

FREIGHT FORWARDERS APPLICATION

1. INSURED: Please include all subsidiaries/ divisions which need to be insured.

Full Name:

.....

Address:

.....

Telephone no.....Fax no.....Website.....

Other Offices within Canada (if any).....

.....

Principal's Name.....Title.....

Years of Exp.....

No. of Employees in Canada.....

Years Applicant Company has been in operation?.....

2. LOSS PREVENTION:

Do you employ designated safety officers? Yes.....No.....

If Yes, who?

Do *you have a loss prevention program in effect?* Yes.....No.....

If Yes, what training and education do you require for employees?.....

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3. QUALITY CONTROL:

Does your Company currently hold or, is in the process of certification by a recognized quality management organization (i.e. ISO) Yes.....No.....

If yes, please specify:

.....

4. PRINCIPLE BUSINESS ACTIVITIES:

A. Circle your current business activities and specify if coverage is required. Also describe your projected future business plans.

<p>.....Custom Broker</p> <p>.....Ocean Freight Forwarder</p> <p>.....Air Cargo Agent (IATA or other)</p> <p>.....Import Freight Forwarder</p> <p>.....Ocean Consolidator (NVOCC)</p>	<p>.....Air Freight Forwarder (Consolidator)</p> <p>.....Shippers Agent</p> <p>.....Domestic Freight Forwarder</p> <p>.....Freight broker or Load broker</p> <p>.....Any other business (describe)</p>
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Note: The inclusion of `other business' activity does not grant coverage to that activity, unless agreed by Insurer's.

B. Are you members of any provincial, national or international organization / associations:

Yes.....No.....

If yes, please state name: i.e. CIFFA., CSCB, Other names:.....

.....

C. Do you use CIFFA standard trading conditions : Yes.....No.....

If answer is NO, please provide copies of your current Bill of Lading or other contractual agreements.

Trading Areas: Please state percentages

Canada.....% U.S.A.....% Mexico.....%.Central America.....% Caribbean.....%

South America.....% Western Europe.....% Eastern Europe (excl Russia).....%

Russia.....% Other former CIS countries.....% China.....Hong Kong.....%

Taiwan.....% Japan.....% Other Far East Countries.....% India.....%

Pakistan.....% Other Asian countries.....% Australasia.....%

Republic of South Africa.....% Other South African countries.....%

West African countries.....% East African countries.....% Central Africa.....%

Somalia.....% Eritrea.....%

Middle East Countries excluding Israel, Iran, Iraq, Libya and Syria.....%

Israel.....% Iran.....% Iraq.....% Libya.....% Syria.....%

5. PERCENTAGES MOVED:

As a principle : (i.e. NVOCC).....% As an Agent/Consolidator.....%

Co-Load with others.....%

6. TRAFFIC:

Sea: Percentage moved: Containerized.....% Breakbulk.....% Bulk.....%

Do you consolidate containers Yes.....No.....

Do you issue your own House Bill of Lading Yes.....No.....

Please attach copy if yes.

Do you transship cargo? Yes.....No.....

Does your B/L show transshipment port Yes.....No.....

Is your B/L Door to Door or.....Port to Port.....

Does Carrier issue B/L to you? Door to Door or.....Port to Port.....

AIR:

Do you issue your own House Airwaybill? Yes.....(Attach copy) No.....

Are you an IATA Agent ? Yes.....No.....

IT IS HEREBY UNDERSTOOD AND AGREED THAT THIS APPLICATION SHALL BE THE BASIS OF THE CONTRACT OF INSURANCE SHOULD A POLICY BE ISSUED AND IT SHALL BECOME PART OF THE SAID POLICY.

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SIGNATURE OF THE INSURED

POSITION.....

DATED:.....

Firestone Agency of Florida Inc. for the insurer
Insurance Underwriters | Excess & Surplus Lines Brokers | MGA

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