



香港中華廠商聯合會
保險代理有限公司
CMA Insurance Agent Limited

FAX: 23904508

TEL: 23909811

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Request Quotation on Fire Insurance			
Company Name/Insured:			
Insured Address*:			
Age of Building:		Business Nature:	
(Mortgage): <input type="checkbox"/> No			
<input type="checkbox"/> Yes (Bank/financial institution _____)			
Sum Insured:	Stock: \$	Fittings & Equipment : \$	On the Building: \$
Contact Person:		Tel:	
E-mail:		Fax:	
Past Claim Records: <input type="checkbox"/> No <input type="checkbox"/> Yes(Please specify)			

*Please at least provide the building name

Underwriter/Insurer: China Ping An Insurance (Hong Kong) Co. Ltd