

**MARINE CARGO PROPOSAL FORM - INLAND TRANSIT**

1) Name of Proposer \_\_\_\_\_

2) Address \_\_\_\_\_

3) Nature of Business \_\_\_\_\_

4) Contact Person \_\_\_\_\_ Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

5) Cell No. \_\_\_\_\_ Email. \_\_\_\_\_

6) NTN \_\_\_\_\_ STN \_\_\_\_\_ CNIC(if individual) \_\_\_\_\_

7) Type/Nature of Cargo \_\_\_\_\_  
\_\_\_\_\_

8) Nature of Packing:       Conventional                       Containerized

9) Mode of Conveyance:       By Truck/Trailer                       By Rail

10) Voyage:                      From \_\_\_\_\_ To \_\_\_\_\_

11) Maximum Limit:      Per Carry/Conveyance \_\_\_\_\_ Annual Turnover \_\_\_\_\_

12) COVERAGE:-

a. Road/Rail Cargo Clause       A                       B

b. Road/Rail Strike Clause

13) Have you previously been insuring your cargo?  yes  no

If yes, (a) State the name of insurer \_\_\_\_\_

(b) Reasons for leaving the previous insurers?

Policy Cancelled

Renewal Refused

Claim Declined

14) Please provide details of losses, if suffered during the last 3 years:-

Year of loss	No of accidents	Nature of accidents	Amount of loss (Rs.)

### DECLARATION

I / We hereby declare that the statements, answers provided by me/us in this proposal form are true to the best of my /our knowledge. I also declare that I have withheld no information material to the insurance.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the Proposer