



Charter Party
Head Boat
Excursion
Ferry

Owner and mailing address _____

Name of Vessel _____

Type of Vessel _____

General description of operation _____

Loss, if any, payable to Insured and _____

HULL:

Year built _____ Built by _____ Home port _____

Official No _____ Registered Length _____ Width _____ Depth _____

Material of hull _____ Registered tonnage: Gross _____ Net _____

MACHINERY:

Manufacturer _____ Gas _____ Diesel _____ Yr Built _____ Horsepower _____

Describe auxiliary engine(s) _____

Describe quantity & location of any gasoline aboard (other than for main engine) _____

SAFETY EQUIPMENT:

Describe fire extinguisher equipment _____

Describe bilge pump equipment _____

Make and location of stove(s) _____ Fuel _____ Tank location _____

Other safety equipment: Ship to shore radio Electronic depth finder Radar
RDF Other (describe) _____

CREW AND PASSENGER INFORMATION:

Names, experience and licenses (if any) of operator(s), (i.e. Captain and Chief Engineer) _____

Total number of crewmen (including above) _____

If more than one watch is involved, indicate number per watch _____ and number of watches _____

Identify by name and position those crewmen having ownership interest in Vessel _____

Is Vessel licensed by Coast Guard to carry passengers _____ Date of license _____ Date of last Coast Guard Inspection _____

Navigation limits permitted by license _____

PASSENGER CARRYING VESSELS HULL AND LIABILITY APPLICATION

Maximum number of passengers permitted by US Coast Guard _____ Average number carried _____

Describe length of frequency of trips _____

GENERAL INFORMATION:

Date Vessel purchased _____ From whom _____ Purchase price _____

Improvements since purchase _____

Present day value _____ Approximate cost to build today _____ Amount of mortgage _____

Date last hauled _____ Where _____ Work done _____

How often is Vessel overhauled _____

Navigation limits desired _____

Lay-up period(s), if applicable _____

Describe watchman service provided when Vessel laid-up _____

Management (Describe experience & length in business) _____

Gross earnings of this Vessel in previous year _____

Does this placing include all Vessels operated by the prospective insured or affiliated or subsidiary companies - if not, explain

Has any Company ever cancelled or declined to renew insurance on this Vessel _____

Is Vessel now insured _____ If "yes", name Company, deductible and insuring conditions _____

Where & when can the Vessel be inspected _____

Name & telephone number of contact _____

LOSS INFORMATION: Give following information regarding all losses for past five calendar years occurring on this Vessel, any other presently owned Vessel(s) and any previously owned Vessel(s):

<u>Date</u>	<u>Nature of Losses:</u> (Including Name of Claimant of P&I)	<u>Paid and/or Outstanding Claims</u>
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COVERAGE DESIRED:

Effective Date _____

Hull (named perils): Amount of insurance \$ _____

Protection and Indemnity (Single limit) \$ _____

- Including crew and passengers
- Passengers only (excluding crew)
- Third party liability only (excluding crew and passengers)

At least a 1% Hull deductible (\$250 minimum) in mandatory. Indicate other preferences:

2% 3% Other (Specify) _____

PASSENGER CARRYING VESSELS HULL AND LIABILITY APPLICATION

GENERAL COMMENTS OR SPECIAL INSURANCE CONDITIONS YOU REQUIRE:

The completion and signing of this application **does not bind** the APPLICANT or this COMPANY to effect insurance on this risk; it is submitted for purposes of rating and quotation only, if acceptable to this COMPANY. It is agreed the information furnished herein shall be the basis of the contract should a policy be issued.

Applicant's signature _____ Agent or broker _____

Date _____ Address _____