



Personal Effects Inventory Record

In order for your certificate of insurance for personal effects to be valid you must print, complete and fax this form to Cargo International Logistics at 1-888-253-3458 prior to the shipment. Be sure to include applicable taxes in valuations.

GENERAL INFORMATION

Named Insured

Attached to and forming part of certificate no.

Replacement Value

Actual Cash Value

Living Room & Dining Room	Living Room Value	Dining Room Value
Rugs & Pads	\$	\$
Couch/Loveseat	\$	\$
Chairs	\$	\$
Cushions	\$	\$
Chest	\$	\$
Desks & Desk Sets	\$	\$
Book Cases	\$	\$
Books	\$	\$
Computers/Printers	\$	\$
Draperies/Curtains/Blinds	\$	\$
Lamps/Vases	\$	\$
Coffee Tables	\$	\$
Musical Instruments	\$	\$
Pianos	\$	\$
Stereos/Radios	\$	\$
CD's/DVD's/Cassettes/Records	\$	\$
Pictures/Paintings/Mirrors	\$	\$
Television Set	\$	\$
VCR/DVD/CD PLAYER	\$	\$
Portable Heating Equipment	\$	\$
Fireplace Fixtures	\$	\$
Bric-a-brac	\$	\$
Dining Room Set	\$	\$
China Cabinet	\$	\$
Serving Tables	\$	\$
Tablecloths & Napkins	\$	\$
Silverware	\$	\$
Chinaware	\$	\$
Glassware	\$	\$
Total	\$	\$

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CLOTHING AND PERSONAL EFFECTS			
Mens & Boys	Value	Women & Girls	Value
Coats/Hat	\$	Coats/Hats	\$
Suits/Slacks	\$		
		Suits/Dresses	\$
		Sweaters/Blouses	\$
Sweaters & Jackets	\$	Skirts & Slacks	\$
Shirts	\$		
Formal Wear	\$	Formal Wear	\$
Underwear/Socks	\$	Lingerie/Hosiery	\$
		Shoes/Boots	\$
		Gloves	\$
Neckties & Scarves	\$		
Belts/Billfolds/Accessories	\$	Rainwear & Umbrellas	\$
Gloves/Rainwear	\$	Cosmetics & Perfume	\$
Shoes (all types)	\$	Baby Clothing	\$
		Baby Equipment	\$
TOTAL (A)	\$	TOTAL (B)	\$
TOTAL (A+B)	\$		

Bedrooms	No. 1 Value	No. 2 Value	No.3 Value	No. 4 Value
Rugs & Pads	\$	\$	\$	\$
Beds	\$	\$	\$	\$
Mattresses, Springs	\$	\$	\$	\$
Chests/Dressing Tables	\$	\$	\$	\$
Vanity Sets	\$	\$	\$	\$
Desks & Contents	\$	\$	\$	\$
Draperies	\$	\$	\$	\$
Curtains	\$	\$	\$	\$
Lamps/Radios/Clocks	\$	\$	\$	\$
Chairs/Mirrors	\$	\$	\$	\$
Blankets, Spreads, Linens	\$	\$	\$	\$
Computers	\$	\$	\$	\$
Toys	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$

Den & Family Room	Value	Bathrooms	Value	Basement, Attic, Garage, Outdoors	Value
Rugs & Pads	\$	Shower Curtains	\$	Furniture	\$
Couch/Loveseat	\$	Electronic Razors	\$	Washer/Dryer	\$
Chairs	\$	Hair Dryers	\$	Iron & Board	\$
Lamps	\$	Medicine Cabinet	\$	Vacuum Cleaner	\$
Chests	\$	Towels-Linen	\$	Picnic Table	\$
Draperies/Curtains	\$	Bath Mat Sets	\$	Pool Accessories	\$
		Clothes Hamper	\$	B.B.Q.	\$
Book Cases	\$	Toilet Accessories	\$	Swing Set/Yard Toys	\$
Books	\$	Chests, Scales	\$	Trunks & Luggage	\$
Trophies	\$		\$	Work Bench	\$
Computer Equipment	\$		\$	Supplies	\$
Television/VCR/DVD	\$		\$	Garden Tools	\$

Stereo/Radio	\$		\$	Lawn Mowers	\$
CD's/DVD's/Cassettes/ Records	\$		\$	Freezer	\$
Tables	\$	TOTAL	\$	TOTAL	\$
		Hobby, Sports Equipment	Value	Miscellaneous Items (Detail)	Value
Hide-a-bed	\$	Hobby Material	\$		\$
Aquarium	\$	Golf Clubs	\$		\$
Fireplace Fixtures	\$	Boat & Motors	\$		\$
Toys	\$	Photographic Equipment	\$		\$
Liquor Cabinet	\$	Hunting Equipment	\$		\$
		Fishing Equipment	\$		\$
		Power/Hand Tools	\$		\$
		Bicycles	\$		\$
		Collections	\$		\$
TOTAL	\$	TOTAL	\$	TOTAL	\$

Kitchen	Value	Summary	Value
Dishwasher	\$	Living Room	\$
Table & Chairs	\$	Dining Room	\$
Microwave Oven	\$	Clothing & Effects	\$
Refrigerator	\$	Bedroom No.1	\$
Stove/Cookers	\$	Bedroom No.2	\$
Cutlery/Utensils	\$	Bedroom No.3	\$
Dishes	\$	Bedroom No.4	\$
Pots & Pans	\$	Kitchen	\$
Electrical Appliances	\$	Den & Family Room	\$
Clocks	\$	Bathrooms	\$
Curtains	\$	Basement, Garage, etc...	\$
		Hobby, Sports Equipment	\$
		Miscellaneous Items	\$
		Appraised Items (attach list)*	\$
		*All antiques must be appraised	\$
TOTAL	\$	TOTAL ALL ROOMS	\$

