



PROGRESSIVE ΑΣΦΑΛΙΣΤΙΚΗ ΑΤΑ  
Καλλιπόλεως 44, 1071 Λευκωσία  
Τ.Κ. 22111, 1517 Λευκωσία  
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**MARINE INSURANCE PROPOSAL FORM**

\* POLICY  
COVER NOTE TO BE IN THE NAME OF .....

VESSEL & SAILING DATE .....

VOYAGE: From ..... to .....

L/C No. ....

AIR W/B No. ....

CONDITIONS OF INSURANCE: .....

AMOUNT .....

EXCHANGE RATE ..... EQUIVALENT TO EURO € .....

INTEREST .....

SHIPPING MARKS .....

Signature .....

Date .....

<b>CALCULATION OF PREMIUM</b>		
Marine @.....%	€	.....
War @.....%	€	.....
O/age @.....%	€	.....
	€	.....

I/We agree with the above.

Client's Signature .....

Policy No. ....