

| Applicant | | | | | | | | | | | | | | |
|--|--|--------|--|--|--------|--|-----|------------------|---------------|---|--|-----|--|--|
| Name | | | | | | | | | | | | | | |
| Street | | | | | | | | | | | | | | |
| Street | | | | | | | | | | | | | | |
| City | | | | | State | | | | | | | | | |
| Zip | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Residence | | | | | | | | | | | | | | |
| Business | | | | | | | | | | | | | | |
| Fax | | | | | | | | | | | | | | |
| Cell | | | | | | | | | | | | | | |
| E-Mail | | | | | | | | | | | | | | |
| Registered Owner of Vessel (if different) | | | | | | | | | | | | | | |
| | | Name | | | | | | | | | | | | |
| | | Street | | | | | | | | | | | | |
| Lienholder | | | | | Street | | | | | | | | | |
| Name | | | | | City | | | | State | | | | | |
| Street | | | | | Zip | | | | | | | | | |
| Street | | | | | | | | | | | | | | |
| City | | | | | State | | | | Phone | - | | | | |
| Zip | | | | | | | Fax | | - | - | | | | |
| Named Operators | | | | | | | | | | | | | | |
| First | | | | | Middle | | | | Last | | | DOB | | |
| Drivers Licence | | | | | | | | Date of Last MVR | | | | | | |
| Years Operated | | | | | USPS # | | | | Coast Guard # | | | | | |
| | | | | | | | | | | | | | | |
| First | | | | | Middle | | | | Last | | | DOB | | |
| Drivers Licence | | | | | | | | Date of Last MVR | | | | | | |
| Years Operated | | | | | USPS # | | | | Coast Guard # | | | | | |
| | | | | | | | | | | | | | | |
| First | | | | | Middle | | | | Last | | | DOB | | |
| Drivers Licence | | | | | | | | Date of Last MVR | | | | | | |
| Years Operated | | | | | USPS # | | | | Coast Guard # | | | | | |
| | | | | | | | | | | | | | | |



| Vessel Information | | | | | | | | | | | | |
|--|------|------|-----------------------------|------------------|-------|---------------------|-------------|-----------|------|---------|--|--|
| Year | | Make | | Model | | Length | | | | | | |
| Name | | Reg# | | Ser# | | Speed | | | | | | |
| Unrepaired damage Y/N | | | | If Yes, explain: | | | | | | | | |
| Previously Repaired? Y / N | | | | If Yes, explain: | | | | | | | | |
| Vessel modified? Y / N | | | | If Yes, explain: | | | | | | | | |
| Type | Sail | | | Power | | | | | | | | |
| Configuration | | | Construction | | | | Last Survey | | | | | |
| Multi Hull | | | Fiberglass | | | Date Purchased | | | | | | |
| Performance | | | Wood / Wood over Fiberglass | | | New | | Used | | | | |
| Runabout | | | Aluminum | | | Price including tax | | | | | | |
| Cruiser / Yacht | | | Steel | | | | | | | | | |
| Bass | | | Other | | | | | | | | | |
| Other | | | Boat has metal flake finish | | | | | | | | | |
| Engines / Trailer / Accessories | | | | | | | | | | | | |
| Fuel | Gas | | | Diesel | | | Other | | | | | |
| Outboard | | | Inboard/Outboard | | | Inboard | | Jet Drive | | Turbine | | |
| 1 | Year | | Make | | Model | | HP | | Ser# | | | |
| 2 | Year | | Make | | Model | | HP | | Ser# | | | |
| 3 | Year | | Make | | Model | | HP | | Ser# | | | |
| 4 | Year | | Make | | Model | | HP | | Ser# | | | |
| Are Engines modified or customed Y / N | | | | | | Total HP | | | | | | |
| Trailer | | | | | | | | | | | | |
| Year | | Make | | Ser# | | Value | | | | | | |

| Accessories - Tender | | | | | | | | | | | | |
|----------------------|--|------|--|-------|-------|--------|--|--|--|--|--|--|
| Year | | Make | | Model | | Length | | | | | | |
| Ser# | | | | | Value | | | | | | | |
| Accessories - Engine | | | | | | | | | | | | |
| Year | | Make | | Model | | HP | | | | | | |
| Ser# | | | | | Value | | | | | | | |

Accessories continued...

