

## MARINE COMMERCIAL PROPOSAL

Named Owner of Vessel Assur	ed:				
Address:		Telephone:			
Гуре of Vessel: Sailing, Motor, Catamaran, etc.)					
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Description and Use of Other V	/essels Owned:				
Date Purchase:	From Whom:		Price:		
Market Value:	Replacement Cost:				
HULL INFORMATION					
Name of Vessel:					
Manufacturer:	Hull Material:		Number of Decks:		
Year Built: Length O	verall: Width/Beam:	Draught/Depth:	Tonnage (Gross/Net:		
MACHINERY					
Number of Engines:	Inboard or Outboard:	Fuel Type:	Year of Manufacture:		
Horsepower Engine 1:	Serial Number	s:			
Horsepower Engine 2:	Serial Number	s:			

Please give a complete description of all navigational and communicational electronics on board the vessel:						
Details of Generator:(year, make, model and horseport	wer)					
	,					
CAPTAIN AND CREW	INFORMA'	TION				
Name	Age	Experience	License # and Classification			
GENERAL INFORMAT						
Length of Trips:						
Average # of trips (D/W/M):						
Is Vessel licensed to carry far If so, how many?						
		Average # of passengers carried annually: _				
Name of Present Insurer and	expiration dat	ee, if applicable:				
Has any Insurance Company	ever canceled	d, declined or refused to renew Insurance on this vessel?				
If so, please give explanation	:					
Please give history of Claims	, Accidents or	Losses within the last 5 years:				

Date Vessel was last Dry Docked and Where:
Work Performed at Last Dry Docking:
Date of Last Survey, and by Whom:
List all recommendations by Surveyor:
How often is Hull and Engine Maintenance conducted and by whom?
If Fishing, Vessel, Type of Fishing Vessel. Primarily engaged in:
Navigational Limits Required:
Is coverage required for delivery/maintenance voyages?
Vessels Home Port and Mooring:
Is vessel; tender, mothership or part of a fleet?
Is vessel ever under tow?
Does vessel transport tender, how many, how transported?
List types of life saving equipment on board:
Anticipated Gross Annual Income of Vessel:
General Comments or Special Requirements:

## **COVERAGE REQUIRED**

Hull and Machinery:			Deductible:	
Protection and Indemnity:			Deductible:	
(Indicate one) Port Risk :	Total Loss Only:	Full Cover:	Attachment Date:	
Name and Address of Mortga	agee, if applicable:			
<b>DECLARATION</b>				
	If you are in any doubt	as to whether certain fa	cts are relevant, please ask your olicy or may result in the policy	
We have read, or have had re the information given in it is			d proposal and I1we declare that rrect and complete.	
You should keep a written re- broker or agent, when enterin			ation you give us or to your	
A copy of your completed pro	oposal form will be sup	oplied on request.		
			at it is agreed that thus form shall the Company until this proposal	
Signature (s)				
If signing on behalf of a com	pany or firm please stat	te position		
Date				
Liability does not commence and premium paid except as p				

Please attach survey report, company brochure and pictures if available