

PROPOSAL FORM FOR MARINE CARGO INSURANCE

This proposal form is for quotation purposes only. Cover will be confirmed in writing.

Proposer Name :
(please provide complete Proposer name and additional named proposer- if any. The name will be used as the name of Insured after contract is concluded)

Proposer Address :
(please provide insured address)

Proposer Business :
(please provide detail of the business of the insured)

Period of Insurance : From Until

Interest Insured / Type of Cargo :
(please provide detail of the cargo)

Cargo Packing :
(please provide information about the packing of the cargo)

Method of Shipments :

- Containerized
- Non Containerized
 - Bulk
 - Break Bulk
 - Others, please details.....

Conveyances :

Sea Conveyances:
 Steel Vessel Tug & Barge LCT/LST
 Wooden Vessel
 Other, please detail.....

Land Conveyances:
 Open Truck Trailer Truck Box Train
 Other, please detail.....

Air Conveyances:
 Aircraft
 Other, please detail.....

Voyage :

Type of Shipment:
 Export Import Domestic

Type of Voyage:
 By Air By Land By Sea

Insurance coverage needed for delivery:
 Warehouse to warehouse
 Port to Port

Please provide information about the detail of voyage:
(From To)

**Estimated Turn Over /
Estimated Total Value of Cargo
Shipments in One Year** :

**Limit of Liability /
Maximum value of cargo per
shipment per conveyance** :

Conditions of Coverage :

- All Risk – ICC “A”
- Named Perils – ICC “B” / “C”
- Others.....

Loss record for the last 5 years :
(Please detail all loss record of your company for the last 5 years whether the loss is insured or not, this information shall include the amount and the cause of loss).

Year	Loss Amount	Cause

Remarks:

To the best of my knowledge and belief, the information provided in connection with this proposal is true. I understand that non-disclosure or misrepresentation of a material will entitle Underwriters to void this insurance.

I understand that the signing of this proposal does not bind me to complete the insurance but agree that, should a contract of insurance be concluded, this proposal and statements made therein shall form the basis of the contract.

Date:

Proposer Authorized Signature

FORMULIR ASURANSI UNTUK CARGO LAUT

Bentuk proposal untuk tujuan kutipan saja. Penutupan akan dikonfirmasi secara tertulis.

NAMA PENGUSUL

Harap memberikan nama lengkap Pengajuan nama pengusul dan tambahan jika ada nama. Ini akan digunakan sebagai Nama Tertanggung setelah kontrak

:

ALAMAT PENGUSUL

Harap memberikan alamat tertanggung

:

PENGUSUL BISNIS

Silakan berikan detail bisnis tertanggung

:

PERIODE ASURANSI

: Dari..... sampai.....

BARANG YANG DIASURANSIKAN

Silakan berikan secara terperinci

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