



PELICAN MOVING COMPANY



Telephone : Francistown - 2410714 Head Office : 3161342

Hotline 76497618, Fax: 3161343

INSURANCE APPLICATION FORM FOR DOMESTIC AND INTERNATIONAL HOUSEHOLD REMOVAL

Order #:			Date:					
Name of the Person to move:								
Pick up Address:			Delivery Address					
Contact Nos:			Contact No:					
Pick up Date:			Delivery Date:					
A. ELECTRONIC COMPONENTS			C. MISCELLANEOUS			F. LIVING ROOM		
ARTICLE	ITEMS	VALUE	ARTICLE	ITEMS	VALUE	ARTICLE	ITEMS	VALUE
Television			Camera			Sofa(s)		
Home Computer/PC			Camera Accessories			Chair(s)		
Software			Movie Camera			Sidetable(s)		
Projector and Screen			Holiday Decorations			Desk		
Amplifier			Religious Ornaments			Rugs and Carpets		
Tuner			Piano and Stool			Curtains		
Cassette/Player/Recorder			Clocks			Coffee table		
Video Camera			Sewing Machine			Shelving Units		
CD Player			Sewing Accessories			Light Fittings		
Turntable			Musical Instruments			Lamp(s)		
DVD Player			Pictures					
Video Game Unit			Lamp(s)					
Video Games Assorted			Mirror (s)					
Records Albums			Binoculars					
Pre-recorded Tapes Cassettes								
Pre-recorded Video Tapes								
Blank tapes/Cassettes								
Compact Disks								
Speakers								
Clock Radio/Alarm								
Washing Machine								
Dryer								
Refrigerator								
Freezer								
Dishwasher								
Stove								
Microwave								
Food Processor								
Electronic Keyboard								
Other Electrical items								
TOTAL BWP		0	TOTAL BWP		0	TOTAL BWP		0
B. CHINA OR GLASSWARE			D. SILVER / COLLECTABLES			G. FAMILY ROOM / LIBRARY		
ARTICLE	ITEMS	VALUE	ARTICLE	ITEMS	VALUE	ARTICLE	ITEMS	VALUE
						Paperback Books		
						Hardcover Books		
						Children's Books		
						Reference Books		
						Chairs		
						Sofas		
						Tables		
						Rugs and Carpets		
						Desk		
						Curtains		
						Toys		
						Games		
						Writing Bureau		
						Shelving Units		
TOTAL BWP		0	TOTAL BWP		0	TOTAL BWP		0
E. HIGH VALUE ITEMS			H. KITCHEN					
ARTICLE	ITEMS	VALUE	ARTICLE	ITEMS	VALUE			
Picture/Paintings			Tables					
			Chairs					
			Dishes					
			Utensils					
			Pots and Pans					
			Bowls e.t.c					
			UNITS					
TOTAL BWP		0	TOTAL BWP		0			

I. DINNING ROOM

ARTICLE	ITEMS	VALUE
Table		
Chairs		
Rugs and Carpets		
Curtains		
Light Fittings		
Shekving Units		
Sideboard		
Server Table		
Food Warmer		
TOTAL BWP		0

J. BED ROOM# 1(MASTER)

ARTICLE	ITEMS	VALUE
Chairs		
Bed(s)		
Bedside Table		
Dressing Table		
Chest of Drawers		
Rugs		
Curtains		
Desk		
TOTAL BWP		0

K. BEDROOM # 2

ARTICLE	ITEMS	VALUE
Bed(s)		
Chair(s)		
Dresser/Chest of Drawers		
Rug(s)		
Curtains		
Bedside Table		
TOTAL BWP		0

L. BEDROOM # 3

ARTICLE	ITEMS	VALUE
TOTAL BWP		

M. LINENS / BATHROOM ITEMS

ARTICLE	ITEMS	VALUE
Pillows		
Pillow Cases		
Sheets		
Blankets		
Bed Spreads		
Quilts		
Table Cloths		
Towels		
Medicine Cabinets		
Duvet		
TOTAL BWP		0

N. PATIO

ARTICLE	ITEMS	VALUE
Table		
Chair(s)		
Barbeque		
Barbeque Accessories		
Sun-Shades		
TOTAL BWP		

O. CLOTHING

[illegible]

R. SPECIAL ITEMS TO MOVE

ARTICLE	ITEMS	VALUE
3		
4		

P. BASEMENT / ATTIC / GARAGE

ARTICLE	ITEMS	VALUE
Iron		
Iron Board		
Work Bench		
Hand Tools		
Tool Box		
Golf Clubs		
Sporting Equipment		
Lawn Mower		
Garden Tools		
Hose		
Exercise Equipment		
Bicycles		
Power Tools		
TOTAL BWP		0

Q. MOTOR VEHICLE # 1

ARTICLE	ITEMS	VALUE
Make		
Model		
Year		
Value		
TOTAL BWP		0

Q. MOTOR VEHICLE # 2

ARTICLE	ITEMS	VALUE
TOTAL BWP		0

**THIS VALUE MUST BE SUFFICIENT TO
REPLACE YOUR HOUSEHOLD..
TOTALS (A to P)**

SUMMARY

ARTICLE	ITEMS	VALUE
A.Electrical Components		0
B.Fine China/Glassware		0
C.Miscellaneous		0
D.Silver/Collectables		0
E.High Value Items		0
F.Living Room		0
G.Family Room/Library		0
H.Kitchen		0
I.Dining Room		0
J.Other Bedrooms # 1/Master		0
K.Bedroom # 2		0
L.Other Bedrooms		0
M.Linens/Bathroom items		0
N.Patio		0
O.Clothing		0
P.Basement/Attic/Garage		0
Q.Motor Vehicles		
TOTAL BWP		0

ARTICLE	ITEMS	VALUE
5		
TOTAL BWP		0

SPECIAL INSTRUCTIONS			
<p>ANY ADDITIONAL VALUED INVENTORY CAN BE ATTACHED (DON'T FORGET TO INLCUDE THE VALUE IN THIS SUMMARY)</p> <p>I desire to effect ALL Risk in Transit insurance and i declare the above statements are true and complete and that nothing materially affecting the risk has been concealed by me and that the amounts above stated are the full value of the household moved. I agree that this proposal shall be taken as the basis of the proposed contract between me and Underwriters and that no payment to the courier may be withheld, should a claim arise from the transportation of my household and/or effects. I understand and agree to the conditions of insurance attached.</p>	<table border="1"> <tr> <td>GRAND TOTAL TO BE INSURED</td> <td>0</td> </tr> </table>	GRAND TOTAL TO BE INSURED	0
	GRAND TOTAL TO BE INSURED	0	
	SIGNATURE:		
	PRINT NAME:		
DATE:			
<p>Please make the necessary arrangements for the house hold/special removal as listed and/or instructed above</p>			
<div> <div> <p>.....</p> <p>Name & Signature of the Authorized Signatory</p> </div> <div> <p>.....</p> <p>Date & Stamp of the Company</p> </div> </div>			
<p>Instructions & Details of alternative arrangemet</p>			
<p>Comments & Remarks</p>			

Special Note: This order form is used for the insurance purposes too. Therefore appropriate information is required