This Valued Inventory is not a binding contract evidencing insurance. A certificate of insurance must be in place for coverage to take effect. A copy of the insurance certificate issued under the CargoCover policy #110550, issued through Continental Casualty Company is the only contract under which a claim may be made. A copy of the certificate must be provided by your Freight Forwarder or Marsh Broker arranging coverage. If you do not receive a copy of the certificate prior to the shipment departure date, please contact Marsh Canada Limited at 877-755-4934.

Privacy Consent - Canada's Personal Information Protection and Electronic Documents Act (PIPEDA) and similar provincial laws, are intended to protect the confidentiality of an individual's Personal Information. We rely on the employer to obtain the consent of the employee for the collection, use or disclosure of personal information necessary for us to properly manage the client's insurance programs. Such information may be used to make decisions about insurance applications and to assess eligibility for, process and maintain insurance coverage, related products and services; analyze, assess and underwrite risks on a prudent basis; respond to the client's inquiries about applications, accounts and other services; investigate and pay claims; and detect and prevent fraud, suspicious claims or other illegal activities. As part of the application for new or renewal insurance coverage(s), the Client hereby authorizes and expressly consents to Marsh collecting, using or disclosing the client's Personal Information as required for those purposes and as permitted pursuant to relevant privacy laws and providing such Personal Information to third parties as required, including insurance companies, intermediaries, reinsurers, other brokers, claims adjusters and other third parties involved in providing insurance services. Where there are insured individuals in addition to the Client, or where the Client is a commercial or other entity, the Client hereby covenants and warrants that the Client has obtained the appropriate consent from all of the insured individuals to disclose their Personal Information to Marsh for these purposes and for Marsh to use and disclose it for these purposes. Marsh's Privacy Policy is available at www.marsh.ca
By signing this form you are consenting to the statements above.

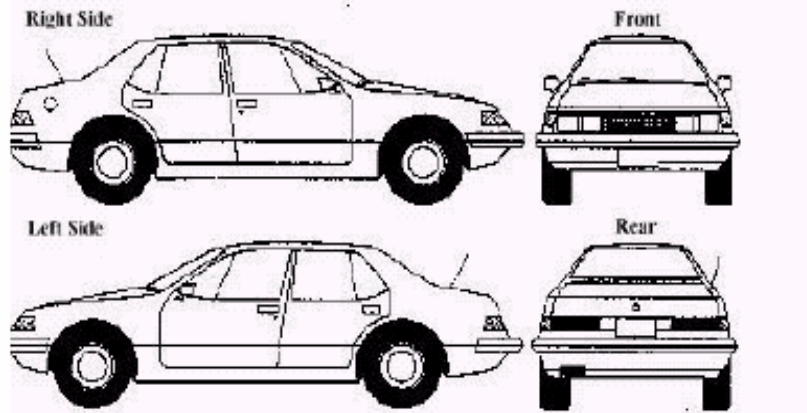
SIGNATURE

Insured's Signature	Date (mon/dd/yyyy)
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CONDITIONS REPORT

Certificate :

Insured:	Date:
Destination:	Mover:
Lisence or Serial Number:	Make:
Mode:	Type:



Indicate on diagram (give dimensions of damage where possible):

B Bent BR Broken C Chafed CH Chipped D Dented
 GC Glass Cracked H Hairline Scratch M Missing R Metal Rusty S Scratched
 SCD Scratched, Chafed, Dented SM Smashed T Torn

Check Where Applicable

<input type="checkbox"/> Hairline scratches all over	<input type="checkbox"/> Heavy dust and mud covered: Minor defects, if any, unable to determine
<input type="checkbox"/> Locked glove compartment	<input type="checkbox"/> Locked rear trunk
<input type="checkbox"/> Scratched and chafed all over	<input type="checkbox"/> Wet by rain

Check Appropriate Answer

Battery disconnected <input type="checkbox"/> Yes <input type="checkbox"/> No	Gas removed <input type="checkbox"/> Yes <input type="checkbox"/> No
Locked rear trunk <input type="checkbox"/> Yes <input type="checkbox"/> No	Radiator drained <input type="checkbox"/> Yes <input type="checkbox"/> No
Wet by rain <input type="checkbox"/> Yes <input type="checkbox"/> No	

Item	Received	Delivered	Exception	Non-factory installed accessories must be valued and declared separately	
				Item	Insured Value
Air Conditioner					
Ashtray					
CB Radio					
Cigar Lighter					
Clock					
Cushion, Front					
Cushion, Rear					
Floor Mats					
Heater					
Hubcaps					
Keys					
Mirrors					
Radio					
Seat Covers					
Spare Tires					
Sunvisors					
Tape/CD Player					
Tires					

ADDITIONAL INFORMATION

Received at ----- by -----
Origin Receiving clerk Date

Received at ----- by -----
Origin Receiving clerk Date

I AGREE THAT THE CONDITION OF THIS AUTO IS AS STATED
WHEN TURNED OVER TO THE SHIPPING COMPANY.

RECEIVED IN GOOD CONDITION AT DESTINATION
EXCEPT ABOVE