|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 企业名称 | |  | | | | | | |
| 组织代码 | |  | | | | | | |
| 地址 | |  | | | | | | |
| 法人代表 | |  | | | | 联系电话 | |  |
| 处理投诉内设机构名称及电话 | | | | | |  | | |
| 负责人 | | |  | | | 联系电话 |  | |
| 受理投诉电话 | | | |  | | | | |
| 设立先行赔付基金 | | | | | 有 无 | | | |
| 制定先行赔付制度 | | | | | （制度内容附后）有、无 | | | |
| 省酒店  与餐饮  行业协  会意见 |  | | | | | | | |

**海南省酒店与餐饮行业服务企业**

**落实赔偿先制度情况登记表**

登记时间：