

Rail Transport Insurance Certificate

For Carriers

Certificate Number

Insured Carrier Details

Carrier Name

Carrier Address

Contact Person

Phone / Email

Policy Details

Policy Number

Period of Insurance

Coverage Limit

Geographical Scope

Rail Consignment Details

Description of Goods

Consignment Reference

Origin Station

Destination Station

Date of Departure

Date of Arrival

Insurer Details

Insurer Name

Insurer Address

Remarks / Special Conditions

Authorized Signature & Date