



Insurance

GAN Assurances IARD Hong Kong Branch

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水險投保單

MARINE INSURANCE APPLICATION

Date: _____

保戶名稱
NAME OF INSURED _____

過戶銀行 信用票號碼
held to the order of _____ L/C No. _____

船名 開航日期
Per S.S. _____ Sailing on/abt. _____

飛機 提單號碼 開航日期
Plane _____ AWS No. _____ Leaving on/abt. _____

(Value declared for Carriage 運輸金額: _____)

郵包收據號碼 寄出日期
Parcal Post. Receipt No. _____ Despatched on _____

有否掛號或在郵局投購保險 (a) 有 HK\$ _____ (b) 無
Whether Registered or Insured with Post Office? (a) Yes (b) No

由 至 經或轉船地點
From _____ to _____ via/tranship at _____

投保條件
Terms _____

賠款地點
Claims payable at _____

Marks & Nos. 唛頭及箱號 No. of Pkg. 件數 Interest 貨物名稱

Table with 2 columns: Invoice Value / 發票金額 and SUM INSURED / 保額. Includes fields for Applicant / 投保人, Policy required in 張, and with extra copies: 張.

A/C: