



Cargo/Stock Throughput Insurance Application Form

Name of Assured:

General description of operations & goods insured:

Incoming Transits

Valuation: Replacement cost
 Other

Total annual values received: USD

Shipped from:	Domestic USA	%	Europe	%
	Far East	%	Other	%
	Total	%		

Goods received:

Goods received by:	Common carrier	%	Assured responsible for insurance	%
	Air	%		
	Ocean Vessel	%		
	Own vehicles	%	Supplier responsible for Insurance	%
	Rail	%		
	Fed Ex/UPS	%		
Total	%	Total	%	

Outgoing Transits

Valuation: Selling Price
 Other

Total annual values of outgoing transits: USD

Shipped to:	Domestic USA	%	Europe	%
	Far East	%	Other	%
	Total	%		

Goods despatched:

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Goods shipped by:	Common carrier	%	Assured responsible for insurance	%
	Air	%		
	Ocean Vessel	%	Supplier responsible for Insurance	%
	Own vehicles	%		
	Rail	%	Total	%
	Fed Ex/UPS	%		
	Total	%		

General Transit Information

Average value per sending:	USD
Maximum value per sending:	USD
Are any waivers of subrogation given to third parties?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide details:	
Description of packaging etc. (e.g. crated, boxed, shrink-wrapped, palletised, containerised):	
Stock/inventory coverage required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide the following information:	
Separate list of all locations (please attach using Word, Excel or similar)	
Total average monthly values at risk:	USD
Maximum value of any one location:	USD
Details of type/function, construction, security & fire protections:	
Please provide loss history for past three years for all transit and stock/inventory losses (USD):	
Year	
Amount	

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What basis of deductibles has been applied to the above losses?

Please provide separate specific details of any large and/or unusual losses.

Sales Figures

Please provide sales figures for the past three years (USD):

Estimated sales for this year:

Year

USD

Amount

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