



# Universal Sampo General Insurance Co. Ltd.

(A Joint Venture of Allahbad Bank, Indian Overseas Bank, Karnataka Bank Limited, Dabur Investments Corp. and Sampo Japan Nipponkoa Insurance. Inc.)

Registered and Corporate Office: Unit No 401, 4th Floor, Sangam Complex, 127, Andheri Kuria Road, Andheri (East), Mumbai - 400 059. Maharashtra. Fax# 022 - 2921 1844, Email: [contactus@universalsampo.com](mailto:contactus@universalsampo.com)

## PROPOSAL FORM FOR MARINE INSURANCE—SPECIFIC TRANSIT

1) Agent/Broker Name	
2) Agent/Broker Code	
3) Name and Address of the applicant	
4) Phone No.	
5) E-mail address	
6) Goods to be insured	
7) Nature of packing	
8) Marks and Nos.	
9) Mode of conveyance	Sea / Air / Railways / Trucks / Courier / Post / others
10) B/L, AWB/ RR/ CN number and date	
11) Name of the Vessel	
12) Voyage / Transit	From _____ To _____
13) Transhipment, if any (pl. specify)	
14) Additional Storage, if any (pl. specify place and period)	
15) Basis of Valuation	
16) Value declared for insurance	

17) Terms of cover required

18) Produced name and code, if applicable

19) Requirement of risk as per Letter of credit

20) Customs value of goods in case of imported goods

21) Any other details about the risk

**AML Guidelines:**

1. I/We hereby confirm that all premiums have been/will be paid from bonafide sources and no premiums have been/will be paid out of proceeds of crime related to any of the offence listed in prevention of Money Laundering Act, 2002.
2. I understand that the Company has the right to call for documents to establish sources of funds.
3. The insurance company has right to cancel the insurance contract in case I am/have been found guilty by any competent court of law under any of the status directly or indirectly governing the prevention of money laundering in India.

- Nationality: Indian  Non Indian  If Non-Indian please specify the country
- Type of Organisation  
Corporations  Governments  Non-Governmental Organizations  Society   
Trust  Partnership  Internaional Organization  Cooperatives  Section 25 Company

PAN Card Number/Form 60 (Mandatory)

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**Declaration**

I/We hereby declare and warrant that the above statements are true and complete in all respects and that there is no other information which is relevant to my application for insurance that has not been disclosed to you. I/We agree that this proposal and the declarations shall be the basis of the contract between me/us and Universal Sampo General Insurance Co. Ltd and I/We agree to accept a policy, subject to the conditions prescribed by Universal Sampo General Insurance Co. and to pay premium on demand. I/We undertake to exercise all ordinary and reasonable precautions for safety of the property as if it were uninsured.

Place

Date

Signature of Proposer

GST Number \_\_\_\_\_

**SECTION 41 OF INSURANCE ACT, 1938**

1. No person shall allow or offer to allow either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate except such rebate as may be allowed in accordance with the published prospectuses or tables of the Insurer.
2. Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend to Ten Lakhs Rupees.

**Universal Sampo General Insurance Co. Ltd.**

Express IT Park, Plot No EL 94, T.T.C. Industrial Area, M.I.D.C., Mahape, Navi Mumbai – 400710

Toll Free Nos: 1800-224030 / 1800-2004030, Landline Number: (022) 27639800 or (022) 39133700 and Fax No. (022) 39171419

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