

YACHT & MOTOR BOAT INSURANCE PROPOSAL FORM

Name of Vessel : _____

Type : _____ Date of Purchase : _____

Tonnage (T.M.) : _____ Price Paid : _____

When Built : _____ Builders Name : _____

Length : O.A. _____ W.I. _____

Beam : _____ Draft _____

Material of Hull : _____

Sail Area : _____ Type of Reg. _____

Do you wish to cover Mast, Spars, Sails and Rigging whilst racing?

If so give current replacement value including all sails carried on board whether set or not.

Will the vessel be used as a Houseboat when Laid Up? _____

Do you wish to cover road transit risks? _____

Do you require a deductible in the policy

If so, for what amount ? (i.e., you bear the first so much of each claim.) _____

What amount of THIRD PARTY LIABILITY do you require? _____

Do you wish to include liability to and of water skier(s)

If so, for what amount? _____

If vessel is on charter, do you require liability to and of passengers ?

If so, for what amount? _____

Do you ever sail single-handed? _____

Present Value

Hull, Machinery, Equipment etc., :

Dinghy &/or Boats :

Life crafts :

Outboard Motor :

Total to be Insured _____**Make of Engine(s)** _____ **Date** _____State if (marine engine
(conversion
(outboard _____
(Jet**Designed Maximum Speed** _____

Is the Engine Turbo charged? _____

Fuel used for main and auxiliary machinery _____

Is Calor or other bottled gas used? _____

If so, state material of delivery tubing. _____

What fire extinguishers are kept on board ? No. _____ Type _____

For vessels with inboard machinery exceeding 17 Knots.**Please state full details of fire extinguishers fitted in**

(a) Engine Room or Engine Space : _____

(b) Tank Space : _____

(c) Galley : _____

Please quote Registered No. of O/B Motor _____**Do you wish to cover outboard motor against dropping off and falling overboard?** _____**1. (a) Proponent full name**
(Please write in block letters) : _____

(b) **Proponent address** : _____

(c) **Office telephone Number** : _____

(d) **Proponent Occupation** : _____

(e) **Nationality** : _____

2. How long have you been accustomed to the land craft? _____

3. Will the vessel be used for private pleasure purposes only? _____

4. What Professional Crew is Carried? _____

5. State period for which the vessel is to be insured _____

(a) in commission (b) _____ Months From _____ To _____

(b) Laid-up (b) _____ Months From _____ To _____

6. (a) Where is the vessel moored when in commission: _____

(b) Where will she be Laid-up : _____

(c) Will the vessel be Laid-up

(i) Ashore? (ii) In mud berth? (iii) Afloat? (iv) Marina? _____

7. What accident have you had during the past five years in connection with any vessel you have sailed or owned? Give particulars.

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8. **Have you ever had an Insurance for any vessel**

(a) Declined ? (b) Cancelled ? (c) Renewed only at an increased rate ? (a) (b) (c)

If so, please state the name of the company and reasons _____

9. Please state your present No Claim Bonus allowance
(Not applicable to Craft valued over £ 100,000 or Equivalent SR) _____

10. Vessel's Port of Registry or Home Port _____

DECLARATION:

Have you or any person who have allowed or may allow to use your craft, ever been charged with or convicted for any offence involving dishonesty or any kind e.g., fraud, arson, robbery, smuggling, theft or handling stolen goods?

YES Details _____

NO _____

Please state your previous Insurance Company : _____

I hereby declare that the above particulars and answers are correct and complete in every aspect and that I have not withheld any information which might influence the decision of the Underwriters in regard to the proposal, and I agree that this proposal and declaration shall form the basis of the contract of Insurance between me and the Underwriters, if a contract is concluded.

(The signing of this form does not bind the Proponent to complete the Insurance).

Proponent Signature _____ **Date** _____

Signed _____ **Date** _____
(If Joint Owners)

IMPORTANT NOTICE

1. Answer questions to the best of your knowledge and belief.
- 2 All material facts must be disclosed, as failure to do so may nullify any Policy or Certificate issued.

N.B. : A material fact is one likely to influence acceptance or assessment of this proposal by Underwriters. If you are in any doubt as to what constitutes a material fact you should consult your Broker.

- 3 If you consider that any question requires expert knowledge which you are unable to provide, indicate this in your answer.
4. A copy of the Policy/Certificate wording is available from your Broker on request.