

# Marine Cargo Insurance Certificate

Certificate No: \_\_\_\_\_

Date of Issue: \_\_\_\_\_

## Assured / Insured

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Shipment Details

Consignee: \_\_\_\_\_

Destination: \_\_\_\_\_

Place of Receipt: \_\_\_\_\_

Final Destination: \_\_\_\_\_

Conveyance / Vessel: \_\_\_\_\_

Voyage No. / Flight No.: \_\_\_\_\_

## Cargo Details

Description of Goods: \_\_\_\_\_

Quantity / Weight: \_\_\_\_\_

Packing: \_\_\_\_\_

Marks & Numbers: \_\_\_\_\_

Invoice Value: \_\_\_\_\_

## Insurance Details

Sum Insured: \_\_\_\_\_

Premium: \_\_\_\_\_

Policy / Cover Note No.: \_\_\_\_\_

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Terms & Conditions:

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**Remarks**

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Authorized Signature

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Stamp of Insurance Company

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This certificate is issued as evidence of insurance and subject to the terms and conditions of the policy.