



MARINE INSURANCE DECLARATION

(Please fill in CAPITALS only)

Declaration No. _____

Please issue a Marine Insurance Certificate Policy in duplicate/triplicate/quadruplicate, in accordance with the following particulars:

Policy No.

Date

Insured _____

Voyage From _____

Voyage To _____

Port of Loading _____

Port of Discharge _____

Vessel/Flight No. _____

BL/AWB/GR/RR/LR No. _____ Date

Expected Date of Shipment

Expected Date of Arrival

INSURED VALUE

Foreign Currency _____ Indian Rupees (Rs.) _____ Exchange Rate _____

Marks & Nos./Container No.	No. & Kind of Packages/	Description of Goods	Invoice Value	Sum Insured

TERMS OF INSURANCE

Special Instructions, if any _____

DECLARATION

- a) We hereby declare that the Insurance Charges on the above shipment will be borne by us and that we are not making the payment on behalf of anyone outside India; OR
- b) Although we are defraying the Insurance Charges on the above shipment which should be borne by the overseas buyer of the goods, we undertake to recover the payment so made from the buyer in the approved manner.

Date

Signature of Client