

PROPOSAL FOR MARINE HULL INSURANCE.

Underwritten by QBE Insurance (Australia) Limited A.B.N. 78 003 191 035

Please complete this Proposal and Declaration with care as it forms part of the policy wording.

Please insure the interest described below subject to the terms and conditions of the Company's Policy and endorsements.

Name of Owner (s): Date of birth:
Address: Phone No. (W):
..... Postcode Phone No. (H):
Occupation: Phone No. (M):
Finance Company: E-Mail:

DETAILS OF VESSEL:

Powerboat used Privately for Pleasure Purposes only and which does not exceed 60 knots capacity. ☐ Maximum Speed:

Charter Vessel used for Commercial Purposes: ☐

Sailboat used Privately for Pleasure Purposes only: ☐

Vessel Name:

Hull Details:

Make: Model:

Year of Manufacture: Registration/Sail No: Length:

Construction: Fibreglass ☐ Timber ☐ Aluminium ☐ Steel ☐ Other:

Hull Identification No (HIN):

Motor Details:

Make: Model: Year of Manufacture:

Type: Outboard ☐ Inboard ☐ Sterndrive ☐ Jet ☐

Horsepower: Serial No(s)

Fuel Type: Petrol ☐ Diesel ☐ Other:

Genset:

Make: Model: Year of Manufacturer:

KVA: Serial Number:

To be completed for sailcraft.

Rig Details

Sloop ☐ Ketch ☐ Yawl ☐ Gaff ☐ Schooner ☐ Other:

Type of Standing Rigging:

Stainless steel wire ☐ Rod ☐ Galvanised wire ☐

Racing Risks Extension:

Is the vessel to be engaged in any Official/Organised racing, speed tests or competition? Yes ☐ No ☐

If so, what racing is proposed:

Road Transit Extension (The following details must be provided for the provision of the extension.)

Trailer Details:

Make: Year of Manufacture:

No. of axles: Registration Number:

Where is the vessel stored?

How is the vessel secured to prevent theft?

SUMS INSURED:

Hull \$

Motor(s) \$

Genset \$

Masts, spars, sails, rigging \$

Trailer \$

Equipment (as scheduled) \$

Total Sum Insured \$

Third Party Liability Cover \$

Excess applicable to each and every claim \$

PREMIUM DETAILS:

Hull Premium \$

Third Party \$

\$

Total Premium \$

GST \$

Stamp Duty \$

Total \$

Cover Note No.

NOTE: ALL ITEMS YOU REQUIRE INSURED MUST BE SCHEDULED

Equipment and/or accessories.

Definition: Anchors, oars, paddles, boat and motor covers, seat cushions, detachable canopies, lifejackets, fire extinguishers, V sheet, flares, horns, bilge pumps, storage batteries, curtains, carpets, nav. lights

Schedule of Equipment and Accessories

Description		Sum Insured		Description		Sum Insured	
As defined above:				*			
Other				*			
*				*			
*				*			
*				*			
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*				*			
*				(if insufficient space attach list)			
				Total Sum Insured		\$	

- | | | |
|--|------------------------------|-----------------------------|
| 1. Do you require Third Party Liability cover? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If so, to what limit? | | |
| 2. Do you require the Third Party Liability cover extended to permit the towing of water skiers? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. In what waters will the vessel operate? | | |
| 4. Will the vessel be moored? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If so, where? | | |
| If on a private mooring when was the mooring last commercially serviced? | | |
| Is your mooring commercially serviced at intervals not exceeding 365 days? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. Have you had any insurance cancelled, declined, or rates increased? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If yes, details | | |
| 6. Have you held any previous marine insurance? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If yes, which company? | | |
| 7. Have you made any marine insurance claims? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If yes, details | | |
| 8. When did you purchase the vessel? | Purchase Price: \$ | |
| 9. Period of cover from | to | |

I / We hereby declare that the answers contained in this Proposal form are in every respect true and correct and that I / We have not withheld any information likely to affect the decision of the Company in considering the risk.

Further I / We warrant that the vessel insured will be kept in a sound and seaworthy condition at all times.

I / We agree that this Proposal and Declaration shall be the basis of the contract between me / us and the Company as Agents for OBE Insurance (Australia) Limited.

Please attach a current photograph of your vessel.

Signature of Proposer: Date:

If this Proposal in any particular is completed by any other person, such person shall be deemed the Agent of the Proposer, and is not the Agent of Anchorage Marine Underwriting Agency Pty Ltd or QBE Insurance (Australia) Limited.