

Request for quotation for commercial insurance

Data on the policyholder

First a question on our own behalf: How you hear about us?

via Google search
 through friends
 about radio advertising
 via newspaper advertisement in
 Otherwise

Company:

Name
 C.I.F. No.
 Contact person

Information about the company

Exact description of the operating mode / activity:

Address of the business to be insured:

ZIP CODE
 Location
 Street / No.
 Telephone
 Fax
 Email

Further information on the property:

Year of construction of
 the building Square
 meters Floor
 Property rented or owned

Public liability:

Do you wish to have public liability insurance? Yes No
 If yes, annual turnover € Number of employees:

Object security

Is there a burglar alarm system? No Yes, with connection to Security service Police
 Is a safe / safe deposit box available? No Yes, weight kg, safety class

Other security devices (e.g. bars, wooden shutters, lockable windows, etc.)

Is there a property management service (e.g. security service, janitor service, neighbors)? No Yes

If so, how often and by whom?

Safety glass? No Yes

2nd page Request for quotation for commercial insurance - Customer:

Building insurance

Do you require buildings insurance? Yes No

If yes, replacement value of the building €

Contents insurance

Sums insured:

Business contents (business equipment) €

Goods and inventories €

Machines €

Electrical appliances €

Glass €

Should cash be insured? Yes No

If yes, cash in the safe €

Cash outside safe €

Do you require transportation insurance? Yes No

Do you require accident insurance for employees? Yes No

Do you business interruption insurance? Yes No

I would like further information on:

- Health insurance for residents and non-residents
- Term life insurance to secure your mortgage at prices far below the usual bank rates
- Mortgages / financing
- Pension insurance
- Single premium immediate annuity
- Fund investments
- Optimized inheritance tax
- Car insurance
- Commercial insurance
- Other investments

I agree the privacy policy of Iberia Versicherungsmakler, SL, for more information www.iberiaversicherungsmakler.com/datenschutz

Date, place

Signature of interested party

Please return to:

IBERIA INSURANCE BROKER

info@iberiaversicherungsmakler.com

or by post:

Gran Via Puig de Castellet 1, Local 2

E 07180 Santa Ponsa - Mallorca, España

Tel.: 0034 971 69 90 96 - Fax: 0034 971 69 90 97

We would also be happy to advise you personally!

Special remarks: