



**PROPOSAL FORM
 MARINE CARGO INSURANCE**

A) GENERAL INFORMATION

Applicant's Name : _____
 Applicant's Registered Address : _____
 Nature of Trade / Business : _____
 Business Registration No. : _____

B) CARGO INFORMATION (Please tick x where applicable)

Goods to be Insured : _____

Type of Packing : Cartons Crates Case Drums
 Pallets Bottles Bundles Bales

Conveyance / Limit Required : Land Transport – Limit Required : RM _____
 Sea Transport – Limit Required : RM _____
 Air Transport – Limit Required : RM _____
 Courier Service – Limit Required : RM _____

Are goods transported in a container? Yes No

Estimated Annual Carrying : RM _____

Voyage / Transit : From _____ To _____

Basis of Valuation : Invoice Value + 10% uplift Invoice Value
 Others, please specify _____

Transporter / Freight Forwarder : Own Transport Both
 3rd Party Transporter; Name : _____

Loss History (Past 3 years) : None
 Yes, If Yes, please provide brief details
 Year _____ Nature of loss _____
 Amount _____
 (Please enclose list of claims in separate sheet if required)

I/We to the best of my/our knowledge hereby confirm that the statements contained in this proposal form are true and correct and I/we have not concealed, misrepresented or misstated any material fact.
 I/We agree that the statements and declaration contained in this proposal form shall be the basis of the contract of insurance with the Company and are deemed to be incorporated in the contract.

Applicant Signature _____ (with company stamp)
 Name _____
 Date _____

Producer Name _____
 Contact No _____
 Account No _____
 Date _____

MANDATORY TO BE COMPLETED
Declaration by Agent / AIG Officer
I declare that I have sighted the original NRIC of the applicant and thereby verify his/her identity
Signature :
Date :

Statement Pursuant to Schedule 9 the Financial Services Act 2013:

You are to disclose in this proposal form, fully and faithfully, all the facts which you know or ought to know, which are relevant to our decision in accepting the risk and terms to be applied, otherwise the policy issued hereunder may be void or we could refuse your claim. Please note that this duty of disclosure shall continue until the time the policy is issued, carried or renewed.