

Insured	Origin City, Country	Date Packed: Packed In: Individual Container Wooden Container		
Destination: (Complete Address)		Moving By (Check)	Sea	Air

**DECLARATION**

Note: Declare the Replacement Value of all items in your shipment below or submit your own legible listing of items and their replacement cost at destination. Insure your shipment accordingly as it will be co-insured if adequate protection has not been secured.

**ITEMS NOT DECLARED AND VALUED ARE NOT INSURED**

High Value Items valued at over \$500.00 per item or set MUST BE SPECIFICALLY DECLARED AND VALUED on a SEPARATE SHEET. High Value Items are defined as, but not limited to the following: antiques, objects of art, valuable carpets, furs, china, crystals, silver and gold articles, firearms, collections or records, tapes and other like goods.

A. LIVING ROOM			E. LINEN/CLOTHING			H. BEDROOM N. 1 (Master):			L. MISCELLANEOUS:		
ARTICLE	QTY	REPLAC. COST	ARTICLE	QTY	REPLAC. COST	ARTICLE	QTY	REPLAC. COST	ARTICLE	QTY	REPLAC. COST
Sofa(s)			Coat(s)/Jackets			Chair(s)			Typewriter(s)		
Chair(s)/Ottomans			Suit(s)			Bed(s)			Clocks		
Lamps/Shades			Dresses			Night Table			Bric-a-brac		
Tables			Sport Coat(s)			Dress Table/Vanity			Basket/holders		
Radio			Slack(s)			Bench			Toys & Games		
Stereo			Sweater(s)			Chest & Drawers			Food		
TV(s), VCR			Blouse(s)			Mirror(s)			Liquor		
Rugs & Carpet			Skirt(s)			Rug(s)			Wine		
Desk			Shirt(s)			Lamps			Sewing Mach.		
Curtains/Drapes			Sleepwear			Curtains/Drapes			Sewing Suppl.		
Musical Instrument			Shoes			Bookcase			Cutting Table		
Tape Deck			Boots			Desk(s)			Sports Equip.		
Bookcase			Hosiery/Socks			Armoire/Wardrobe			Pictures/Paint.		
<b>B. DINING ROOM</b>			Ties/Scarves			Other			Camera(s)		
Table			Underwear			<b>I. BEDROOM N. 2</b>			Camera Equip.		
Chair(s)			Lingerie			Chair(s)			Projectors		
China Closet			Sportswear			Bed(s)			Books/Records		
Buffet						Night Table(s)			Fireplace Equip		
Serving Table			Sheet(s)			Dress. Table			Bicycles		
Lamps/Chandeliers			Pillow Cases			Mirror			<b>M. OTHER (SPECIFY)</b>		
Rugs/Carpets			Spread(s)			Rug(s)					
Curtains/Drapes			Quilt(s)			Lamp(s)					
Mirror			Blanket(s)			Bookcases					
Table Linens			Other			Desk(s)					
Other						Chest & Drawers					
<b>C. Kitchen</b>			<b>F. Basement &amp; Garage (Excluding Car)</b>			<b>J. BEDROOM N. 3</b>					
Step Stool			Workbench			Chair(s)					
Dinette Set			Tools:			Bed(s)					
Elec. Appliances						Night Table(s)					
Cabinets/Tables									COLUMN SUB-TOTAL		
Kitchen Linens			Lawn Mover			Dresser/Vanity			TOTAL HOUSEHOLD GOODS		
Dishwasher			Garden Tools			Mirror(s)			\$		
Oven/Range			Furniture (Patio)			Rug(s)			TOTAL HIGH VALUE ITEMS		
Microwave			Luggage			Lamp(s)			(As per attached declaration)		
Refrigerator			Washing Machine			Desk(s)			\$		
Utensils/Cutlery			Ironer/Board			Curtains/Drapes			AUTOMOBILE:		
Pots & Pans			Clothes Dryer			Bookcases			Yr./Make:		
Bowls, Trays, Etc.			Other			Desk(s)			Serial No.:		
Dishes			<b>G. BATHROOMS:</b>			Armoire			Replac. Cost at Dest.: \$		
Other			Rugs			Other			Non-Factory Installed Auto Accessories		
<b>D. CHINA, CRYSTAL, MARBLE, GLASS, ETC.</b>			Toiletries			<b>K. DEN/FAMILY ROOM:</b>			Must Be Separately Listed & Valued		
(Not to exceed 15% of the total sum insured)			Towels, Etc.			Chair(s)					
			Clothes Hamper			Curtains/Drapes					
			Trash Can			Sofa					
			Cabinets, Mirrors			Table(s)					
<b>SILVER:</b>			Hair Dryers			Lamp(s)					
			Misc.			Rug(s)			TOTAL AUTOMOBILE: \$		
						Desk			GRAND TOTAL: \$		
						Bookcase					
<b>COLUMN SUB-TOTAL</b>			<b>COLUMN SUB-TOTAL</b>			<b>COLUMN SUB-TOTAL</b>					

\*Items valued at over \$500 per item/set must be listed as High Value Items on a separate sheet.

Please insure my shipment for \$ \_\_\_\_\_ which is the estimated replacement cost at destination of everything that I wish to insure in my shipment. By accepting this Valued Inventory List, I am verifying that it is true and authorize Pac Global Insurance Brokerage, Inc to insure my household goods and personal effects subject to the Terms and Conditions of the Policy.

Signature \_\_\_\_\_

Date \_\_\_\_\_