



MARINE CARGO INSURANCE

ISSUING OFFICE: _____

PLEASE READ THIS POLICY DOCUMENT AND THE ATTACHED CLAUSES / CONDITIONS FOR CORRECTNESS AND CHECK THAT IT MEETS WITH YOUR REQUIREMENTS AND IN CASE OF ANY DISCREPANCY PLEASE RETURN THE SAME IMMEDIATELY TO THE INSURER FOR NECESSARY RECTIFICATION.

In consideration of the Insured named herein paying to L&T General Insurance Company Limited (hereinafter called the Insurer) and the Insurer accepting the premium as stated in the Schedule and assuming risk, the Insurer agrees to provide insurance against loss damage or expense to the extent and in the manner herein provided subject to all terms, conditions, exceptions and warranties hereinafter set forth.

The Insurer and the Insured agree that

This policy, the Schedule, and any Endorsement(s) shall be considered one document and any word or expression to which a specific meaning has been attached shall bear such meaning wherever it appears.

Any information supplied by the Insured, shall be deemed to be incorporated in the contract

the Insurer will provide the insurance described in this Policy, subject to the terms and conditions, for the period of insurance shown in the Schedule and any subsequent period for which the Insured shall pay and the Insurer shall agree to accept the premium,

Provided that this Policy shall not be in force unless it has been signed by an authorized official of the Insurer.



SCHEDULE

THE INSURED	
Policy Number:	
Issue at:	Date:
Name:	
Address:	
Telephone No.:	
Business Description:	
Period of Insurance:	From: _____ To: _____

Subject matter Insured		
Type of Transit		
Mode of Transit		
Details of voyage	From:	To:
Basis of valuation		
Sum Insured		
a. Export		
b. Imports		
c. Duty		
d. Inland		
Additional Information		

Limits of Liability

Limit per bottom (Air)	Not exceeding Rs.
Limit per bottom (Sea)	Not exceeding Rs.
Limit per bottom (Road / Rail)	Not exceeding Rs.
Limit per Conveyance (Any other mode of transit)	Not exceeding Rs.
Limit per Location	Not exceeding Rs.



1. The limit per bottom and limit per location stated above represent the insurer's maximum liability in respect of an accident or series of accidents arising out of the same event.
2. In case of any increase in the above limits the insurer to be informed prior to commencement of such transits and written agreement taken as to rates and terms.
3. In case the policy covers duty, per sending limit as mentioned above shall be inclusive of the value of such duty.
4. The policy may be cancelled / reviewed at any time by either the Company or the Insured except in respect of any insurance which shall have attached in accordance to the cover granted before the cancellation becomes effective, subject to written notice as follows:-

MARINE AND / OR STORAGE RISKS: 30 DAYS
WAR AND STRIKES RISKS : 07 DAYS

BUT

WAR & STRIKES RISKS in respect of shipments and/or

Sendings to and/or from United States of America (if any) : 48 HOURS
STRIKES RISKS in respect of Domestic Transit : 07 DAYS

From midnight of the day notice of cancellation is received by the Insured / Insurer (served / delivered at the respective addresses mentioned herein)

5. **Inspection of Records:** This insurer, or its agent, shall have the privilege at any time during business hours to inspect the records of the Assured as respects shipments coming within the terms of this Policy. This Insurer agrees to give the Assured a minimum 7 days written notification of their intent to exercise this privilege. This privilege expires twelve months after final termination of this Policy.
6. **Declaration:** All despatches made during the previous month to be received by us (in the agreed format) within the 10th of the following month.
 It is a condition of the Policy that the Insured is bound to declare hereunder every consignment which comes within the scope of this Policy, without exception, the Insurers being bound to accept the same up to but not exceeding the limits specified herein below subject to availability of sum insured / premium to the credit of the Assured and deficiency of premium if any being made good along with the monthly declaration. Notwithstanding what is stated above and the liability of the Insured to declare every consignment falling within the scope of this Policy, it is clearly agreed and understood that no liability shall attach to the Insurer in respect of consignments which are not declared in the manner and within the time specified above.

Premium:

Exports:

Marine premium @ _____%	Rs
War & SRCC premium @ _____%	Rs.
Total Premium	Rs
Stamp Duty	Rs.
Total	Rs

Imports:

Marine premium @ _____%	Rs
War & SRCC premium @ _____%	Rs.
Duty	Rs.
Total Premium	Rs.
Add: Service Tax	Rs.
Stamp Duty	Rs.
Total	Rs



Inland transit:

Marine premium @ _____%	Rs
SRCC premium @ _____%	Rs.
Duty	Rs.
Total Premium	Rs.
Add: Service Tax	Rs.
Stamp Duty	Rs.
Total	Rs

Turnover Policy:

Marine premium @ _____%	Rs
War & SRCC premium @ _____%	Rs.
Duty	Rs.
Total Premium	Rs.
Add: Service Tax	Rs.
Stamp Duty	Rs.
Total	Rs

Policy subject to following terms, conditions, clauses & warranties as attached thereto: -

- 1.
- 2.
- 3.
- 4.

Excess:

1. Export Policy:
Subject to an excess of _____% on each whole consignment value in respect of each and every claim.
2. Import / Inland Policy:
Subject to an excess of ____% on each whole consignment value with a minimum of Rs. _____ in respect of each and every claim.

For L&T General Insurance Company Limited

Authorized Signatory

Important Note:

Please examine this Policy including its attached Schedules / Annexures if any. In the event of any discrepancy please contact the office of the Company immediately, it being noted that this Policy shall be otherwise considered as being entirely in order.

Please refer the Claims Settlement & Grievance Redressal procedure document attached herein for ready reference.



CLAIM SETTLEMENT

The Company will settle the claim under this policy within 30 days from the date of receipt of necessary documents required for assessing the claim. In the event that the Company decides to reject a claim made under this policy, the Company shall do so within a period of thirty days of the Survey Report or the additional Survey Report, as the case may be, in accordance with the provisions of Protection of Policyholders' Interest Regulations 2002.

GRIEVANCE REDRESSAL PROCEDURE

For any grievance the Insured/Insured Person may write to:

The Grievance Officer

L&T General Insurance Company Limited

601-602, 6th Floor, Trade Centre, Bandra Kurla Complex, Bandra East, Mumbai 400051

Alternatively the Insured/Insured Person may also call the helpline number- <<toll free no>> or write to The Grievance Officer at <<abc@xyz.com>>

For Grievances relating to:-

- a) Delay in settlement or against decision on any claim
- b) Premium
- c) Non-issue or Interpretation of Policy terms
- d) or such other grievances

the Insured/Insured person may be entitled to approach the Insurance Ombudsman having office at Ahmedabad, Bhubaneshwar, Bhopal, Chandigarh, Chennai, Guwahati, Kochi, Kolkatta, Lucknow, Hyderabad, Mumbai and Delhi. The details of the Insurance Ombudsmen and their jurisdiction are available on their website-www.ombudsmanindia.org/www.gbic.co.in.