Jebsen Insurance Brokers Ltd.
捷成保險顧問有限公司

General Public Liability Insurance – Information requested for quotation

(公共責任保險 報價所需要的資料)

Insured Name (投保人名稱): _____

HKID Card/Passport/B.R. No. (香港身份證/護照/商業登記證號碼): _____

Business of Insured (if applicable) (投保人業務，如適用): _____

Address of Insured (投保人地址): _____

Insured Period (投保期間): _____

Insured Location (投保地址): _____

Occupied as (物業用途): _____

Year of Built (建築年份): _____

Limit of Liability (賠償責任限額): HK$ _____

Existing Insurance Company (現有保險公司名稱): _____

Claim History for past 3 years (過往三年賠償紀錄): _____

Other Requirements (其他要求): _____

Contact Person (聯絡人): _____ Position (職位): _____

Mobile (手提電話): _____ Email (電郵): _____