



CERTIFICATE OF INSURANCE FOR LOCAL MOVING

E
(For Assured)

To NIPPONKOA INSURANCE CO., LTD.
UNITED STATES BRANCH
14 WALL STREET, SUITE 812, NEW YORK, NY 10005
TEL (212)405-1650 FAX (212)364-5336

NIPPON EXPRESS, U.S.A., INC.

Ref No.

Certificate No. ULM **00001**

Date:

INSURED	ADDRESS (TO) (転入先住所)	
	INCEPTION DATE (発送日)	

This is to certify, in consideration of premium the below as agreed to be paid, this Company insured under Open Policy No. JFMO 488K340-1 for Nippon Express U.S.A., Inc. for the sum of the same as Amount Insured.

As for any insured items which value over US\$1,000, please list insured Goods and amount insured, replacement value bases, as below. In case of loss or damage of insured items which are not listed below, this insurance is not to pay more than US\$1,000. Please be advised that this insurance will not cover your valuable such as Jewelry, Money, Securities, Deeds, Accounts, Bills, and other evidence of debt. Please see overleaf for more information.

お荷物のうち価額がUS\$1,000を超える物につきましては、その品名と価額を下欄にご記載下さい。記載の無いお荷物につきましては、1組または1個あたりのお支払い額はUS\$1,000が限度となります。貴金属、現金等の貴重品および株券、証書、勘定書、為替等の証明書は、当該保険の対象とはなりませんのでご注意下さい。なお、詳細につきましては裏面をご参照下さい。

<Scheduled Goods and Over US\$ 1,000 Goods>

Scheduled Goods	Declared Value	Declared Goods	Declared Value
Personal Computer	US\$	(Other than the scheduled)	US\$
Dining table and chairs	US\$		US\$
Sofas and table	US\$		US\$
Musical instruments	US\$		US\$
Silverware	US\$		US\$
Golf equipment	US\$		US\$

Total Value of Over \$1,000 Goods Total	US\$	①
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Total Value of Under \$1,000 Goods Total	US\$	②
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TOTAL VALUE OF GOODS	US\$	
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① + ②

Premium	※ US\$	③
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\$1 per \$1,000 of value

Premium	※ US\$	④
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\$1 per \$1,000 of value

TOTAL PREMIUM (保険料)	※ US\$	
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※ Office use only ③ + ④

This contract of insurance shall be governed by the maritime law of the United States of America and by the laws of the State of New York to the extent that federal maritime law is not applicable. All disputes arising under this Certificate of Insurance shall be submitted to the exclusive jurisdiction of the United States District Court for the Southern District of New York.

We do not share privacy information with unaffiliated third parties except as otherwise permitted by law.

IN WITNESS WHEREOF, the said Company has caused these Presents to be signed by its duly authorized representatives but this Certificate shall not be valid unless countersigned by an authorized representative of this Company or of the Assured.

Countersigned: NIPPON EXPRESS U.S.A., INC.

By _____ Date _____
Authorized Representative

NIPPONKOA INSURANCE CO., LTD.
UNITED STATES BRANCH

President
NIPPONKOA INSURANCE
COMPANY OF AMERICA