Marine Cargo Insurance

Proposal form

Completing the Proposal form

1. This proposal must be fully complete including all the required documents
2. It is a duty of prosper to disclose all the material facts, if it would influence the judgement of a prudent insurer.
3. Insurance is based on utmost good faith and in the absence of such good faith, Solarelle may treat your policy as if it never existed if the misrepresentation or your non-compliance with your duty of disclosure was fraudulent.
4. Solarelle assure for the Personal or Sensitive Information/s that we collect are secured from the proposer is secured. Without such Information Solarelle may not be able to process your application, administer your policy or assess your claims.
5. Solarelle may obtain Information from government offices and third parties to assess a claim in the event of loss or damage.

Personal Information

Name of the Proposer:_____

Address:_____ Postal Code: _____

ID/Passport No: _____ Company registration No: _____

Telephone:_____ Fax:_____ Email:_____

Nature of Business:_____

Name of the Bank:_____

Payment Term: LC / TT / DA/ Other

Contact Name: _____

Position: _____

Mobile No: _____

Email:_____

Subject Matter

Full Description of the Cargo: FCL / LCL / DECK

Invoice No: _____ Basis of Valuation: FOB / CNF / CIF
(Please attach the invoice)

Mark and Nos: _____ Insured Value:_____

Detail of Packing: _____ Part shipment (if any): _____

Subject Matter is: New / Second hand / Fresh / Chilled / Frozen

Voyage and Conveyance

Name of the Shipper: _____

From: _____ Transshipped at (if required): _____ To: _____

Date of Sailing / Dispatch: _____

Conveyance: Imports / Exports by: Sea / Air / Inland transit

Cover required:

Annual Cover ☐
Open Cover ☐

Maximum value of goods Imports / Exports / Inland transit: _____
Any one conveyance: _____
Any one location: _____

Cargo Clauses:

Institute Cargo Clauses (A) / (B) / (C)	☐Yes ☐No
Institute War Clauses (cargo) and Strikes Clauses (cargo)	☐Yes ☐No
Institute Clauses (Air) and Institute War Clauses (Air Cargo)	☐Yes ☐No
Institute Strike Clauses (Air cargo)	☐Yes ☐No
Past claim experience	☐Yes ☐No

If YES, please provide the details:

_____

_____

Politically Exposed Person (PEP) Declaration

Are you, or any beneficial owner, director, authorised signatory, or person acting on behalf of the proposer, a Politically Exposed Person (PEP), or a close associate or immediate family member of a PEP?

☐ Yes ☐ No

If "Yes", please provide full details: _____

Declaration

I/We hereby declare and warrant that the statements and particulars given in this Proposal Form are true, complete, and accurate to the best of my/our knowledge and belief, and that no material facts have been withheld or misrepresented.

I/We understand and agree that this Proposal Form, together with any supplementary information provided, shall form the basis of and be incorporated into the contract of insurance between myself/ourselves and the Insurer.

I/We further undertake to notify the Insurer immediately of any material alteration to the information provided before the commencement of the insurance or during the currency of the policy.

I/We acknowledge that any non-disclosure, misrepresentation, or fraudulent statement may render the policy voidable and may result in denial of claims.

I/We consent to the Insurer collecting, obtaining, verifying, and sharing relevant information and documents from or with reinsurers, loss adjusters, brokers, regulatory authorities, other insurers, or any other relevant parties for underwriting, risk assessment, claims handling, fraud prevention, recovery proceedings, and policy administration purposes.

(No insurance cover is provided until the above proposal is accepted and details of cover are confirmed in writing by Solarelle Insurance Private Limited)

Name of proposer: _____

Date: _____ Signature of proposer: Company Stamp:

Office use only

Intermediary Premium / Rate: Special Condition: Broker / Agent / Sales Code: