Foreign Shipment Insurance
CAMPUS: UC SAN DIEGO

- Shipments over $5,000,000 require a three week notice.
- A two week notice is required for shipments to: Afghanistan, Angola, Cuba, Ethiopia, Iran, Iraq, Lebanon, Liberia, Libya, Myanmar, Nicaragua, Nigeria, North Korea, Rwanda, Sierra Leone, Somalia, Sudan, Uganda, and countries comprised by the former territories of USSR and/or the Federal Republic of Yugoslavia and/or Republic of Serbia and any other country where their local legislation decrees insurance must be effected locally unless specifically declared and accepted by insurers prior to shipment.

Note: Alaska and Hawaii are considered foreign shipments.

*Request date:__________________   *Shipment date:____________________

*Requested by:__________________________________________________  *Phone:________________

*Shipped from:____________________________________________________ (City and state, or city and country)

*Shipped to:______________________________________________________ (City and state, or city and country)

*Shipped by:  Air_____   Sea_____(Name of Ship)____________________

*Shipping/Airline Company:__________________________________________

*Merchandise:_____________________________________________________

_____________________________________________________________________
(Only scientific equipment and related data processing equipment will be covered)

*Equipment (new or used):____________________________________________

Shipping weight:_______________  *Number of containers:_______________

*Packed by:_______________________________________________________

Highest value of any one container:____________________________________

*Value insured:___________________________________________________

(Original purchase price, plus 10% of invoice, plus shipping and freight cost)

P.O., Shipping Request, B/L, or Air Bill #________________________________

*Index:_________________/*Fund:_________________/Org:_________________

Approved:________________________________________________________

Risk Manager’s signature

*Mandatory – required information.

FAX completed form to Risk Management (858) 534-5202 or email to ehsrisk@ucsd.edu

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