



PACIFIC MARINE UNDERWRITING MANAGERS LTD

Name of Brokerage \_\_\_\_\_

Branch \_\_\_\_\_

Contact \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

**SPORT BOAT/YACHT APPLICATION**

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**CLIENT INFORMATION**

Name of Owner(s) \_\_\_\_\_ Age \_\_\_\_\_ Occupation \_\_\_\_\_

Street Address \_\_\_\_\_

Mailing Address if Different \_\_\_\_\_

**LOSS HISTORY AND EXPERIENCE OF OWNER(S)/OTHER OPERATOR(S)**

Years of Owned Experience with Boats \_\_\_\_\_ Years of Non-owned Experience with Boats \_\_\_\_\_

Types of Boats Operated \_\_\_\_\_ Size of Boat \_\_\_\_\_

Boating Courses or Other Experience \_\_\_\_\_

Has Insurance Been Declined or Cancelled? \_\_\_\_\_ Loss History past 5yrs: \_\_\_\_\_

Amount Paid \_\_\_\_\_

List all auto moving traffic and at fault accidents per operator in past 3 years:

Description \_\_\_\_\_

Date of Accident \_\_\_\_\_ Date of Conviction \_\_\_\_\_ Current Driver's License? \_\_\_\_\_

**VESSEL INFORMATION**

Name of Boat \_\_\_\_\_

Registration No. \_\_\_\_\_ License No. \_\_\_\_\_ Hull Identification No. \_\_\_\_\_

Purchase Date \_\_\_\_\_ Purchase Price \_\_\_\_\_ Survey Date \_\_\_\_\_

Manufacturer \_\_\_\_\_ Model \_\_\_\_\_ Length \_\_\_\_\_ Width \_\_\_\_\_

Year Built \_\_\_\_\_ Current Market Value \_\_\_\_\_ Replacement Value \_\_\_\_\_

Type of Boat:  Sailboat  Cruiser  Houseboat  Runabout  Ski Boat  Catamaran/Trimaran

Construction:  Fiberglass  Aluminum  Steel  Wood  Fabric  Fiberglass Over Wood  Other

Cruising Speed in MPH \_\_\_\_\_ Max Speed in MPH \_\_\_\_\_

Moorage Location \_\_\_\_\_

Storage Location if Different \_\_\_\_\_

Navigation area \_\_\_\_\_

Vessel Use:  Pleasure Use Only  Business Use  Live Aboard  Charter Use

**MAIN ENGINE DETAILS**

Make \_\_\_\_\_ Model \_\_\_\_\_ Serial Numbers \_\_\_\_\_

Age of Engines if Different from Vessel \_\_\_\_\_ Horsepower \_\_\_\_\_

Type:  Inboard Gas  Inboard/Outboard Gas  Inboard Diesel  Outboard  Jet Drive

Value of Motor if it is an Outboard \_\_\_\_\_ Rebuilt Date \_\_\_\_\_ Fire Fighting System \_\_\_\_\_



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**VESSEL EQUIPMENT**

**Equipment Details:**  Cabin Heat \_\_\_\_\_ fuel used       Hot Water Heat \_\_\_\_\_ fuel used  
 Cook Stove \_\_\_\_\_ fuel used       Refrigerator \_\_\_\_\_ fuel used

**Electronics:**     Compass     VHF     GPS     Sounder     Auto Pilot

**Alarms:**         Bilge         Engine Heat     Fume Detector     Oil Pressure

**Fire Extinguishers:** Number of extinguishers \_\_\_\_\_ Do They Meet Current Coast Guard Standards? \_\_\_\_\_

**Dinghy/Tender Info:** Manufacturer \_\_\_\_\_ Model \_\_\_\_\_ Age \_\_\_\_\_ Current Value \_\_\_\_\_ Serial Numbers \_\_\_\_\_

**Aux. Motor Info:**    Manufacturer \_\_\_\_\_ Model \_\_\_\_\_ Age \_\_\_\_\_ Horsepower \_\_\_\_\_  
Current Value \_\_\_\_\_ Serial Numbers \_\_\_\_\_

**Trailer Info:**        Manufacturer \_\_\_\_\_ Age \_\_\_\_\_ Current Value \_\_\_\_\_ Serial Numbers \_\_\_\_\_

**Boathouse Info:**    Construction \_\_\_\_\_ Age \_\_\_\_\_ Current Value \_\_\_\_\_

**COVERAGE LIMITS REQUESTED**

	Limit	Deductible	Premium
Hull & Machinery (Incl. Electronic Nav. Equipment)	_____	_____	_____
Main Outboard Motor	_____	_____	_____
Auxiliary Motor	_____	_____	_____
Tender/Dinghy	_____	_____	_____
Reimbursement of Emergency Expenses	_____	_____	_____
Personal Effects	_____	_____	_____
Boathouse	_____	_____	_____
Trailer	_____	_____	_____
Protection & Indemnity Liability	_____	_____	_____
Uninsured/Underinsured Boater Protection	_____	_____	_____
Medical Payments	_____	_____	_____
Other	_____	_____	_____
<b>TOTAL PREMIUM</b>			_____

Start Date \_\_\_\_\_ Expiry Date \_\_\_\_\_ Previous Insurer \_\_\_\_\_ Policy Number \_\_\_\_\_

Loss Payee Name \_\_\_\_\_ Address \_\_\_\_\_

Broker Signature \_\_\_\_\_ Client Signature \_\_\_\_\_ Date \_\_\_\_\_

Remarks: \_\_\_\_\_

**DISCLOSURE STATEMENTS**

I understand that the above information is correct and complete to the best of my knowledge, is to be the bases of this insurance, if granted, but does not obligate me to accept the insurance nor for the company to accept the risk.

Where (a) an Applicant for this contract gives false particulars to the prejudice of the insurer or knowingly misrepresents or fails to disclose any fact in any part of this application required to be stated therein; or the Insured contravenes a term of the contract or commits a fraud; or (c) the Insured willfully makes a false statement in respect of a claim, a claim will become invalid and the Insured's right to recovery is forfeited. The Applicants have reviewed all parts and attachments of this application and acknowledge that all information is true and correct and understand that this application for insurance is based on the truth and completeness of this information. I have provided personal information in this document and otherwise and I may in the future provide further personal information. Some of this

personal information may include, but is not limited to, my credit information and claims history. I authorize my broker or insurance company to collect, use and disclose any of this personal information, subject to the law and to my broker's or insurance company's policy regarding personal information, for the purposes of communicating with me, assessing my application for insurance and underwriting my policies, evaluating claims, detecting and preventing fraud, and analyzing business results. I confirm that all individuals whose personal information is contained in this document have authorized that I agree to the above on their behalf.