

MARINE DECLARATION FORM

From

.....

.....

Ref.:

Date:

MARINE OPEN COVER NO.(if any)

Please Insure the following as per the stated description

1	Name of Insured	
2	Proforma Invoice No. and date	
3	Proforma Value (in other currency)	
4	Exchange Rate	
5	Amount of Insurance (E Br)	
6	Quantity	
7	Description of Goods	
8	Mode of Shipment	On Deck <input type="checkbox"/> Under Deck <input type="checkbox"/>
9	Mode of Packaging	
10	From:	TO: Via
11	Cover required	
12	Remarks	

Yours faithfully,

Name: _____

Signature: _____

Position: _____
Seal of the company (if any)