Accessories - Other

| | | | |
|---|--|-------|--|
| 1 | | Value | |
| 2 | | Value | |
| 3 | | Value | |

Operation / Storage

| | | | |
|-------------------|--|-------|--------------------------|
| Mooring Address | | Layup | |
| Area of operation | As stipulated in standard policy wording | | NAVIGATION LIMITS |
| | Other than above | | |

Describe other

| Safety Equipment | | | Appliances | | | | | | | | | |
|--------------------|--|--|---------------------------------------|--|---------------|-------------|--|--|-------------|---------------|--|--|
| Alarm | | | Stove | | | Electric | | | Propane | | | |
| Boomerang | | | Heater | | | Electric | | | Propane | | | |
| Prop Lock | | | Fridge | | | Electric | | | Propane | | | |
| Trailer Wheel Lock | | | If any Propane, check all that apply: | | | | | | | | | |
| Drive Lock | | | | | | Pilot Light | | | | Auto shut off | | |
| Other | | | | | Emer shut off | | | | Gas sniffer | | | |

Schedule of Insurance

| Coverage | Limit | Ded. | Rate | S/C | | Premium |
|------------------------|-------|------|------|-----|--|---------|
| Hull & Machinery | | | | | | |
| Outboard Motor(s) | | | | | | |
| Tender & Outboards | | | | | | |
| Trailer | | | | | | |
| Personal Effects | | | | | | |
| Protection & Indemnity | | | | | | |

Endorsements

| | | |
|---|--|--|
| 1 | | |
| 2 | | |
| 3 | | |

| | | |
|--|----------------------|--|
| | Total Premium | |
|--|----------------------|--|

| Insurance History | | | | | | | | | |
|---|-------------|--|---|--------|---------------------------|--|--------|-------------|--|
| Previous Insurer | | | | | Ever been Cancelled Y / N | | | | |
| Policy # | | | | | If Yes, explain: | | | | |
| Expiry Date | | | | | | | | | |
| Claims | | | | | | | | | |
| Date | Description | | | | | | Amount | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Policy Information (Internal Use Only) | | | | | | | | | |
| Policy # assigned | | | | | | | | | |
| Replacing Policy # | | | | | | | | | |
| Policy Period | From | | | | Time | | | | |
| | To | | | | | | | | |
| Billing | | | Payment Plan (Internal Use Only) | | | | | | |
| Company | | | | Annual | | | | Credit Card | |
| Broker / Agency | | | | | | | | Debit | |
| NOTES | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Declarations and Signature | | | | | | | | | |
| <p>The undersigned represents and warrants to the insurer, either as the registered owner, or as the person duly authorized by the registered owner to complete and sign this application on its behalf, that the statements set forth in this Application are true and correct and acknowledges that the insurer is relying solely upon such representation and warranty as the basis for any insurance that may be granted to the applicant.</p> <p>The undersigned agrees that:</p> <ol style="list-style-type: none"> 1) the signing of this application does not bind them, the registered owner or the insurer to effect insurance; 2) if there is any change to the information supplied on this application between the date of this application and the effective date of the policy, notification will be sent in writing to the insurer, and any outstanding quotation may be modified or withdrawn; and 3) the insurer is hereby authorized to make any investigation and inquiry in connection with this application that it deems necessary. | | | | | | | | | |
| | | | | | | | | | |
| <p>Any person, who knowingly or with intent to defraud any insurance company or other person, files an application for insurance containing false information, or conceals for the purpose of misleading the insurer, information concerning any fact material thereto, commits a fraud.</p> | | | | | | | | | |