

Proposal Form - Marine Cargo Insurance

GUIDELINES TO FILL THE FORM (Information given herein will be treated in strict confidence)

1. Please fill the form in BLOCK LETTERS.
2. Please answer the questions fully and correctly. All details marked with * are mandatory.
3. If a particular question is not applicable to you and/or your business please mark that questions as not applicable "N/A". For a question with multiple choice answers, please tick the box in front of the correct answer. If there is insufficient space please provide further details on additional sheets.
4. Kindly contact the Company's Office or Agent for any doubts or clarifications on the proposal form.

Note: The liability of the Company does not commence until this proposal has been accepted by the Company and premium received.

FOR OFFICE USE ONLY

Branch Code :
 Intermediary Code :
 Intermediary Location Code :
 Intermediary Employee Code :
 Intermediary Reference Code :
 Sales Manager Code :

PROPOSER INFORMATION

Name of Proposer: F I R S T M I D D L E L A S T

Correspondence Address:

Block/Flat No.*: Floor No.: Building Name*:

Street Name*: Locality:

Landmark*:

City/Village*: Pincode*:

Post Office: PAN No.:

Mobile No.*: Landline*: S T D

Email ID 1*:

Email ID 2:

Details of Goods produced / traded / activities conducted:

Annual Turnover of Business: ₹

Details of goods proposed for insurance:

Whether hazardous/explosive:

Refrigerated or alike:

Whether Project Cargo:

Others:

Whether New or Old or Both:

Details of packing (Primary & Secondary Wherever applicable):

Whether Containerized* : Yes No If Yes, FCL LCL

In case of FCL place / stuffed by whom:

Mode of Transit*: Rail Road Air Courier Registered Post Parcel Others

Nature of Voyage*: Export Import Inland

Details of Voyage: Export:

Import:

Inland:

Vessel Details

• Name: _____
 • International Maritime Organisation No.: _____ • Age: _____ • Class: _____
 • Flag: _____ • Gross Registered Tonnage: _____

Sum Insured (INR / Foreign Currency wherever Applicable)*: _____

Limit per bottom: Rail ₹ _____ Road ₹ _____ Air ₹ _____

Sea ₹ _____ Others ₹ _____ Please Specify

Limit Per Location: ₹ _____

Period Of Insurance*: |D| |D| |M| |M| |Y| |Y| |Y| |Y| To: |D| |D| |M| |M| |Y| |Y| |Y| |Y|

Expected date of transit (In case of specific voyages): |D| |D| |M| |M| |Y| |Y| |Y| |Y|

Total estimated transits in a Year (In case of Open policy): _____

Basis of valuation: Ex-works ₹ _____ CIF ₹ _____ C&F ₹ _____

FOB ₹ _____ Others (Please Specify)

Insurance coverage required:.....

In case of Import/Export - Whether you seek revised or old ICC clauses:.....

Whether cover required for:

Customs duty If Yes, Sum Insured thereof: ₹ _____
 Contingent Duty If Yes, Sum Insured thereof: ₹ _____

Add on covers required:

Additional storage at intermediate locations during transit
 FOB extension and Shut out cargo
 Sellers Contingency
 Any other add on cover (Please Specify)

In case of co-insurance, please furnish following details:

Schedule of Insurers

Sr. No.	Name of co-insurers	Total Sum Insured	% Share

Past Premium and Claims statistics for the last five years in the following format:

Year	Sum Insured	Premium	Nature of Claims	Claims Paid	Claims Outstanding

DECLARATION

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.

I/We authorize L&T General Insurance Company Limited to share my/our contact information like name, company name, address, phone number and e-mail id etc. relating to me / us, with their affiliate/group companies and also for communicating any promotional marketing offers and other transactional / features / products / services of L&T General Insurance Company Limited and its affiliate group companies via SMS Telephone

Place:

Date:

Signature of Proposer

PROHIBITION OF REBATES – UNDER SECTION 41 OF INSURANCE ACT 1938

No person shall allow or offer to allow either directly or indirectly as inducement to any person to take out renew or continue an insurance in respect of any kind of risk relating to lives or property in India any rebate of the whole or part of the commission payable or any rebate of the premium shown on 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.

Any person making default in complying with the provision of this section shall be punishable with fine which may extend to ₹ 500/-

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