

PROPOSAL FORM – MARINE CARGO INSURANCE

To: Risk Management Insurance Brokerage Ltd.
 Attn: _____

Tel: 2529-7866 Fax: 2527-7511
 Date : _____

Company: _____
 Contact: _____

Tel: _____
 Fax: _____

Dear Sir / Madam,
 I/We hereby authorize you to arrange the marine insurance coverage for the following shipment:

Assured
 投保人: _____

Held to the order of
 受權於(銀行名稱): _____

Amount Insured (Please indicate currency)
 投保金額(註明貨幣): _____

- Invoice value + 10% = _____
- FOB + 10% = _____
- CIF + 10% = _____
- Other _____

Please fill in this form in English block letters and tick in the box where appropriate

Transportation				Departure date dd mm yyyy		
From		To		Via		
<input type="checkbox"/> By Sea	Vessel name			Bill of lading no.		
<input type="checkbox"/> By Air	Flight no.			MAWB no. HAWB no.		
<input type="checkbox"/> By Land	Type of vehicle	<input type="checkbox"/> Lorry	<input type="checkbox"/> Van	<input type="checkbox"/> Container tractor	Vehicle no.	
		<input type="checkbox"/> Enclosed metal truck	<input type="checkbox"/> Train		Wagon no.	
<input type="checkbox"/> By Post	Type of post	<input type="checkbox"/> Surface parcel	<input type="checkbox"/> Speed parcel	<input type="checkbox"/> Courier	Postal receipt no.	
		<input type="checkbox"/> Air parcel	<input type="checkbox"/> Insured parcel			
If goods are shipped in container, please indicate				<input type="checkbox"/> LCL	<input type="checkbox"/> FCL	
Description of Goods, Kind of Package				Marks & Numbers		
Please use and attach a separate piece of paper if there is insufficient space below						
Insurance Cover						
<input type="checkbox"/> Institute Cargo Clauses (A)	<input type="checkbox"/> Institute War Clauses (Cargo)	<input type="checkbox"/> Institute War Clauses (Air Cargo) (excluding sendings by Post)				
<input type="checkbox"/> Institute Cargo Clauses (B)	<input type="checkbox"/> Institute Strikes Clauses (Cargo)	<input type="checkbox"/> Institute Strikes Clauses (Air Cargo)				
<input type="checkbox"/> Institute Cargo Clauses (C)	<input type="checkbox"/> Institute Cargo Clauses (Air) (excluding sendings by Post)	<input type="checkbox"/> Institute Theft, Pilferage & Non-delivery Clause				
<input type="checkbox"/> Institute Replacement Clause						
Other Remarks						
Proposer's Signature with Company Chop if applicable _____				Date _____ (dd/mm/yyyy)		

- This application form is not binding unless replaced by a formal insurance certificate. The application form would then become part of the insurance policy and the coverage is subject to applicable insurance clauses.
- The Assured has to submit document proving the insurable interests / title of claim in case of claim.