



MARINE CARGO QUESTIONNAIRE/PROPOSAL FORM

1. Name of Proposer	
2. Address of Proposer	
3. Exact Description of Goods	
4. Type of Packing (e.g. wooden or cardboard cases, bags, bales, drums, containers, bulk)	
5. Means of Conveyance (including information of vessel's/carrier's/freight forwarders name and whether shipment is on deck, under dock and any trans-shipments)	
6. Supervision of Loading and Unloading If yes, by whom?	Yes <input type="checkbox"/> No <input type="checkbox"/> _____ _____
7. Voyage Insured / Policy Period (including storage extension, if applicable)	
8. Amount(s) to be Insured:	
Total Sum Insured	<input type="text"/> SR
(For open cover please provide Estimated Annual Turnover	<input type="text"/> SR
(Limit per bottom, conveyance or storage are)	<input type="text"/> SR
9. Statistics / Past Record (if any)	
10. Terms and Conditions of Coverage:	
• Standard Conditions (A, B, or C)	
• Extensions (e.g. War, Strike, Special Conditions)	
11. Basis of Valuation	<input type="checkbox"/> C&F (Cost & Freight) <input type="checkbox"/> CIF (Cost, Insurance & Freight) <input type="checkbox"/> FOB (Free on Board) <input type="checkbox"/> Ex-Works / Factory (Cost of Goods at Factory / Supplier's / Seller's Premises)
12. Letter of credit including Bank / Date Number etc.	



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13. Special features and/or requirements, if any	
14. Loss experience for previous 3 years	
<p>I/we hereby declare that the statement made by me/us in this questionnaire / proposal form are, to the best of my knowledge and belief, complete and true.</p> <p>I/We hereby agree that this questionnaire / proposal form is the basis and a part of any policy issued in connection with the above risk.</p> <p>Signed by the proposer at _____ This Day _____ of _____ / ____ /20</p> <p>Signature of the Proposer: _____</p>	