

PERSONAL UMBRELLA APPLICATION

SUBMIT

Broker:

Broker No:

Telephone:

Email:

PART 1 GENERAL INFORMATION

Applicant Full Name:

Address:

Postal Code:

Occupation:

Email address:

Quote

New Risk

Substitution of Vessel

Additional Vessel

PART 2 WATERCRAFT INFORMATION

Year built

Length

Manufacturer

Purchase Price

Purchased Date

Purchased From

Fibreglass

Wood

Aluminum

Steel

F/G over Wood

Fabric

Sailboat

Catamaran

Trimaran

Houseboat

Inflatable

Cruise-a-Home

Powerboat

In/out motor

Outboard motor

Inboard Motor

Jet Motor

Electric

Main Engine Year

Manufacturer

HP

Gas

Diesel

Serial No.

Current Market Value

Aux. O/B Motor Year

Manufacturer

HP

Gas

Diesel

Serial No.

Current Market Value

CDN Coast Guard Vessel Licence #

Hull Identification Serial Number

Vessel Name

Current Market Value

Estimated Replacement Value

Surveyed (By & Date)

Maximum Capable Operating Speed

MPH

Meets Coast Guard Regulations

Yes

No

Stove Refrigerator

Electric

Propane

Alcohol

Diesel

Propane Appliance

Electric

Ice box

AC/DC

Propane

Pilot Light

Auto Shut-off

Emergency Shut-off

Gas Sniffer

Tender/Dinghy Manufacturer

Year

Length

Serial Number

Current Market Value

Is Tender / Dinghy used as a separate Pleasure craft Is

Yes

No

Tender / Dinghy occasionally used for waterskiing?

Yes

No

Boat Trailer - Year

Manufacturer

Serial #

Current Market Value

Owned Boathouse Year

Length x Width

Construction Type

Current Market Value

Where is Vessel Moored? Marina Name

Where is Vessel Stored? (if different from place of moorage)

Primary Operating area (please show location(s))

Navigating Limits

Fresh Water

Coastal Waters

Coastal & Fresh Water

SUBMIT

Private Pleasure Use Only? Water Sports? Raced? Live-aboard
 Yes No Yes No Yes No Yes No
 Used for occasional pleasure charter or occasional commercial purposes? Yes No
 If yes, attach complete details, provide name and experience of skipper(s) if other than owner(s) or regular operator(s)

Name of Operator Birth Date Years as Owner Size owned past 5 years

 Size owned 5+ years ago Size operated

Boating Education Pleasure Craft Operator Power Squadron Course / CYA
 Masters or Captains Ticket Card Pilot Other (specify)

Please attach complete details for additional operators, if any

Has Insurance ever been declined? or been cancelled by Insurers? Yes No
 Have you or any operator listed above had your driver's licence suspended or
 revoked? If Yes to either question, please provide complete details Yes No

Have you or any operator listed above had any boat losses? If Yes, please provide complete the following Yes No

Date of Loss Cause Total Amount Name of Insurer

COVERAGES	AMOUNT OF INSURANCE	DEDUCTIBLE	PREMIUM
Insured Vessel Electronic Equipment Included	\$	\$	\$
Outboard Motor	\$	\$	\$
Auxiliary Outboard Motor	\$	\$	\$
Tender	\$	\$	\$
Total Hull & Machinery	\$	\$	\$
Owned Boathouse	\$	\$	\$
Personal Effects	\$	\$	\$
Owned Boat Trailer	\$	\$	\$
Protection & Indemnity	\$	\$	\$
Replacement Cost (original owner of vessel up to three years of age)	Claims Protection (claims free for past three years)		\$
TOTAL PREMIUM			\$

This includes:
 • Emergency Towing: \$2,500 no deductible • \$500 per day, maximum \$5,000
 • Preventative Costs • Uninsured / Underinsured vessel: Up to a maximum of the P&I Limit
 • Loss of Use & Additional Living Expenses: • Emergency Medical Payments: up to a maximum of \$10,000

Loss Payee and Address Previous Insurer(s) and Policy Number

EFFECTIVE FROM: EFFECTIVE TO:

SIGNATURE OF OWNER(S) I UNDERSTAND THE ABOVE INFORMATION, WHICH IS CORRECT AND
 _____ COMPLETE TO THE BEST OF MY KNOWLEDGE, IS TO BE THE BASIS OF
 Date INSURANCE, IF GRANTED, BUT DOES NOT OBLIGATE ME TO ACCEPT
 THE INSURANCE NOR THE COMPANY TO ACCEPT THIS RISK.

