

AVALON RISK MANAGEMENT CARGO INSURANCE – SPECIAL QUOTE APPLICATION

Special Quotes can be applied for and approved in Marine Merlin.

Return Completed Application to: 150 Northwest Point Boulevard | 4th Floor | Elk Grove Village, IL 60007
Phone: (847) 700-8100 | Fax: (847) 700-8116 | marketing@avalonrisk.com

GENERAL INFORMATION

Company Name: _____

Contact Name: and Title: _____

Commodity: _____

Packaging: _____

New Used

One-time Shipper Continuous Shipper

Value: _____

FOB CIF C&F

Check all that apply or describe:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> FCL | <input type="checkbox"/> LCL Reefer | <input type="checkbox"/> Open Top | <input type="checkbox"/> Bags (Plastic/Paper) |
| <input type="checkbox"/> Flat Rack | <input type="checkbox"/> Breakbulk | <input type="checkbox"/> RoRo | <input type="checkbox"/> Cartons |
| <input type="checkbox"/> Anvil Cases | <input type="checkbox"/> Crates Cradle | <input type="checkbox"/> Palletized | <input type="checkbox"/> Banded (Plastic/Metal) |
| <input type="checkbox"/> Master Cartons | <input type="checkbox"/> Tarped | <input type="checkbox"/> Shrink Wrapped | <input type="checkbox"/> Pails (Plastic/Fiber) |
| <input type="checkbox"/> Drums (Steel/Fiber) | <input type="checkbox"/> Packed Professionally | | <input type="checkbox"/> Packed by Owner (HHG & PE) |

Origin: _____

Via the port of: _____

Destination: _____

By: Truck Rail Air Ocean

To arrival port of: _____

By: Truck Rail Air Ocean

To final destination of: _____

Carrier: _____

Date of Departure: _____

Is shipment on a door to door bill issued by carrier?

Yes No

Are you issuing a door to door house bill?

Yes No

Insurance terms needed: "All-Risk" With Average FPA

Insurance coverage needed: "Door to Door" Port to Port Door to Port Port to Door

Other: _____

Details of prior losses: _____

(To be completed by insurance company only)

Insuring Conditions: _____

Deductible: _____

Rate: _____

Signature

Date