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| **MARINE (SAILBOAT)**  - APPLICATION FOR INSURANCE |

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| The following underwriting information has been provided by you or on your behalf. It is understood that the Insurer(s) has relied upon this information for risk acceptance to provide quote and coverage acceptability. Any misrepresentation or omission will render an insurance policy null and void from inception. **PLEASE READ CAREFULLY.** |

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| **APPLICANT INFORMATION** |  |
| Applicant’s Contact Email Address for E-Signature\* |  |       |
| Primary applicant (registered owner): |  |       |
| Date of Birth: |  |  |  |       |
| Is the vessel registered to a company? | [ ]  Yes\* [ ]  No |  |
|  | \*If yes, details of control/usage of the vessel and property, and reason it is in a corporate name: |
|  |       |
| Principal Operator: |  |       |
| Principal Operator Date of Birth: |  |       |
| Mailing Address: |  |       |
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| **BOATING EXPERIENCE** |  |
| How many years of boating experience does the applicant have in Canadian waters? |  |       |
| Has applicant personally OWNED a boat in Canada? | [ ]  Yes\* [ ]  No |
|  | \*If yes, what was the length (in feet) of the largest boat the applicant has owned? |  |       |
| Member of boating club / association? | [ ]  Yes\* [ ]  No |
|  | \*If yes, club name: |  |       |
| Boating education & courses: |
| [ ]  Canadian Power and Sail Squadron Course (Operators Card Course does not qualify) | [ ]  Captain/Master |
| [ ]  USCG | [ ]  CYA/ASA | [ ]  SVOP |
| [ ]  Pleasure Craft Operators Card Only |
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| **LOSS HISTORY** |
| How many boating losses (insured or otherwise) has applicant(s) had in the past 5 years? |
|  | [ ]  None | [ ]  1 | [ ]  2 | [ ]  3 or more |
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|  | \*For each claim, complete the information below. |
|  | Date of loss: |       | Amount of loss / damage / amounts paid: | $      |
|  | Details including cause of loss? |  |
| [ ]  Theft – Total | [ ]  Theft – Partial | [ ]  Vandalism |
| [ ]  Bodily Injury or Accidental Death | [ ]  Collision with another boat or dock | [ ]  Collision with a submerged object |
| [ ]  Fire – Total | [ ]  Fire – Partial | [ ]  Windstorm, Hail, Snow |
| [ ]  Sinking – Total | [ ]  Sinking/submersion - Partial |  |
| [ ]  Other |       |
| Has the applicant carried insurance on a marine pleasure craft in the past 5 years? | [ ]  Yes\* [ ]  No |
|  | \*If yes, Previous Insurer? |  |       |
| Has insurance ever been cancelled or refused? | [ ]  Yes\* [ ]  No |
|  | \*If yes, provide details: |       |
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| **AUTOMOBILE DRIVING RECORD** |
| How many minor moving violations in the last 3 years? |
|  | [ ]  None | [ ]  1 | [ ]  2 | [ ]  3 or more\*(provide details) |       |
| How many major moving violations in the last 3 years? (Impaired, Dangerous, Reckless, Excessive speeding, etc.) |
|  | [ ]  None | [ ]  1 | [ ]  2 | [ ]  3 or more\*(provide details) |       |
| How many at-fault claims or accidents in the last 3 years? |
|  | [ ]  None | [ ]  1 | [ ]  2 or more\* (provide details) |       |
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| **RISK INFO** |
| Select vessel and property use: |
| [ ]  Strictly private pleasure only – no commercial/rental use | [ ]  Skippered fishing charter up to $20,000 annually |
| [ ]  Skippered fishing charter over $20,000 annually | [ ]  Some commercial use |
| [ ]  Other |       |
| Is the vessel used as live aboard? | [ ]  Yes [ ]  No |
| Is the vessel Canadian registered/licensed? | [ ]  Yes [ ]  No\* |
|  | \*You have indicated the vessel is not registered/licensed in Canada – please provide details: |
|  |       |
| Does the vessel have a full galley (kitchen)? | [ ]  Yes [ ]  No |
| Does the vessel have full height standing room in the cabin? | [ ]  Yes [ ]  No |
| Is this a multi-hull sailboat? | [ ]  Yes [ ]  No |
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| **Vessel + Main Motor Details:** |  |
| Vessel Year: |       | Vessel Manufacturer: |       |  |
| Vessel Model: |       | Vessel Length (ft): |       | Vessel Serial #: |       |
| Horsepower: |       | Max speed (as per manufacturer MPH): |       |
| Year Vessel Was Purchased: |       | Purchase Price (incl. taxes & shipping): | $      |
| Hull Construction: |
| [ ]  Fiberglass | [ ]  Steel | [ ]  Wood | [ ]  Ferro Cement | [ ]  Fiberglass over Wood |
| **Auxiliary Motor Details:** |
| Year: |       | Manufacturer: |       |
| Horsepower: |       |  |  |
| **Tender Details:** |  |  |  |
| Year: |       | Manufacturer: |       |
| Length: |       | Horsepower: |       |
| **Trailer Details:** |
| Year Built: |       | Trailer Manufacturer: |       |
| **Boat Lift Details:** |
| Year: |       | Manufacturer: |       |
| **Floating Boat Shed Details:** |
| Year: |       | Size (sq ft): |       |
| **NAVIGATION AREA** |
| Where is the vessel and property used? Select your requested navigation limits to be incorporated into the policy agreement. Select multiple if applicable. Do NOT skip this section. |
| [ ]  **ILR-1 (Inland Waters-Canada/Bordering US States):** The navigable inland lakes and rivers of Canada, and the states of Washington, Idaho, Montana, North Dakota, Minnesota, Wisconsin, Michigan, Indiana, Ohio, Illinois, Pennsylvania, New York, Vermont, New Hampshire, Maine, and Alaska. | [ ]  **ATL-1 (Coastal-East):** The navigable coastal waters of Eastern Canada and the United States but not north of 52°N and not south of 40°N. In no event shall the Insured Vessel exceed 100 nautical miles offshore. |
| [ ]  **PAC-1 (Protected Coastal-BC/Washington):** The navigable coastal waters of British Columbia and Washington state, but not outside of lines drawn between the following places: Cape Flattery and Owen Point; Cape Sutil and Mexicana Point; Cape James and Allison Harbour. In no event will the Insured Vessel be used in the coastal waters and Inlets of the West Coast of Vancouver Island between Owen Point and Cape Sutil or on the Fraser River above the mouth of the Sumas River. | [ ]  **PAC-2 (Unprotected Coastal-West):** The navigable coastal waters of the west coast of Canada but not north of Skagway, Alaska, and not west of Cape Spencer. In no event shall the Insured Vessel exceed 100 nautical miles offshore. The navigable coastal waters of Washington state but not west of Cape Flattery. |
| [ ]  **Other:** Not Described Above |       |
| **LAY-UP LOCATIONS** |
| Where is the Vessel kept when not in use – during the boating season? |
| [ ]  Residence | [ ]  Cottage | [ ]  Other Private Residence |
| [ ]  Marina/Yacht Club | [ ]  Boat Storage Compound | [ ]  Public Storage Compound |
| [ ]  Commercial/Industrial Premise | [ ]  Mooring Buoy | [ ]  Other |
| Address: |       |
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| Where is the Vessel kept when not in use – during the off-season? |
| [ ]  Residence | [ ]  Cottage | [ ]  Other Private Residence |
| [ ]  Marina/Yacht Club | [ ]  Boat Storage Compound | [ ]  Public Storage Compound |
| [ ]  Commercial/Industrial Premise | [ ]  Mooring Buoy | [ ]  Other |
| Address: |       |
| **COVERAGES** |
| Vessel (incl. Main Motor(s) & Attached Equip.) – current market value incl. taxes + shipping: | $      |  |
| Auxiliary O/B Motor: | $      |  |
| Tender (Incl O/B Motor): | $      |  |
| Floating Boat Shed: | $      |  |
| Boat Lift: | $      |  |
| Trailer: | $      |  |
| P&I (Liability) Limit: | [ ]  $1,000,000 | [ ]  $2,000,000 |
| **LOSS PAYABLE(S)** |  |
| Name: |       | Address: |       |

