

- Proposal for
- A. UNACCOMPANIED BAGGAGE IN TRANSIT
  - B. HOME CONTENTS IN TRANSIT
  - C. MOTOR VEHICLES IN TRANSIT

**IMPORTANT:** Please give a definite and full reply to questions and use BLOCK CAPITALS. Space is provided for any additional information on the Supplementary Information Sheet. **Please complete all parts of the proposer and transit sections, plus the selected cover section(s).**

**PROPOSER AND TRANSIT**

<b>PROPOSER</b>	Name: _____		
	Address: _____		
	Occupation: _____		
<b>JOURNEY</b>	From: _____	To: _____	
	Via (Port/Airport) _____		
<b>METHOD OF TRANSIT</b>		<b>Name of Vessel if applicable</b>	

**PLEASE COMPLETE SECTIONS A B AND C WHERE COVER IS REQUIRED**

**SECTION A: UNACCOMPANIED BAGGAGE**

- Please show in Column 1 below the total value of each type of baggage to be insured excluding all baggage with an individual value of more than £100, items valued at more than £100 should be listed in Column 2. It is important that the insured amount should represent as far as possible the replacement cost **at destination**. Underinsurance may result in repair or replacement cost not being paid in full.

**COLUMN 1**

**COLUMN 2**

Description	Amount	Individual items £100 and over	Amount
Clothing and Soft Goods	£		£
Books	£		£
LP's, Tapes and CD's	£		£
Hardware	£		£
Electrical Equipment	£		£
Photographic Equipment	£		£
Other (please specify) .....	£		£
<b>TOTAL:</b>	<b>£</b>		
		<b>Total: Column 2</b>	<b>£</b>
		<b>Total: Column 1</b>	<b>£</b>
		<b>COMBINED TOTAL:</b>	<b>£</b>

**PLEASE NOTE**

Do not include Cash, Bank Notes, Cheques, Money Orders, National Savings Certificates, Premium Bonds, Stamps of any kind, Travel Tickets, Passports, Manuscripts or Documents of any description, Medals, Coins, Bonds, Securities or Travellers Samples and Furniture of any kind as these are specifically excluded from the insurance.

- Name and address of Removal Contractors or Freight Forwarder.

**SECTION B: HOME CONTENTS**

**PLEASE NOTE**

*Cover under this section is only provided if your contents are professionally packed.*

Please complete the Schedule of Home Contents to be insured and note that it is important that the insured amount should represent as far as possible the replacement cost at destination. Underinsurance may result in repair or replacement cost not being paid in full.

**COLUMN 1**

**COLUMN 2**

Description	Amount	Individual items £100 and over	Amount
Dining Room Furniture	£	Washing Machine	£
Lounge Furniture	£	Refrigerator	£
Bedroom Furniture	£	Freezer	£
Other Furniture	£	Cooker	£
Antiques	£	Sewing Machine	£
Carpets and Curtains	£	Dishwasher	£
Kitchen Utensils	£	Audio Equipment	£
Cutlery, Silver and Place	£	Television/video	£
Pictures	£	Other Domestic Electrical Appliances	£
Books	£	China, Glass, Porcelain, mirrors and other fragiles	£
LP's, Tapes and CD's	£	Home computer	£
Clothing	£	Works of Art, Paintings and Sculptures	£
Blankets, Bedding and Linen	£	Other	£
Toys	£	<b>Total: Column 2</b>	<b>£</b>
Garden Equipment	£	<b>Total: Column 1</b>	<b>£</b>
Tools	£		
Trunks and Suitcases	£		
<b>TOTAL:</b>	<b>£</b>	<b>COMBINED TOTAL:</b>	<b>£</b>

**PLEASE NOTE**

(A) Do not include Cash, Bank Cheques, Money Orders,, National Savings Certificates, Premium Bonds, Stamps of any kind, Travel Tickets, Passports, Manuscripts or Documents of any description, Medals, Coins, Bonds, Securities, Travellers Samples, Jewellery, Watches, Personal Ornaments and Precious Stones as these are specifically excluded from the insurance.

(B) Liability is limited to the reasonable cost of repair and no claim is to attach for depreciation following repair.

Liability in respect of loss of or damage to glass and china and/or fragile articles and antiques is limited to 15% of the total sum insured unless separately valued.

2. Please list below all items valued £250 or over which are not separately valued in the above schedule.

**PLEASE NOTE**

Should the proposal and subsequent quotation be accepted we shall require a valued inventory of all items to be covered under Section B.

This will be attached to and form part of the policy.

3. Name and address of the Removal Contractor or Freight Forwarder (if different from the Professional Packer)

4. Name and Address of Professional Packer

If you wish to extend cover to include a period of storage either before or after transit please state:

Where stored

Period of Storage  From:  To:

**SECTION C: MOTOR VEHICLES**

**PLEASE NOTE**

*If a motor vehicle is to be shipped on deck it must be in a steel box container on a purpose built container vessel.*

1. Details of Vehicle

Make or Model of Car	Registration Number	Year of Manufacture	Mileage	Total value including tools and accessories

2. Does the vehicle have any accessories such as Radio or Cassette or CD Player? YES  NO   
 If 'YES' please state below the description and value.....

	Description	Value		Description	Value
1		£	4		£
2		£	5		£
3		£	<b>TOTAL:</b>		£

3. If the accessories are not fitted into the fascia or otherwise secured to the vehicle will they be removed and locked into the boot of the vehicle..... YES  NO

4. If tools are valued in total at £50 or above please give details.

	Description	Value		Description	Value
1		£	4		£
2		£	5		£
3		£	<b>TOTAL:</b>		£

5. Name and address of Freight Forwarder if used.

6. Will the vehicle be packed?..... YES  NO   
 If 'YES' please state how in box below.

**PLEASE ANSWER THE FOLLOWING QUESTIONS:**

Have you

- a) Suffered loss damage or expense during the last 5 years involving the risks you now wish to insure.....
- b) Been convicted of, or have any prosecution pending for any criminal offence?.....
- c) Been refused the issue of insurance or had special terms or conditions applied to the risks you now wish to insure?.....

**IMPORTANT** - The answers you have given to the questions in Sections A, B & C will usually provide us with sufficient information to enable us to consider this proposal. However, because no list of questions can be exhaustive please consider carefully whether there is anything else known to you which could influence our acceptance and assessment of the risk. This should include any special feature of the property or its location which make losses more likely to happen or more serious if they occur. Please disclose to us on a separate piece of paper or on the Supplementary Information Sheet any such information, even if you have doubts as to whether it affects the risk or not, as failure to do so could invalidate your policy.

You should also keep your own record (including copies of letters) of all information supplied in arranging this insurance.

**Before signing the Declaration below please check your answers carefully, particularly if the proposal is not completed in your own hand. Please initial any alterations.**

**DECLARATION**

I declare that to the best of my knowledge and belief the answers above are true and all information, as explained above, has been disclosed. I agree that if any answer has been written by any other person, such person shall for that purpose be regarded as my agent and not the agent of the insurers. I agree that the proposal is for insurance in the normal terms and conditions of the insurers policy and shall be incorporated in and form the basis of the insurance.

Proposer's Signature:  Date:

**COVER WILL NOT COMMENCE UNTIL INSURERS HAVE INDICATED THEIR ACCEPTANCE OF THE PROPOSAL.  
 THE INSURERS RESERVE THE RIGHT TO DECLINE ANY PROPOSAL**