

**AYODHYA PACKERS AND MOVERS**Shop No. 170, Kailash Kuti, Talawali Chanda, A.B. Road, Indore, Madhya Pradesh, India  
453771

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Website: <https://www.ayodhyapackers.com/> Email: [info@ayodhyapackers.com](mailto:info@ayodhyapackers.com)**SPECIAL CONTRACT FORM FOR FREIGHT ON VALUE (FOV)**

LR No.: 236

Mobile No.: 7834987654

From: **DEVRAJ PAL (INDORE)**

To

The Manager

**AYODHYA PACKERS AND MOVERS**

Dear Sir,

I request you to arrange the insurance coverage for my Household Goods which is to be transported from **INDORE** to **MUMBAI** under given clause

**AT CARRIER RISK FOR ALL RISK**

Covers comprehension and claim will be settled by carrier under you regular arrangement. The Premium @ **3%** (inclusive of Service charges). While no separate receipt / policy from insurance company will be given as claim. If any will be setteled by the carrier.

The coverage should be made for clause No. 62 and i am ready to make the premium @ **3%** for value **Rs. 200000 for Household Goods**. The list of valuation of individual article (Depriciated value) is enclosed. I have gone through the detail very well and agreed the terms and conditions.

**DEVRAJ PAL**

Thanking You

Your's Faithfully

Your Signature

Date: 10-06-2026