

MARINE CARGO PROPOSAL FORM – IMPORT/EXPORT

1) Name of Proposer _____

2) Address _____

3) Nature of Business _____

4) Contact Person _____ Telephone No. _____ Fax No. _____

5) Cell No. _____ Email. _____

6) NTN _____ STN _____ CNIC(if individual) _____

7) Type / Nature of Cargo to be imported/exported _____

8) Nature of Packing: Conventional Containerized

9) Mode of Conveyance: By Sea By Air By Land

10) Voyage: From _____ To _____

11) Maximum Limit: Aircraft/ship/Conveyance _____ Annual Turnover _____

12) COVERAGE:-

a. Institute Cargo Clause A B C

b. Institute War Clause

c. Institute Strike Clause

13) Have you previously been covering your cargo? yes no

If yes, (a) State the name of operator _____

(b) Reasons for leaving the previous insurers?

Policy Cancelled Renewal Refused Claim Declined

14) Please provide details of losses, if suffered during the last 3 years:

Year of loss	No of accidents	Nature of accidents	Amount of loss (Rs.)

DECLARATION

I / We hereby declare that the statements, answers provided by me/us in this proposal form are true to the best of my /our knowledge. I also declare that I have withheld no information material to the insurance.

Date

Signature of the Proposer