



**PROPOSAL FOR MARINE CARGO INSURANCE
(OPEN POLICY/OPEN COVER)**

Name of the Agent/ Broker				Code	
(a) Client Data:					
1	Name of the Proposer				
2	Address				
3	Phone Nos./ Fax	Fax	Ph:		
4	e-mail				
5	Key Person (Insurance)				
	Phone Nos./ Fax	Fax	Ph:		
6	Description of the Trade/Business				
7	Years in Trade				
8	Annual Turnover (Last 3 Years) Rs.	Yr	Yr	Yr	
	(as shown in the annual report)	Amt.	Amt.	Amt.	
(b) Policy Data:					
(Please answer all questions)					
1	Type of Policy required	One Voyage/transit	Open Policy (Annual)	Others (specify)	
2	Is the policy being taken for the first time?		If "NO" please give details as below		
	a) Present Insurer		Date of commencement of policy		
	b) Premium Paid and Claims Received & Outstanding for the last 3 years:				
	Year	Premium (Rs.)	Claims Paid (Rs.)	Outstanding Claims(Rs.)	Claims Ratio
3	If the Claim experience of any year is adverse due to a major/unusual loss, please give brief details of the claim including claim amount received :				



The intention of this Form is to meet your entire Marine Insurance requirement under one Policy document. Kindly therefore, complete the Form carefully								
(c)	Cargo Data:							
1	Merchandise/Goods to be Insured	Input (Imports)						
	<i>Input : Raw Materials, CKD, SKD, etc.</i>	Output (Exports)						
	<i>Output : Finished Products, etc</i>	Domestic Input						
		Domestic Output						
2	Packing of Cargo	Input (Imports)						
	E.g.. Cases, crated, manufacture's export cartons, bulk, bagged, and then palletised and wrapped	Output (Exports)						
		Domestic Input						
		Domestic Output						
3a	Will the cargo be containerised ?			If "YES", is it				
3b	If FCL, will cargo be destuffed at final destination warehouse ?	If "No", where will destuffing take place ?						
4	Estimated Annual volume to be insured (Rs. In Lacs)	(4a) Exports(Rs.)		(4b) Imports (Rs.)		Input Domestic (Rs.)	Output Domestic (Rs.)	
4a	Principal countries to which goods are exported	Country	US/Canada	U.K. & Continental Europe(E C)	Middle / South East	Far East/ Australia/ Newzealand	Others	Total
		CIF % of Total						0
	(Mention only PERCENTAGE)	Value Rs.Lacs	0	0	0	0	0	0
		FOB /C&F % of total						0
		Value Rs.Lacs	0	0	0	0	0	0
4b	Final Destination Towns in India for Imports	Locations						Total
		% of Total						0
	(Mention only PERCENTAGE)	Value Rs.Lacs	0.00	0.00	0.00	0.00	0.00	0.00



5	Conveyance:		Air	Sea	Postal	Courier	Other Conveyance(Please specify)		
	Please tick	Export							
		Import							
			Air	Road	Rail	Inland Water	Coastal Water	Postal	Courier
	Domestic								
5a	What percentage of total shipments will be by AIR TRANSIT :					Exports	%	Imports	%
5b	Will the Courier shipments exceed 10% of the Total Shipments?								
5c	Do the Couriers have any insurance policy covering their liability as carriers ?								
6	Will there be any transshipment? If "Yes" please give details.					Transshipment at :			
7	Geographical Limits for Policy			From			To		
		Import	Exports						
		Export	Imports						
		Domestic Input							
	Domestic Output								
8	Basis of Valuation for Policy		Import	FOB+ %	C&F+ %		Domestic Input	Purchase Invoice+ %	
	(The Percentage to be shown should not include %age towards Increased Value or Customs Duty)		Export	FOB+ %	C&F+ %	CIF+ %	Domestic Output	Sale Invoice+ %	
9	Limits of Insurance required for the Policy (Rs)				By any one Vessel under deck			By Registered or P.O Insured Parcel	
					By any one vessel on Deck			By Unregistered or Ordinary Parcel Post	
					By any one aircraft			By Courier	
					By any one Truck/Rake			By any other mode	
				By any one Barge(Inland vessel)			By any other mode		
10	Limit for any one Location (Accumulation)		Rs.						



11	Terms of Cover required							
	"Basic"(Named Perils), "All risk", "SRCC", "War" etc.							
12	Do you require cover for Custom Duty ?							
	(Please note that this is not an "agreed value" cover)			If "YES" please state				(Rs.)
				a) Maximum amount per shipment				
				b) Annual Amount				
13	Do you require "Increased value " for imports ?							
	(Please note that this is not an "agreed value" cover)			If "YES" please state				(Rs.)
				a) Maximum amount per shipment				
				b) Annual Amount				
14	Do you require storage cover at intermediate inland locations, originating ports(exports), arrival ports (import) etc.?			If "YES" please state		For more than one locations , attach separate sheet		
				a) Location(City /Town/Port)				
				c) Number of days /weeks				
				b) Amount per Location			Rs.	
15	Reasons for storage ? e.g. consolidation,processing, packing, blending etc.			d) Are the godowns owned/hired by you?				
				If the Godowns are not owned/ hired by you, they belong to whom?				
16	Have you entered into a special contract with any Carrier restricting their liability ?							
	If "YES" Please give details.							
17	Would you like to opt for a " Voluntary Excess" ?							
	If "yes" , please mention the amount .						Rs.	
18	Any other information you would like to provide							



I/We the undersigned hereby declare that the above statements and particulars are true and complete and I/We declare and agree that this declaration and the answers given above shall be held to be promissory and shall be the basis of the contract between me/us and the Company.

Proposer's Signature

Place _____

Date _____

Place							Signature of the Applicant		

SECTION 41
PROHIBITION OF REBATES

1. No person shall allow or offer to allow, either directly or indirectly as an inducement to any person to take out or renew or continue an Insurance in respect of any kind of risk relating to lives or property in India any rebate of the whole of the commission payable or any rebate of the premium shown in the policy nor shall any person taking out or renewing or continuing a policy accept any rebate except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
2. Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to Rs 500/- (Rupees Five Hundred)

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