



First Assurance SECURITY & SERVICE

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MARINE EXPORT PROPOSAL FORM

1) Proposer's Name:

2) Address of the Proposer:

3) Telephone Number:

3) Business/Occupation:

4) Telephone Number

: _____

5) Insurable Interest:

6) Packaging of the Goods:

Loose

Containerized

Bulk

7) Classification of the Goods:

Perishable

Durable

8) Nature of the Goods:

Non-Hazardous (Above 65.6 °C or 150°F)

Hazardous (Not below 22.8 °C or 73 °F)

Extra Hazardous (Below 22.8 °C or 73 °F)

9) Types of Transportation: By Land By Sea By Air

10) Voyage From : From _____ To _____ Via _____

11) Voyage Type: Port to Port Port to Site

11) Per Carry Limit:

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S.No.	GOODS	SI / EAT (PKR)

EAT = Estimated Annual Turnover

12) Required Risk/Coverage:

Institute Cargo Clause (A)

Institute Cargo Clause (B)

Institute Cargo Clause (C)

13) Additional Coverage (if required)

War SRCC (Strike Riots Civil Commotion)

We desire to effect Marine Export insurance in terms of the Policy used by the company for this class of insurance and hereby declare that all the above statements and particulars which we have read over and checked, are true and that we have not suppressed, misrepresented or mis-stated any material fact, and we agree that this declaration shall be the basis of the contract between us and the Company.

Dated: _____

Proposer's Signature: _____