

雋澤保險服務有限公司

One Harvest Assurance Services Co. Ltd. Room 02, 17/F., Island Centre,

470 Reclamation Street, Mongkok, Kowloon Tel: 2155 9935 Fax: 2155 9934, 3747 8107 Email: oneharvestgi@gmail.com

Tel / Fax : REQUEST FOR QUOTATION (工程保險報價表 Class of Insurance (投保類別) CONTRACTORS' ALL RISKS INSURANCE (三 EMPLOYEES' COMPENSATION (僱員保險) PUBLIC LIABILITY (第三者責任保險) 1. Principal / Employer * 2. Contractor * 3. Postal Address 4. Period of Insurance i) Construction Period* ii) Maintenance Period	
Tel / Fax : REQUEST FOR QUOTATION (工程保險報價表 Class of Insurance (投保類別)	
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12 Limit of Indemnity * for PL () HKD \$ 5M () HKD 10M (For Public Liability)	
(For Public Liability)	
13 Employees Compensation * () Yes () No	
2 Improject compensation () 100	
14 Remarks () 有棚 /() 無棚 /() 有工作台	
15 Extorior engineering Yes(%) / No	
16 Building department provide Yes (pls see attached file) / No	
REMARK:補充資料	