



**MARINE CARGO DECLARATION / APPLICATION**

**PROPOSAL FORM**

STATEMENT PURSUANT TO ARTICLE 20 OF THE INSURANCE LAW OF THE KINGDOM OF CAMBODIA OR ANY SUBSEQUENT AMENDMENT THEREOF

You are to disclose in this proposal form, fully and faithfully, all the facts, which you know or ought to know, otherwise the policy issued hereunder may be void.

Agency A/C No:

Policy No :

**DETAILS OF PROPOSER**

1. Proposer's Name in Full :

2. Occupation / Nature of Business, Trade :

3. Correspondence Address :

4. Identity Card/Passport No. :  5. Nationality :

6. Business Registration No. :

(Identity Card/Business Regn. Doc. Verified By : \_\_\_\_\_ Signature & Name of Agent / Staff)

7. Name of Employer :

8. Telephone No. :  -  Hand Phone No. :  -

9. E-mail address :

**DETAILS TO BE INSURED**

1. Issue Policy in the name of :

2. Address :

3. Voyage : From   
 To   
 Port to Discharge

4. Final Destination :

5. Mode of Transit :  Sea Name of Vessel :   
 Voyage No. :   
 Air Flight No. :

