

**UNICOVER APPLICATION**  
**FOREIGN EFFECTS FLOATER AND TRANSIT INSURANCE**  
(Please Print)



**Eligibility:** U.S. and Canadian citizens residing outside the United States and Canada.

Name: \_\_\_\_\_

Employer: \_\_\_\_\_

Overseas Assignment: \_\_\_\_\_  
(City & Country)

Position/Title: \_\_\_\_\_

Number of family members: \_\_\_\_\_  
(Please include Country and City codes for all phone numbers.)

Work Phone: \_\_\_\_\_

FAX: \_\_\_\_\_

Home Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Overseas Residence Address  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mailing Address (If different from residence)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Plan A:** Insures goods in residence abroad, commercial storage and while in transit to your assignment.

**Plan B:** Insures goods in residence abroad and commercial storage. Transit is excluded.

**Section SCHEDULED PROPERTY**

The term "scheduled property" refers to any individual item, and pairs or sets of items, with a replacement cost of \$2,000 or more. All scheduled property must be declared at the time of application. In addition, an inventory of scheduled property with a detailed description and associated cost must be provided to UNIRISC within one month of the effective date of the policy. For your convenience, we can accept copies of sales receipts or past appraisals in place of the itemized list. Show the values of your scheduled property in the table below. Use the columns to indicate the location of the property after the move.

CATEGORY	RESIDENCE	STORAGE LOCATION 1	STORAGE LOCATION 2
Antique furniture	\$	\$	\$
Breakables (glass, china, crystal or marble)	\$	\$	\$
Coin and stamp collections*	\$		
Computers/electronics	\$	\$	\$
Furs*	\$		
Jewelry*	\$		
Musical instruments	\$	\$	\$
Oriental rugs	\$	\$	\$
Silver	\$	\$	\$
Works of art	\$	\$	\$
Other	\$	\$	\$
<b>TOTAL - SCHEDULED PROPERTY</b>	\$ ①	\$ ②	\$ ③

**Section 2: UNSCHEDULED PROPERTY**

The term "unscheduled property" refers to any item, and pairs or sets of items, with a replacement cost under \$2,000. Show the values of your unscheduled property in the table below. Use the columns to indicate the location of the property after the move.

UNSCHEDULED PROPERTY	RESIDENCE	STORAGE LOCATION 1	STORAGE LOCATION 2
Jewelry*	\$		
Property excluding jewelry	\$	\$	
<b>TOTAL - UNSCHEDULED PROPERTY</b>	\$ ④	\$ ⑤	\$ ⑥

\* Note: Coin and stamp collections, furs, and jewelry are not covered while in transit or commercial storage. Coverage applies while in residence abroad and up to \$5,000 as accompanied baggage.

**Section 3: TRANSIT COVERAGE**

Packing Date: \_\_\_\_\_

If we are to insure transit under Plan A, complete the table below. Use the space to indicate the origin, destination and mode of shipment. Indicate the mode of transit by circling the correct letter. **S = Surface**, and **A = Air**

	POINT OF ORIGIN	FINAL DESTINATION	MODE (Circle one)
1.			S A
2.			S A
3.			S A

**Section 4: STORAGE COVERAGE**

Are we to insure storage?  No  Yes If yes, please provide the name and address of warehouse(s) below.

Name and Address of Storage (Location 1)

Name and Address of Storage (Location 2)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Section 5: PREMIUM CALCULATION**

FLOATER	REPLACEMENT VALUE	RATE (PER ANNUM)		PREMIUM	
		SELECT ONE OF THE FOLLOWING PLANS: PLAN A 0.023      PLAN B 0.011			
Total of All Property (Add ①, ②, ③, ④, ⑤, and ⑥ from reverse.)	\$	x .0230	or x .0110	\$	A
Special High-Risk Area Surcharge <sup>1</sup>	\$			\$	B
Special High-Risk Transit Surcharge <sup>2</sup>	\$			\$	C
<b>FOREIGN COMPREHENSIVE PERSONAL LIABILITY</b> (NOT VALID IN UNITED STATES OR ITS POSSESSIONS):					
You automatically receive \$25,000 in personal liability coverage. This limit can be increased for an additional premium. Choose the desired limit from the combo box below. The premium will be shown to the right.				\$	D
<b>PREMIUM DUE:</b> Note, minimum premium is \$100. (Add premium in rows A thru D, and enter here.)				\$	

Signature: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Full payment is due with application. Please make your check payable to **UNIRISC, Inc.**, and mail to:  
**2000 N. 14<sup>th</sup> Street; Suite 500; Arlington, VA 22201**  
 or for immediate coverage complete the credit card information below and fax to **703/524-7559**

VISA     MC    Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**E-Mail inquiries to [unicover@unirisc.com](mailto:unicover@unirisc.com).**

<sup>1</sup> Special surcharge applies to property in high-risk countries. Property in storage in the U.S. and Canada or other low-risk areas are exempt. Contact UNIRISC to determine if this section applies to you.  
<sup>2</sup> Special transit surcharge applies to property destined for high-risk countries only. Contact UNIRISC to determine if this section applies.

**PLEASE RETAIN A COPY OF THIS APPLICATION FOR YOUR RECORDS.**