(Former: Sanima General Insurance Ltd. & General Insurance Company Nepal Ltd.) Head Office: 205, Tangal Marg, P.O. Box 1622, Kathmandu, Nepal Tel: 00977-1-4427170 / 4427171 / 4427172 / 4427101 / 4427103 E-mail: info@sgic.com.np, Web: www.sgic.com.np

MARINE INSURANCE QUESTIONNAIRE FORM

		Date:			
		Name of office:			
AII	QUE	Agency: ESTIONS ARE TO BE ANSWERED			
1.		ne of Proposer			
		·			
	Add	ress			
2.	Des	cription of goods to be insured:			
۷.	DCS	cription of goods to be insured.			
3.	Dot	ails of Packing:			
	Details of Packing:				
4.		ails of Voyage or Transit:			
	a)	From:			
	b)	То:			
	c)	Mode of transit (by Sea / Air / Rail / Road):			
	d)	In case of Sea Voyage, name of the vessel:			
	e)	Invoice No & Date:			
	f)	L/C No.& Date:			
	g)	B/L No./C/N No./AW/B No./R/R No.& Date:			
5.	Esti	mated Date of Departure:			
6.	Sun	n Insured			
	a)	Invoice value:			
	b)	Tolerance Limit (If any):			
	c)	Incremental Costs (Expressed as a percentage of Invoice value):			
	d)	Duty (Duty amount payable on arrival):			
7.	Тур	e of Insurance Cover required (All Risk / Basic Risk / Minimum Risk):			
8.	Add	itional Cover required:			
		·			
0	Ном	ulang has proposer proviously been handling this type of husiness:			
<i>9</i> .	9. How long has proposer previously been handling this type of business:				
	PROPOSER'S SIGNATURE				
		PAN No.:			

FOR OFFICE USE:

Proposal accepted by	Rate agreed			
Cover granted	C/N.No	Date		
	Entd. in C/N Control Register			
Entered in Premium Register	Entered in Statistics Reg	ister		
Entered in Stm. Cont. Register	=			
PREMIUM CALCULATION SHEET				

PREMION CALCULATION STILL I			
Specified Premium Rate (as per S.Nof Schedule 6) (In decimal)	(A)		
Air Transit Discount (20% of A)			
or			
Inland Transit within Nepal (limited distance) discount (30% of A)			
or			
Inland Transit within Nepal discount (25% of A)			
or			
Inland Transit Discount (20% of A)	(B)		
(A-B)	(C)		
Container Discount (10% of C)	(D)		
(C-D)	(E)		
Additional Premium Rate for:			
a) W & SRCC or SRCC (as per S.Nof Schedule 7)	(F)		
b) Other (specify)			
i) (as per S.N of Schedule 7)	(G)		
ii) (as per S.N of Schedule 7)	(H)		
Applicable Premium Rate (E+F+G+H)	(1)		
Premium for other than Duty Insurance			
{(Invoice value + incremental cost) x Applicable premium rate} (In Rs.)	(J)		
Premium for Duty Insurance			
(Duty in amount x Applicable premium rate)	(K)		
(J + K)	(L)		
Direct Business Discount (10% of L)	(M)		
Premium after direct discount (L-M)	(N)		
Large Sum Insured Discount (20% of N)	(O)		
Premium			
Stamp Duty			
13% VAT			
Total Rs.			