



CARGO-LINK
INTERNATIONAL
 AIR / SEA / TRUCK / RAIL

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 Salt Lake City, UT 84104
 Phone: 801-975-9336
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Date: _____

INSURANCE AUTHORIZATION REQUEST OR INSURANCE WAIVER

This letter authorizes Cargo-Link International to provide All Risk Insurance coverage under their shippers interest policy handled on behalf of the following customer:

Customer Name: _____ Address: _____

Phone: _____ Contact Name: _____

Effective Date: _____

Authorized By: _____
 Company Representative Name & Signature

Insurance coverage will be applied to shipments handled by Cargo-Link International or through their appointed shipping agents. Rate will apply as quoted in standard freight quotations for General Merchandise. High risk or high value merchandise as defined by our insurance underwriters may be applied a higher rate or with deductibles that will be communicated to Importer upon notice of shipment. Coverage binds at time of shipment from vendors enroute to customer and is subject to terms of sales negotiated between the customer and their appointed vendor or consignee.

Failure to secure insurance will subject the shipment to the normal legal liability limits offered by a carrier depending on the mode of transportation. Those legal limits vary but are normally \$ 0.50 per pound for the land move, \$500 per package by sea with interpretation of "package" sometimes at issue per COGSA rules or \$20.00 per kilo if moving in international transportation by air.

Note: Cargo-Link must be arranging the shipments through their appointed agents or this coverage will not apply. Notification and a specific request in writing must be given at time of shipment if coverage is requested for cargo moving through other forwarders or carriers not arranged by Cargo-Link.

WAIVER OF REQUEST FOR INSURANCE COVERAGE

I have read the above regarding coverage to be applied to my shipments handled through Cargo-Link International. I understand that by waiving this coverage I have no coverage from carriers that Cargo-Link may use in the process of handling my shipments and also hold Cargo-Link International harmless. I will provide my own insurance coverage.

Waiver Authorized by: _____ Date _____

Company Name and Company Representative: _____/_____