

College of Insurance
Insurance Institute of India, Kolkata
Classroom Training Session on Managing Marine Cargo
Underwriting and Claims (CT-MMCU&C) - Program ID - CPG8
(From: 16th to 17th June, 2022)

Relevance of the Program:-

There are great challenges in managing Marine Cargo Insurance for its shrinking contribution to premium portfolio and complex and international nature of covers and claims. The Challenges are multiple including underlying economic conditions, trends in misappropriation claims, concentration of Cargoes and changing terms and conditions. COVID Pandemic had its impact too. Though the premium of Marine Portfolio is showing positive trend but the complexities in managing this portfolio remained the same. The program has been designed to understand the complexities and challenges in underwriting and Claim management.

Program Objectives:-

The Program is of two days duration. It aims at making the participants aware of –

- An overview of Marine insurance and trend in India
- Proper understanding of Institute Cargo Clauses
- Understanding various Non-Institute Clauses and Commodity Clauses
- Managing Marine Cargo Claims
- Identifying and managing fraudulent claims Understand the nuances of handling notices and claims

Participant's Profile:-

The Program is designed for Executives from Insurance Companies, Brokers, IMF, Surveyors and Customers having large Marine Cargo portfolio.

Course Coordinator:-

Mr Basant Nayak, Principal – 033-23248100/101, 8335080196

Email: bk.nayak@iii.org.in

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Program Duration & Timing: -

2 days & from 10.00 a.m. to 04.30 p.m.

Course Fees:-

- **Participants requiring residential facilities: Total amount Required –Rs. 11800-i.e. (Rs. 10000/- plus 9% CGST + 9% SGST).**

The fees cover tuition, course material, A/C single room accommodation (tea/coffee, breakfast, lunch, light refreshments in the evening and dinner). All rooms are fully furnished with attached bathroom and Internet facility. Transport facilities will be arranged for the training centre.

Rooms are reserved from 12.00 noon onwards the day prior to the commencement of the program. The participants can stay till 12.00 noon next day after the conclusion of the program.

- **Non-residential participants: Total amount Required –Rs. 8496/-i.e. (Rs. 7200/- plus 9% CGST + 9% SGST).**

The fees cover tuition, course material and day boarding (i.e. tea/coffee during tea breaks and lunch for actual days of training).

Payment Terms and Conditions:-

- 1) The payment should be received by the College of Insurance before the commencement of the program.
- 2) The confirmation of registration for the program will be subject to receipt of payment.

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3) Please see below details for Bank Transfer.

Name of the Beneficiary	Insurance Institute of India
Account No.	004010100143462
IFS Code	UTIB0000004
MICR Code	400211002
Swift Code	AXISINBB004
Name of Bank	Axis Bank Ltd
Address	Fort Branch, Universal Insurance Building, Ground Floor, Sir P M Road, Fort, Mumbai – 400001.

4) For online payment mode by following the below link

https://www.coi.org.in/COI_WebPortal/cmc/eventDetails?eventid=1522

Training Venue:-

Please follow below link for Training Venue

<https://www.google.com/maps/place/Synthesis+Business+Park/@22.599688,88.47241,13z/data=!4m5!3m4!1s0x0:0xec3dd61dcbaa87f5!8m2!3d22.5996878!4d88.4724099?hl=en-US>

Address:

Insurance Institute of India
2nd Floor – 2A & 2C,
CBD/1, Synthesis Business Park,
Action Area II, Newtown,
Kolkata – 700 156.

 **Parking Facility: "Limited Parking Facilities are available".**

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Nomination Form

- 1) Name: _____
- 2) Address: _____

- 3) Educational Qualification: _____
- 4) Date of Birth: _____
- 5) Position Held.: _____
- 6) Mobile No : _____
- 7) Telephone No. : _____
- 8) E-Mail: _____
- 9) Alternate E-Mail: _____
- 10) Sponsoring Organisation: _____

Please
affix your
photograph
here

- 11) Food preference: Vegetarian Non-Vegetarian
- 12) Accommodation Required: Yes No

- 13) Details of Fee Paid: Cheque / D.D. No. _____ dt. _____
Drawn on _____ Bank, for Rs. _____

Signature & seal of the authority
of the Sponsoring organisation

Signature of the Participant

*Name of Co-ordinator: _____

Mobile No: _____ Tel. No.: _____

Email-Id.: _____ Company Name: _____

*This column is mandatory for those participants who are sponsored by company.