

<p><u>Cargo insurance application</u></p> <p>Cargo insurance № _____</p> <p>Date _____ 2020</p>	<p>Ingosstrakh Insurance Company</p> <p>CARGO INSURANCE DEPARTMENT</p> <p>To Mr Roman A. Golubev Department Director</p> <p>Tel. 8 (495) 234-36-10 fax 8 (495) 234-36-00</p>
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1. Insured

Taxpayer Identification Number (INN) Address	
Telephone _____ Fax _____ e-mail: _____	
1.1. The insured relates to cargo as	<input type="checkbox"/> seller <input type="checkbox"/> forwarding agent <input type="checkbox"/> internal transport operations <input type="checkbox"/> buyer <input type="checkbox"/> carrier <input type="checkbox"/> other
2. Beneficiary	
INN	
Address:	
3. Insurance payer	
4. In what language should we write an insurance? (Russian, English)	
<i>Note: When writing an insurance in English it is necessary to fill an application in English. In case of a letter of credit payment method a copy of the item of the letter of credit related to the insurance should be presented.</i>	

5. Cargo information	
5.1. Number and date of the contract	
5.2. Exact name of cargo <input type="checkbox"/> new <input type="checkbox"/> secondhand	<i>Including cargoes susceptible to breakage and damage (articles made from marble, ceramics, china, glass or glass-containing etc.) as a percentage of total load volume.</i> _____%
5.3. Number of package, weight	
5.4. Type of package (please, specify :packing cases, boxes, bags, pallets etc.) or without package	<input type="checkbox"/> packing cases <input type="checkbox"/> boxes <input type="checkbox"/> bags <input type="checkbox"/> barrels/ tuns <input type="checkbox"/> other _____ <input type="checkbox"/> without package
5.5. Presence of identification seals	<input type="checkbox"/> yes <input type="checkbox"/> no

6. Insurance coverage (sum of summands of items 6.1.-6.5.)	_____ <input type="checkbox"/> roubles <input type="checkbox"/> US dollars <input type="checkbox"/> Euro <input type="checkbox"/> other _____
including	
6.1. Cargo value _____	
6.2. Freight costs _____	
6.3. Customs expenses _____	
6.4. Expected profit (not more than 10% of cargo value) _____	
6.5. Other costs _____	

<input type="checkbox"/> VAT included	<input type="checkbox"/> VAT excluded
7. Transportation data	
7.1. Departure point (exact address)	
7.2. Destination (exact address)	
7.3. Reloading point	
7.4. Partial unloading point	
7.5 Mode of transport	<input type="checkbox"/> motor transport <input type="checkbox"/> rail road <input type="checkbox"/> sea/river <input type="checkbox"/> air carriage <input type="checkbox"/> express forwarding <input type="checkbox"/> mixed ((please, specify modes of transport)
7.6. Date of cargo dispatch /Numbers and dates of all documents related to the delivery (in the absence of information about all documents related to the delivery, their numbers and dates should be provided in Ingosstrakh later)	
7.7. Carrier	<input type="checkbox"/> legal entity <input type="checkbox"/> individual entrepreneur <input type="checkbox"/> own transport of an insured <input type="checkbox"/> other Please, specify the name of the carrier _____ (carrier liability is insured <input type="checkbox"/> yes <input type="checkbox"/> no If the answer is yes, specify the company and limit) _____
7.8. Way of conveyance <p>This is to confirm that sea transportation of cargoes is carried out by vessels which belong to one of Maritime Registrars included in the International Association of Classification Societies (IACS); the age of ships does not exceed 35 years.</p>	<div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> tilt-covered vehicle body / semitrailer <input type="checkbox"/> closed type (rigid body) <input type="checkbox"/> lowbed semitrailer <input type="checkbox"/> dolly <input type="checkbox"/> car transporter truck <input type="checkbox"/> covered railcar <input type="checkbox"/> open railcar <input type="checkbox"/> rail tank car <input type="checkbox"/> hopper car <input type="checkbox"/> auto carrier <input type="checkbox"/> carrier <input type="checkbox"/> in bulk <input type="checkbox"/> in grain <input type="checkbox"/> cargo hold <input type="checkbox"/> deck <input type="checkbox"/> tanker <input type="checkbox"/> barge/ferry <input type="checkbox"/> cold storage truck (<input type="checkbox"/> with recording devices <input type="checkbox"/> without recording devices <input type="checkbox"/> other _____) <input type="checkbox"/> other (please, specify) </div> : year built of _____ <u>In case of sea transportation</u>
7.9. Temporary storage	<input type="checkbox"/> yes, maximum time of storage ____days <input type="checkbox"/> no <input type="checkbox"/> closed protected premise intended for temporary storage of cargo <input type="checkbox"/> closed protected premise intended for exhibition holding <input type="checkbox"/> open walled protected parking facility <input type="checkbox"/> open site without fence and protection <input type="checkbox"/> limit on storage _____ Name and address of storage _____
7.10. Presence of guard (armed/ unarmed)	<input type="checkbox"/> yes <input type="checkbox"/> no Name of security firm _____ Quantity of guards accompanying the cargo _____ Types of weapons : <input type="checkbox"/> firearms <input type="checkbox"/> weapons
7.11. What leg of the route is declared under insurance	<input type="checkbox"/> the whole transportation route <input type="checkbox"/> the first leg of the route <input type="checkbox"/> other
7.12. Availability of a cargo inspection certificate	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> at departure point <input type="checkbox"/> at reloading point <input type="checkbox"/> at destination point Who draws up and signs this cargo inspection certificate _____

8. Insurance terms:

According to the Cargo Insurance Rules of Ingosstrakh:

<input type="checkbox"/> paragraph 2 article 2.1 “All risks”;
<input type="checkbox"/> paragraph 2 article 2.2 “With particular average”
<input type="checkbox"/> paragraph 2 article 2.3 “Free of particular average” <input type="checkbox"/> including theft of the whole cases <input type="checkbox"/> including robbery, armed assault
<input type="checkbox"/> including war risks. According to IWC (cargo) d.d.01.01.82
<input type="checkbox"/> including strike risks. According to ISC (cargo) d.d.01.01.82 <input type="checkbox"/> Additional risks: _____
<i>Franchise (deductible)-_____</i>

This application constitutes an integral part of the cargo policy.

This is to confirm that we have received and understood the Cargo Insurance Rules of Ingosstrakh.

We guarantee payment of premium according to invoices and in the time limits specified by invoices.

If payment of premium is effected in currency other than currency of the contract, the Central Bank rate of the Russian Federation as of the funds transfer shall be applied.

At the time of signing this application the insured is informed that if it provides false information in this application, Ingosstrakh OJSIC shall be entitled to file a claim for the rescission of the contract as concluded under the influence of fraud.

Chief executive or authorized person _____

(signature, full name, job title)

(L.S.)