

**Goods in transit insurance cost form**

To obtain a quotation for the cost of this insurance, please complete the following and e-mail to insurance@exeter.ac.uk

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| --- | --- |
| Name |  |
| Contact number |  |
| Description of item to be transported |  |
| Replacement cost of item to be transported |  |
| Outward/first journey:Date and starting place of journeyDate and ending place of journey | Date | Place |
| Date | Place |
| Method of transport (eg UK post/UK courier/air freight/marine freight) |  |
| Return leg (if applicable)Date and starting place of journeyDate and ending place of journey | Date | Place |
| Date | Place |
| Method of transport (eg UK post/UK courier/air freight/marine freight) |  |