung Wah Hospital, 12 Po Yan Street, Sheung Wan, Hong Kong 香港上環普仁街 12 號 東華醫院 百週年紀念大樓 地下低層 Tel 電話: +852 2589 8277 Fax 傳真: +852 2546 7963

Enquiry of Birth Time 出生時間查詢

Please read the information sheet before making the application, and submit the copies of the relevant supporting documents together with the application. 作出申請前,請參閱申請須知,並提交相關文件副本。

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Information of the Data Subject's Parents 資料當事人父母資料	
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TWH MRO (Ver. Dec 2024)

[□] Please tick the appropriate box 請在適當空格上加 ✔ 號

^{*} Delete whichever is inappropriate 請刪去不適用者

Information Sheet 申請須知

1. Applicant must be age 18 or above.

If the applicant is not the Data Subject, the applicant must have parental responsibility for the Data Subject who is under age 18;

OR the applicant has been duly authorised by the Data Subject to submit this form and to collect the reply;

OR the applicant has been appointed by courts in Hong Kong to manage the affairs of the Data Subject.

申請人必須年滿十八歲。

如資料當事人年齡未滿十八歲,申請人須為對資料當事人有父母責任之人士;或

申請人獲資料當事人授權提交此查詢,以及代其領取本院覆函;或

申請人獲香港特別行政區地方法院任命管理資料當事人的事務之人士。

- 2. The copy of the Data Subject's HKID card / Passport and birth certificate should be submitted with the application. 申請時需提交資料當事人的香港身份證 / 護照副本及出生證明書副本。
- 3. Application fee for enquiry of birth time is HKD230 per case. 每一個案申請費用為港幣\$ 230。
- 4. Normally, the processing time takes around 4 weeks. 申請處理時間一般需時約四星期。
- 5. If the applicant is not the Data Subject, the following copy of documents are also required:- applicant's HKID Card/Passport and Data Subject's birth certificate/Legal Custody Paper if the applicant claims parental responsibility over the Data Subject; **OR**

applicant's HKID Card/Passport and a court document issued by a court appointing the applicant to manage the affairs of the Data Subject who is incapable of managing his/her own affairs; **OR**

applicant's HKID Card/Passport and an original authorisation letter signed by the Data Subject must be submitted where the applicant claims to have been duly authorised by the Data Subject.

如申請人並非資料當事人, 遞交本申請書時需連同申請人的身份證/護照副本及資料當事人的出生證明書副本一同提交; 並:

遞交資料當事人簽署的授權書正本(若申請人聲稱已獲資料當事人授權);或

號交法定管養權證明書副本 (若申請人聲稱對資料當事人有父母責任);或

遞交法院簽發任命申請人管理資料當事人的事務的法院文件副本(若資料當事人無能力管理本身事務)。

6. Submission of Application

Application can be made in person or by post. For application by post, please send the duly completed application form, relevant supporting documents (if applicable), together with a crossed cheque of the application fee made payable to "Hospital Authority" to the following office:

遞交申請表:

申請人可於辦公時間內親臨本組辦事處或以郵遞方式申請。如以郵遞方式申請,請將填妥表格、有關文件副本(如適用)及申請費的劃線支票(支票抬頭請寫支付「醫院管理局」),寄回下列地址:

Address 地址:

Medical Records Office LG/F, Centenary Building, Tung Wah Hospital, 12 Po Yan Street, Sheung Wan, Hong Kong

香港上環普仁街 12 號 東華醫院 百週年紀念大樓 地下低層 醫療檔案部

Opening hours 辦公時間:

Monday - Friday 星期一至五: 上午 9:00 a.m. — 下午 1:00 p.m. and 及 下午 2:00 p.m. — 下午 5:30 p.m.

Saturday 星期六:上午 9:00 a.m. - 下午 1:00 p.m.

Sunday & Public Holidays 星期日及公眾假期:Closed 休息