



DETAILS OF PROPOSER

1. Insured's Full Name (Owner as stated in the certificate of registry):

2. Address:

3. Beneficial Owner (Name, DOB, nationality, country of residence):

5. Have you had any accidents, claims or losses in connection with any vessel you have sailed, owned or was under your control?

Yes No

(If Yes please provide full details, including dates and amounts paid):

6. Have you or any person you have allowed or may allow to use your yacht, ever been charged with or convicted of any offence involving dishonesty or any other offence which might affect our assessment of the risk?

Yes No

((If Yes please provide full details):

7. Have you ever had Insurance declined, non-renewed or cancelled?

Yes No

((If Yes please provide full details):

Inception Date required: _____



DETAILS OF YACHT

8. Name of vessel:

9. Type (e.g. Motor Yacht, Sailing Yacht...):

10. Date of purchase and price paid:

11. Builders:

12. Model:

13. Year of build:

14. Port of registry:

15. Flag:

16. Classification society in force (If applicable):

17. Maximum number of guests authorized onboard overnight:

18. Is the Yacht MCA Certified? (If applicable)

Yes No N/A

19. Overall Length:

20. Gross tonnage:

21. Material of hull:

22. Material of mast:

23. Engines (Make):

24. Number and horse power:

25. Maximum design speed:

26. Type of propulsion:

Shaft Line Surface Drive Water Jet IPS Other



DETAILS OF YACHT

27. Has the Yacht been professionally surveyed in the last three years?

Yes No

(Surveyor's name and date of the survey):

Have all the survey recommendations been complied with?

Yes No

28. Is the Yacht subject to finance or mortgage?

Yes No

(If Yes please advise amount of loan and name of lender):

29. Currency

USD EUR GBP

VALUES TO BE INSURED (It must match with the market value)

ITEM	VALUE
30. Yacht	
31. Tenders and water toys (Total) / list below	
32. Equipment and Personal effects	Included
33. Fine Art if applicable	
34. Total Sum Insured	

TENDER(S) / WATER TOYS EQUIPMENT DETAILS

35. DESCRIPTION	VALUE



USE OF VESSEL

36. Details of use

Private and pleasure only Skipper charter use

37. Racing and/or Regatta and/or Rally:

Yes No

(If Yes, please provide details about the racing/regatta/rally program within the 12 months of the forthcoming policy period):

38. Mooring location Home Port Spring / Summer:

39. Mooring location Home Port Fall / Winter:

40. In Commission months:

Lay up period if any:

41. Will there be any towed vessels?

Yes No

(If Yes please provide full details):

42. Required navigational limits (cruising area):



CREW DETAILS (if applicable)

43. Crew Employer Name and address (as stated in the seafarers' Employment Agreement):

44. Total Number of Crew:

45. Number of permanent Crew including Captain:

46. Number of temporary Crew:

47. Details of any U.S Nationals:

48. Captains Qualifications:

(The Captains CV and License must be submitted to Underwriters for their agreement.)

49. Captains Claims Record:

Has the Captain had any accidents, claims or losses in connection with any vessel under their control?

Yes No

(If Yes please provide full details):

DECLARATION

To the best of my knowledge and belief the information provided in connection with this proposal, whether in my own hand or not, is true and I have not withheld any material facts*. I understand that non-disclosure or misrepresentation of a material fact* may entitle underwriters to void the insurance.

*A material fact is one likely to influence acceptance or assessment of this proposal by underwriters; if you are in any doubt as to whether a fact is material or not you must disclose it.

This proposal and the information provided in connection therewith contain statements upon which underwriters will rely in deciding to accept this insurance. Should a contract of insurance be concluded this proposal will form the basis of the insurance.

Signed

Full name

Date
