

**FORM 2B**  
**EMPLOYEES' COMPENSATION ORDINANCE**  
**(CAP. 282)**

**SECTION 15(1A)(b)**

**NOTICE BY EMPLOYER OF AN ACCIDENT TO AN EMPLOYEE**  
**RESULTING IN INCAPACITY FOR A PERIOD**  
**NOT EXCEEDING 3 DAYS**

To the Commissioner for Labour

I declare that the information given in this form is, to the best of my knowledge, true and accurate.	
Name (in block letters) : _____	
Position : <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Partner <input type="checkbox"/> Manager <input type="checkbox"/> Officer	
Signature : _____	Date : _____
<input type="checkbox"/> (for and on behalf of the employer)	Chop of Company

**A. Particulars of employee**

Name of employee (Surname first)		Identity Card/Passport No.
Tel. No.	Address	

**B. Particulars of employer**

Name of employing company/person		Business Registration Certificate No.
Tel. No.	Address	Industry
Fax No.		

**C. Particulars of accident**

Date of accident _____/_____/_____ day / month / year	Address of the place of accident
Total number of days of temporary incapacity : _____ day(s)	

**D. Particulars of compensation**

Monthly earnings of the injured employee for the purpose of calculating compensation : \$ _____	
Amount of compensation : \$ _____	<input type="checkbox"/> paid <input type="checkbox"/> to be paid on ____/____/____ <div style="text-align: right;">day/month/year</div>

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**FORM 2B**

**Important Notes**

- (1) This form shall be completed and returned in DUPLICATE to the Commissioner for Labour within 14 days of the accident, irrespective of whether the accident gives rise to any liability to pay compensation, which results in incapacity to an employee for a period not exceeding 3 days.
- (2) If the period of incapacity in respect of the employee extends beyond 3 days after submitting this form, the employer shall report the accident again in the prescribed form (Form 2) under S. 15(1A)(a) of the Employees' Compensation Ordinance.
- (3) An employer who fails to give notice as required or who gives any false or misleading information to the Commissioner for Labour may be prosecuted.
- (4) Please '✓' in the appropriate box.
- (5) For the purpose of calculating compensation to the injured employee, the monthly earnings shall be taken as the earnings of the employee for the month immediately preceding the date of the accident, or the average monthly earnings for the previous 12 months of employment (or any lesser period if the employee has not been so long employed), whichever calculation is more favourable to the employee.

**Earnings include :**

- (a) cash wages;
- (b) the value of any privilege or benefit which can be estimated in cash, e.g. food, fuel or quarters supplied to the employee if, as a result of the accident, he is deprived of any of them;
- (c) overtime or other special remuneration for work done, whether in the form of bonus, allowance or otherwise, if it is of a constant nature; and
- (d) customary tips.

But remuneration for intermittent overtime, casual payments of a non-recurrent nature, the value of travelling allowances or concession and the employer's contributions to provident funds are not included.



**Employees' Compensation Division – Operations**  
**Labour Department**  
**Statement of Purpose of Collection of Personal Data**

**Important Notes to Employers**  
**on Compliance with Personal Data (Privacy) Ordinance (Cap. 486)**

By completing Form 2/2A/2B, you are providing personal data in respect of you and your employee to the Employees' Compensation Division, Labour Department. Please ensure that you have complied with the relevant requirements of Personal Data (Privacy) Ordinance (Cap. 486) when disclosing and transferring the personal data of your employee. For non-fatal cases, please also make sure that **you and your employee** have read the following Statement of Purpose of Collection of Personal Data before your submission of Form 2/2A/2B.

**Purpose of Collection**

1. Yours and the injured employee's personal data collected by the Employees' Compensation Division – Operations of the Labour Department (ECD) may be used for one or more of the following purposes –
  - (a) To process a claim for compensation under the Employees' Compensation Ordinance (the Ordinance), or an application for the Brewin Trust Fund or other assistance schemes.
  - (b) To conduct employees' compensation assessments under the Ordinance.
  - (c) To enforce relevant provisions of the Ordinance and other legislations administered by the Labour Department.
  - (d) To investigate accidents.
  - (e) To make case referrals and take follow-up actions for the Pilot Rehabilitation Programme for Employees Injured at Work.
  - (f) To compile statistics and conduct research.
  - (g) Any other purposes as may be required or permitted by law.
2. Except where required by the Ordinance, the provision of personal data is voluntary. However, the Labour Department may not be able to process the case or carry out the activities mentioned in paragraph 1 if the personal data concerned is not provided.

**Classes of Transferees of Personal Data**

3. For the purpose of carrying out the work mentioned in paragraph 1, ECD may transfer your personal data to the following parties, as well as collecting the personal data from them –
  - (a) Parties relevant to the employees' compensation claim including injured employee, family member(s) of the deceased employee, employer, principal contractor, sub-contractor, holding company, insurer or agents authorised by the aforementioned parties to handle the compensation claim.
  - (b) Employees' Compensation Assessment Board.
  - (c) The Judiciary / Legal Aid Department / lawyers appointed by you.
  - (d) Hospital Authority / relevant hospital(s), clinic(s) and medical practitioner(s).
  - (e) Employees Compensation Assistance Fund Board.
  - (f) Brewin Trust Fund Committee / government department(s) or organisation(s) administering other assistance schemes.
  - (g) The contractor and service providers engaged to implement the Pilot Rehabilitation Programme for Employees Injured at Work.
  - (h) Relevant divisions under the Labour Department.
  - (i) Government bureaux and department(s) and other relevant organisation(s).
  - (j) Consultant(s) engaged to compile statistics or conduct research.

**Access to Personal Data**

4. You have the right to request access to and correction of the personal data as provided under sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. The right of access includes the right to obtain a copy of the personal data subject to payment of a fee.

**Enquiries**

5. Any enquiries concerning the personal data provided to ECD, including making data access and correction request, should be addressed to the case officer who handles your employees' compensation claim.
6. For any request for access to personal data, please complete the latest Data Access Request Form as specified by the Privacy Commissioner for Personal Data.

## Submission of Form 2 / 2A / 2B

Completed Form 2 / 2A / 2B should be submitted **in duplicate** to the following office of the Employees' Compensation Division of the Labour Department:

	<b>Address of the Employees' Compensation Division's Office</b>
<b>Work Injury Cases</b>	<b>Employees' Compensation Division Operations – Central Processing Team</b>  Room 1007, 10/F, Cheung Sha Wan Government Offices, 303 Cheung Sha Wan Road, Kowloon
<b>Fatal Cases</b>	<b>Fatal Cases Office</b>  Room 601, 6/F, Harbour Building, 38 Pier Road, Central, Hong Kong

- For any enquiries on submission of the forms, please call 2717 1771 (the hotline is handled by “1823”).
- The Employees' Compensation Division will normally inform you/your company of the case reference number as well as the handling office of your case within 1 month after the receipt of the completed forms. If no such information is received by then, please call 2150 6364 (for work injury cases) or 2852 3994 (for fatal cases) for enquiry.
- For the addresses of all offices of the Employees' Compensation Division, please visit the Labour Department's website (<https://www.labour.gov.hk/eng/tele/ec.htm>) or call 2717 1771 for details.