

# Marine Insurance Policy Assignment Form

Policy Number \_\_\_\_\_

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

Name of Insured/Assignor \_\_\_\_\_

Address of Insured/Assignor \_\_\_\_\_

## ASSIGNEE INFORMATION

Name of Assignee \_\_\_\_\_

Address of Assignee \_\_\_\_\_

## ASSIGNMENT DETAILS

Consideration / Value Received \_\_\_\_\_

Date of Assignment \_\_\_\_\_

Remarks \_\_\_\_\_

### Declaration

I/We, the undersigned, hereby assign all rights, title and interest in the above-mentioned Marine Insurance Policy to the assignee specified above.

\_\_\_\_\_  
Signature of Assignor

\_\_\_\_\_  
Signature of Assignee

\_\_\_\_\_  
Date