



Agent No. _____

YACHT AND PLEASURE CRAFT PROPOSAL FORM

(Please use English block letters and tick the boxes as appropriate.)

Before completing this proposal please note that failure to disclose all material information (i.e. information which is likely to influence the acceptance of the risk and the terms applied), could invalidate the insurance. If you are in any doubt as to whether any information is material, it should be disclosed.

A specimen policy is available on request. Remember to sign and date the Declaration at the end of the form.

1. Proposer

a) Name (in full) _____

b) Date of Birth _____ c) Occupation _____

d) Correspondence Address _____

e) Name and Address of Mortgagee or other insured as applicable.

f) Commencement Date of Insurance _____

2. Boat Handling Experience

a) Number of years as owner of this type of craft. _____

b) Number of years as owner of any pleasure craft. _____

c) Number of years experience as crew. _____

d) What are your qualifications for boat handling? (e.g. Yacht Masters Certificate)

e) Have you or any member of your family normally residing with you, or any Professional master working on this boat or any director if the Proposer is a limited company, ever been convicted of any offence other than driving offences?

Yes No

If "Yes", please give details. _____

f) Have you or any person in (e) above suffered from diabetes, epilepsy, heart condition or any other physical or mental disability, infirmity or disease, or had any condition controlled by drugs?

Yes No

If "Yes", please give details. _____

3. a) Please provide details of all accidents, incidents, losses or insurance claims which have happened during the past five years in connection with any vessel you have sailed or owned.

b) Have you previously insured any vessel? Yes No

If "Yes", who was the Insurer? _____

c) Have you ever had an insurance on any boat cancelled, refused at renewal or renewed only at increased terms? If so, please provide details including the Insurer involved.

4. What other insurances do you have with RSA?

5. Navigating Limits

State Cruising Range required. _____

6. a) Will the vessel will be in commission throughout the year? Yes No

Whilst laid-up during the commission period the vessel will be:

Ashore Afloat on moorings at _____ (If Marina state name)

If the vessel is not kept in a Marina give details of type of mooring and precise location. _____

If moorings - Are they professionally laid and maintained? Yes No

If "Yes" by whom? _____

b) Do you require the vessel to be insured during any inland transits? Yes No

If "Yes", please provide details. _____

7. Laid Up Out of Commission

If the boat is ever out of commission, will the vessel be kept ashore or afloat? _____

Please give precise details of location if not the marina noted in (6a). _____

For what period will the vessel be laid-up? From _____ to _____ inclusive.

8. Use of Vessel

a) Will the boat be used for private pleasure only? Yes No

If "No" state intended use. _____

b) Do you have a full-time professional master? Yes No

If "Yes", please give details of his sailing experience with this type of boat, and with this particular boat. _____

c) Will the boat be sailed single-handed? Yes No

If "No" give details of crew. _____

d) Will the vessel be used for water-skiing, aquaplaning or any similar sport? Yes No

If "Yes" give details. _____

e) Will the vessel be used for racing under sail? Yes No

If "Yes" give details. _____

f) Will the vessel be used as a "liveaboard" ? Yes No

9. Hull Details

Name of Vessel _____

Type / Class _____

Licence Number _____

Material of Hull _____

Manufacturers Name _____

Year Built _____

Overall Length _____

Beam _____

Max. designed speed with present engines. _____

Main Engine Details

Type: Inboard Outboard Single Twin

Make _____ Model _____

Serial Number _____

Horsepower of Each _____

Fuel Used _____

Year of Make _____

If inboard engines, are they the original engines installed by the builder of the Hull? Yes No

If "No" attach note giving details.

Give details of any Auxiliary Outboard Motors. _____

10. Has the vessel proposed for insurance been subject to conversion, modification or amateur construction?

Yes No

If "Yes" give full details. _____

II. Security

- a) Please provide details of anti-theft security system, if any. _____
b) Give details of Outboard Motor Lock or other security device. _____
c) State how trailer is immobilised when left unattended. _____

12. Please give details of the Fire Extinguisher system.

13. Has the vessel been surveyed by a qualified surveyor within the last 12 months? Yes No

If "Yes", please supply a copy of the report.

14. Schedule of Insurance

	Value to be insured	Date Purchased	Purchase Price
Hull & Equipment including Inboard Engine (if any).			
Outboard Motor(s) to Parent Vessel.			
Dinghy / Tender to Parent Vessel (N.B. Must be permanently marked with name of Parent Vessel)			
Outboard Motor(s) to Dinghy / Tender.			
Trailer.			
Personal Effects (Max. HK\$4000 in total unless agreed).		Not Applicable	Not Applicable
Special Equipment (attach valued list).			
Total to be Insured		Not Applicable	Not Applicable

15. Third Party liability

Please state the Limit of Indemnity required. _____

Do you require cover in respect of liability to and / or of water-skiers? Yes No

16. Do you wish to bear a voluntary deductible in addition to any compulsory deductible required by the Company?

If so, please indicate the amount required.

17. Any other information which is likely to influence the Company in regard on this proposal.

Declaration

I hereby declare that, to the best of my knowledge and belief, the particulars and answers are true and correct and that I have not withheld any information which is likely to influence the decision of the Company in regard to this proposal. Signing this form does not bind the Proposer to complete the insurance but it is agreed that this form shall be the basis of the contract should a policy be issued. No liability attaches to the Company until this proposal has been accepted.

Signature of Proposer _____ Date _____