REGISTERED INTERNATIONAL MOVER

HUMBOLDT INTERNATIONAL

THIS IS NOT CONFIRMATION OF INSURANCE

Insured	Origin City, Country	Date Packed			
Destination (Complete Address)		Moving by (check)	Land	Sea	Air

Instructions: Declare the Replacement Cost at destination of all items in your shipment below or submit your own legible listing of items and their Replacement Cost. *Items not declared and valued are not insured.* Items of dissimilar value should be separately declared.

A. LIVING ROOM		
Articles	**No. Items**	**Replacement Cost**
Sofa(s)		
Chair(s) - Ottomans		
Lamp(s)		
Table(s)		
Radio		
Record Player/Stereo		
TV(s). Video Recorder		
Rug(s) & Carpet(s)		
Curtains & Drapes		
Piano/Other Musical Instr.		
Tape Deck/Recorder		
Bookcase/Room Divider		
B. DINNING ROOM		
Table		
Chair(s)		
China Closet		
Buffet		
Serving Table/Tea Cart		
Lamps & Chandeliers		
Rug(s) & Carpets		
Curtains & Drapes		
Mirrors		
Table Linens/Accessories		
C. KITCHEN		
Step Stool		
Dinette Set		
Electric Appliances		
Cabinets/Tables		
Kitchen Linens & Curtains		
Dishwasher		
Oven/Range		
Microwave		
Dishes		
Utensils/Cutlery		
Pots & Pans		
Bowls, Trays, Etc.		
Refrigerator/Freezer		
Trash/Garbage Cans		
D. CHINA & GLASSWARE		
SILVER		
Column Sub- Total		

E. LINENS/CLOTHING		
Articles	**No. Items**	**Replacement Cost**
Coat(s)/Jackets		
Suit(s)		
Dresses		
Sport Coat(s)		
Slack(s)		
Sweater(s)		
Blouse(s)		
Skirt(s)		
Shirt(s)		
Sleepwear		
Shoes/Boots		
Purses/Belts		
Hosiery/Socks		
Ties/Scarves		
Underwear		
Lingerie		
Sportswear		
Sheet(s)/Pillow Cases		
Blanket(s)		
Spread(s)		
Quilts		
Other		
F. BASEMENT & GARAGE (excluding car)		
Workbench		
Tools		
Lawn Mover		
Garden Tools		
Furniture (Patio)		
Barbecue Grill		
Luggage/Trunks/Briefcases		
Washing Machine/Dryer		
Iron/Ironing Board		
Vacuum		
Other		
G. BATHROOMS		
Rugs. Toilet Covers		
Toilet Articles/Medical Supplies		
Towels, Etc.		
Clothes Hamper		
Trash Can		
Cabinets/Shelves/Mirrors		
Razors, Hair Dryers		
Misc.		
Column Sub- Total		

H. BEDROOM NO. 1 (Master)		
Articles	**No. Items**	**Replacement Cost**
Bed(s)		
Chair(s)		
Night Table(s)		
Dress Table/Vanity		
Chest of Drawers		
Mirror(s)		
Rug(s)		
Lamp(s)		
Curtains & Drapes		
Bookcase(s)		
Desk(s)		
Amoire/Wardrobe		
Other		
I. BEDROOM NO. 2		
Bed(s)		
Chair(s)		
Night Table(s)		
Dress Table/Vanity		
Chest of Drawers		
Mirror(s)		
Rug(s)		
Lamp(s)		
Curtains & Drapes		
Bookcase(s)		
Desk(s)		
Amoire/Wardrobe		
Other		
J. BEDROOM NO. 3		
Bed(s)		
Chair(s)		
Night Table(s)		
Dress Table/Vanity		
Chest of Drawers		
Mirror(s)		
Rug(s)		
Lamp(s)		
Curtains & Drapes		
Bookcase(s)		
Desk(s)		
Amoire/Wardrobe		
Other		
K. DEN/FAMILY ROOM		
Chair(s)		
Curtain(s) & Drapes		
Sofa		
Table(s)		
Lamp(s)		
Rug(s) & Carpeting		
Desk(s)		
Bookcase(s)		
Column Sub- Total		

L. MISCELLANEOUS		
Articles	**No. Items**	**Replacement Cost**
Typewriter(s)		
Clocks		
Bric-a-brac		
Baskets, Plant Holders		
Toys & Games		
FAX/Phone/Answering Machine		
Photo Copy Machine		
Liquor/Wine/Food		
Computer/Printer		
Computer Supplies		
Sewing Machine		
Sewinng Supplies		
Sports Equipment		
Cameras/Lens		
Misc. Camera Equip.		
Projectors/Camcorder		
Books/Tapes/Film		
Records/CD's		
Pictures/Paintings		
Fireplace Equipment		
Bicycles		
M. OTHER (specify)		
Column Sub-Total		

TOTAL HOUSEHOLD GOODS

US $

AUTOMOBILE

Yr./Make:

Serial No.:

Non-factory Installed auto accessories must be separately listed and valued:

TOTAL AUTOMOBILE

US $

GRAND TOTAL – INSURED VALUE

US $

Please insure my shipment for US $ _____ which represents the replacement cost at destination of everything which I wish to insure.

Please retain pink copy for your records.
Return remaining copies to your agent.

Signature _____ Date 7/98

PINK – CUSTOMER COPY