**Catering Insurance – Information requested for quotation**

**(食肆 保險報價所需要的資料)**

Catering Nature (食肆類型)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Name (公司名稱)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location (營業地點)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Start Year (開業年份)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location Size (店舖面積)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(please provide the photos of restaurant area,*

*kitchen and other location for reference (請提供店面、廚房及其他位置相片作參考))*

Business Operation time (營業時間)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to (至) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Tables (餐桌數量)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Seats (座位數量)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has Delivery Service (有否外賣送遞服務)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Decorations and Equipment amount (裝修及設備等保額)：HK$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Food and Stocks amount (食材及貨物等保額)：HK$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Staff (員工)

|  |  |  |
| --- | --- | --- |
| Number人數 | Job Nature工作性質 | Annual Salaries年薪(HK$) |
| 　 | 　 | 　 |
| 　 | 　 | 　 |
| 　 | 　 | 　 |
| 　 | 　 | 　 |

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

Other Requirements <if any> (其他要求<如有>)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contract Person (聯絡人)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position (職位)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile (手提電話)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email (電郵)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Internal Remarks (內部備註)

Intro：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Code：\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_