

EY Insurance Limited

14th Floor, The Ruby, 29 Senapati Bapat Marg, Dadar (West), Mumbai, Maharashtra 400028

MARINE DECLARATION FORM

Declaration No. Open Policy No.				
Insured Name:				
Address:				
Policy Sum Insured Policy Period: Please note the following Declaration under the above Open Policy relating to goods despatched:				
Marks			Description of Goods Sum Insured	
Marks	No. of Fkgs.	Nature of Facking	Description of Goods	Sum msured
			Previous Balance	
			Declared Amount	
			Closing Balance	
Terms of Cover:				
Shipped/Despatched per			Sailing on / about	
Under B/L, AWB, R/R, L/R, C/N No.			Dated:	
Transit/Voyage: From			To:	
Date of Departure				
DECLARATION I/We hereby declare that the particulars furnished above are True and Correct.				
Date:		Seal:	Sign a ture:	
			Name:	
Certificate No.				
We certify the goods declared above are covered under Open Policy No. for, EY Insurance Limited				
Flace:				
Date: Authorised Signature				