

Marine Insurance Policy Coverage Confirmation

Policy Details

Policy Number	_____
Insured Name	_____
Insurer	_____
Period of Insurance	From _____ To _____
Type of Cover	_____
Sum Insured	_____

Voyage / Risk Details

Conveyance	_____
From	_____
To	_____
Cargo Description	_____

Coverage Confirmation

This is to confirm that the above cargo is insured in accordance with the terms, conditions, exclusions, and warranties as per the Marine Insurance Policy indicated above.

_____	Authorized Signature
_____	Date