

Application of Transport Insurance for Household Goods, Personal Effects & Automobile

Name of Insured:	Date:	<input type="checkbox"/> Packed by Owner (PBO)	Moving Method:
		<input type="checkbox"/> Packed by Removal Comp.	<input type="checkbox"/> Ai <input type="checkbox"/> Sea <input type="checkbox"/> Truck <input type="checkbox"/> Rail
Origin City, Country (Complete Adress):			
Remarks:	Please declare the replacement value of all items in your shipment below. Items not declared will not be insured.		

ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
A. LIVING ROOM			
WALL UNIT			
WALL UNIT			
CABINET			
SIDE BOARD			
SOFA, 3-SEATER			
SOFA, 2-SEATER			
SOFA, 1-SEATER			
CHAIR			
BOOK SHELF			
LOUD SPEAKER			
AMPLIFIER			
PAINTING			
DINING TABLE			
COFFEE TABLE			
TELEVISION			
TV-CABINET			
CURTAINS			
HIFI SYSTEM			
MIRROR			
RUG / CARPET			
CD PLAYER			
DVD PLAYER			
FLOOR LAMP			
TABLE LAMP			
DECORATION			
CLOCK			
SUM		0	

ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
C. STUDY			
CHAIR			
DESK			
CABINET			
SIDE BOARD			
HIFI SYSTEM			
LAMP			
RUG			
CURTAINS			
GLASS CABINET			
PAINTING			
TV CABINET			
BOOK SHELF			
COMPUTER			
PRINTER			
SCANNER			
TV SET			
CD PLAYER			
DVD PLAYER			
SUM		0	

ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
B. DINING ROOM			
TABLE			
CHAIR			
CABINET			
BUFFET / SIDE BOARD			
HOSTESS TROLLEY			
FLOOR LAMP			
CHANDELIER			
MIRROR			
TABLE LINEN			
PAINTING			
RUG / CARPET			
CURTAINS			
GLASS CABINET			
SUM		0	
ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
E. MASTER BED ROOM			
BED			
MATTRESS			

ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
D. KITCHEN			
TABLE			
CHAIR			
ELECTRICAL APPLIANCES			
MICROWAVE			
OVEN			
REFRIGERATOR			
FREEZER			
WASHING MACHINE			
DRYER			
IRON BOARD			
IRON			
FOOD			
LIQUOR / WINE			
GLASS CABINET			
SIDE BOARD			
SUM		0	
ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
H. GLASSWARE / CRYSTAL			

CHEST OF DRAWERS			
CHAIR			
DRESSING TABLE			
WARDROBE			
BEDSIDE LOCKER			
SOFA			
MIRROR			
LAMP			
RUG / CARPET			
PAINTING			
TV SET			
SUITS			
TROUSERS			
SLACKS			
SKIRTS			
BLOUSES			
SWEATER / SHIRT			
HOSIERY / SOCKS			
UNDER WARE			
LINGERIE			
SUM		0	

ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
F. CHILDREN'S / GUEST ROOM			
BED			
MATTRESS			
CHEST OF DRAWERS			
CHAIR			
DRESSING TABLE			
WARDROBE			
BEDSIDE LOCKER			
SOFA			
MIRROR			
BOOK SHELF			
LAMP			
CURTAINS			
PAINTING			
HIFI SYSTEM			
SUM		0	

ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
G. ANTIQUES			
SUM		0	

ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
M. MISCELLANEOUS			
PHOTOGRAPHIC EQUIPMENT			
CAMERA			
VIDEO CAMERA			

SUM		0	

ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
I. ORNAMENTS & SCULPTURES			
BUDDHA			
STONE FIGURE			
TERRAKOTTA			
WARRIOR			
SUM		0	

ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
J. SPORT EQUIPMENT			
SUM		0	

ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
K. BATHROOM			
TOILETRIES			
MEDICAL SUPPLIES			
COSMETIC			
CABINET / SHELF			
MIRROR			
RUG			
SUM		0	

ARTICLES	NO. ITEMS	VALUE	PURCHASE YEAR
L. GARDEN / GARAGE			
CHAIR			
TABLE			
LOUNGE CHAIR			
BARBECUE			
SWING			
LAWN MOWER			
ELECTRIC EQUIPMENT			
GARDEN TOOLS			
BICYCLE			
WORK BENCH			
POWER TOOL			
HAND TOOL			
FLOWER POT			
SUM		0	

N. CAR & MOTORBIKE	
YEAR (REG. NO.)	
MODEL / COLOUR	
CHASSIS NO.	
SUM INSURED	

CAMERA EQUIPMENT			
COMPUTER			
PRINTER			
MONITOR			
COMPUTER SUPPLIES			
PROJECTOR			
RECORDS			
VIDEO TAPES			
CD / DVD			
CASSETTES			
TOYS / GAMES			
SEWING MACHINE			
CONVERTER			
PIANO (UPRIGHT)			
GRAND PIANO			
HIFI EQUIPMENT			
BOOKS			
SUM		0	

HOUSEHOLD GOODS: _____ 0

AUTOMOBILE: _____ 0

TOTAL SUM INSURED: _____ 0

(* Please specify currency)

Declaration of the Proposer:

I declare that I have disclosed all material facts and understand that failure to do so could render the insurance void. I declare that the amounts stated above are the full value of the goods at destination. I confirm that I have declared all items that I wish to insure with all details requested. I have read the conditions stated overleaf and understand that these shall form the basis of the proposed contract between me and Insurers.

Date: _____

Signature: _____