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| **PLEASE READ BEFORE SIGNING:** The Applicant has reviewed this application form and all attachments and acknowledges that all information provided is true. The Applicant understands that any insurance that may be provided is based on the information in this application being true and correct, and any misrepresentation or omission will render any such insurance policy null or void from inception. The Applicant understands that if the insured fails to immediately inform the insurer of material changes to these facts during the term of an insurance policy, the insurance may not be valid. The Applicant understands that they cannot contravene a term of the policy, commit a fraud, or willfully make false statements during a claim investigation. The Applicant confirms that all individuals included in this application have authorized the collection and storage of their personal information. Credit information, claims history and other personal information may be collected, used and disclosed for the purposes of assessing and underwriting the application for insurance, renewals, evaluating claims, detecting and preventing fraud. The Applicant hereby consents to the use of electronic communications, electronic records, and electronic signatures. The Applicant understands an electronic signature is legally binding, just as if the Applicant had signed a paper document. **NOTE: INSURANCE IS NOT IN EFFECT UNTIL SUCH TIME AS FORWARD INSURANCE MANAGERS HAS ISSUED A BINDER OR INSURANCE POLICY IN WRITING THAT CONFIRMS COVERAGE IS IN PLACE.** Forward Insurance Managers Ltd is a managing underwriting agency duly licensed as an intermediary across Canada – and the insurance company at risk shall be duly listed on any quotation, binder or insurance policy. |
| **Signature of Applicant(s):** |       | **Date:** |       |
| **Brokerage:** |       | **Broker ID#:** |       |
| **Broker Email:** |       | **Phone:** |       |
| **Email completed apps to newmarine@forwardinsurance.ca or for the quickest turnaround, log in to *JET*.** |