附件2

XXXX公司具代表性的主承保工程质量潜在缺陷保险案例统计表

填报单位：（盖章） 年 月 日

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| 序号 | 保险实施城市 | 工程项目名称 | 投保人 | 被保险人 | 签单日期 | 是否主承保公司 | 承保份额 | TIS机构名称 | 保单号 | 是否发生理赔 | 备注 |
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备注：请提供至少一种保单验真方式，如保险公司统一客服电话、官网保单验真网址等。