

GARGASH INSURANCE SERVICES

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MARINE CARGO OPEN COVER - DATA SHEET

CONTACT DETAILS				
Company Name	:			
Address	:			
Business	:			
Telephone No	:		Fax No.	Email
Contact Person	:			Designation

DETAILS OF COVER									
Interest (Description of Goods) Voyage <input type="checkbox"/> Imports <input type="checkbox"/> Exports <input type="checkbox"/> Cross Voyages Packing details Mode of Shipment Basis of Valuation Limit Per Shipment Cover	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: center;">From</th> <th style="width: 50%; text-align: center;">To</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table> <input type="checkbox"/> Air <input type="checkbox"/> Road <input type="checkbox"/> Rail <input type="checkbox"/> Sea <input type="checkbox"/> LCL <input type="checkbox"/> FCL <input type="checkbox"/> Break Bulk <input type="checkbox"/> FOB + 20% <input type="checkbox"/> C+F +10% <input type="checkbox"/> CIF +10% <input type="checkbox"/> ICC (A)/Air/All Risks <input type="checkbox"/> Non Delivery <input type="checkbox"/> ICC (C) /Restricted Cover <input type="checkbox"/> Land Transit Clause (All Risks) <input type="checkbox"/> Total Loss Only <input type="checkbox"/> Land Transit Clause (Fire, Collision, Overturning)	From	To						
From	To								
Bank/s									
Estimated Annual Turnover									

OTHER DETAILS		
Existing Insurance Co.	:	
Preferred Insurance Co.	:	
Claims experience for last 3 years	:	