MARINE CLASS PROPOSAL FORM

Agency ________________________________________________________________

1. Full Name __________________________ Residential Address __________________________

2. Email ______________________ Telephone numbers __________________ mobile __________________ Office __________________

Are you a politically exposed? □ Yes □ No □

3. Trade or Occupation __________________________ Contact Person (If corporate) __________________________

4. Please select cover type and category required Goods In Transit (I) Marine Cargo (II) Marine Hull (III)

Cover Type

Category Open cover □ No. __________ Single Transit □

1. SECTION I & II

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<th>Conveyance</th>
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<th>ROAD</th>
<th>RAIL</th>
<th>INLAND WATER</th>
<th>DETAILS</th>
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2. Certificate No. ___________ Type of Cargo ___________ Type of Packaging ___________

Voyage form ___________ Voyage to ___________ Via ___________

Vessel ___________ Loading at ___________ Date ___________

Port of discharge ___________ Transshipment ___________ Bill of lading No. ___________

3. Cover required I.C.C.(A) □ I.C.C.(B) □ I.C.C.(C) □ WAR □ S.R.C.C. □

4. Basis of valuation FOB □ C&F □ C & I □

5. Limit of cover per voyage ___________ Estimat. Ann. Carriage ___________

6. State the principal countries to which goods are exported

Imported __________________________

SECTION III

1. State the name and type of Hull including construction, length and width whether open deck or
cabin and weight of boat/anchor and Year of make, Reg no__________________________________

What is the maximum speed and cruising range ____________________________________________

2. Is the vessel equipped with (please tick if so): Automatic water pump □ Transmitter receiver □
Fire extinguisher □ Life saving equipment □ Location Positioning System □
Engine details: Make________________ Horse power_________________ Serial NO________________

3. Provide a list of accessories to be insured & values

State use of vessel________________________________ Carrying capacity______________________

4. How many times is the vessel hauled ashore for maintenance __________________________________

5. Limits of liability: Hull _______________ Engine _______________ Accessories _______________

6. Third party liabilities
   Property _______________ Injury/death to Third party _______________ Injury/Death to crew __________

   APPLICABLE TO ALL SECTIONS

1. Are you at present or in the past been insured for the risks proposed? Yes□ No □

   Name of Company__________________________________ Period of cover__________________

   Policy number____________________________________

2. Has any proposal or renewal been?

   Declined? Yes □ No □
   Withdrawn? Yes □ No □
   Charged an increased rate? Yes □ No □
   Required special restrictions? Yes □ No □

3. Give particulars of all accidents or losses over the past five years

   ________________________________________________________________________________

4. Period of insurance from_____________________________ to____________________________

I/We declare that to my knowledge that the answers and particulars given in this proposal are true and complete and that I have not withheld any material information. I have also read and understood that this proposal and declaration shall be the basis of the contract between me and PACIS Ins. Company Limited.

Date of completion of proposal form_________________ Proposer’s signature:_________________