



**APPLICATION for PRIVATE PLEASURE INSURANCE**

1. Name of Assured (including all stockholders if corporation):

\_\_\_\_\_

Address: \_\_\_\_\_

2. Ph: \_\_\_\_\_ Email: \_\_\_\_\_

3. Occupation: \_\_\_\_\_

4. Additional Assured and/or Loss Payees: \_\_\_\_\_

Mortgagee: \_\_\_\_\_

Loan Balance: CAD \$ \_\_\_\_\_

5. Insurance to attach from: \_\_\_\_\_ to: \_\_\_\_\_

6. Vessel Name: \_\_\_\_\_ Year Built: \_\_\_\_\_

Purchase Price: CAD \$ \_\_\_\_\_ Purchase Date: \_\_\_\_\_

Material of Hull:  Fibreglass  Wood  Steel  Aluminum

Builder & Model: \_\_\_\_\_

Hull #: \_\_\_\_\_ Reg #: \_\_\_\_\_

Vessel Flag: \_\_\_\_\_ Vessel Length: \_\_\_\_\_

Engine(s):  Single  Twin  Other \_\_\_\_\_

Year Built: \_\_\_\_\_ Horsepower: \_\_\_\_\_  Gasoline  Diesel

Speed Knots: \_\_\_\_\_ Manufacturer: \_\_\_\_\_

5. Hull Insurance: Market Value: CAD \$ \_\_\_\_\_

Hull Deductible: CAD \$ \_\_\_\_\_ Uninsured Boaters: CAD \$ \_\_\_\_\_

P & I Limit: CAD \$ \_\_\_\_\_ Medical Payments: CAD \$ \_\_\_\_\_

Personal Effects: CAD \$ \_\_\_\_\_ Detail Individual Items Over: CAD \$1,000 \_\_\_\_\_

\_\_\_\_\_

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Tenders / Dinghies, etc. (type and value) \_\_\_\_\_

\_\_\_\_\_

Additional Items: \_\_\_\_\_

\_\_\_\_\_

6. Waters to be Navigated: \_\_\_\_\_

\_\_\_\_\_

7. Lay Up Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

8. Detailed Itinerary if Racing (if applicable): \_\_\_\_\_

\_\_\_\_\_

9. Owner's Experience: \_\_\_\_\_ Years Skipper's Experience: \_\_\_\_\_ Years

Previous Vessels Owned or Operated (*Owner and Skipper*):

OWNER: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SKIPPER: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Losses Sustained During Past Five Years (*Owner and Skipper*):

Number: \_\_\_\_\_ Amount(s): CAD \$ \_\_\_\_\_

Describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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If any other person is going to be in charge of the vessel, please give their details:

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10. Has any Insurer ever cancelled or refused to issue any Private Pleasure Insurance for Applicant?

Yes       No

If so, why: \_\_\_\_\_

Name of Present or Previous Insurer: \_\_\_\_\_

11. Number of Permanent Paid Crew Members (if applicable): \_\_\_\_\_

Number of Part Time Paid Crew Members (if applicable): \_\_\_\_\_

12. Date of Most Recent Marine Survey: \_\_\_\_\_

Afloat       Dry-docked

13. Where is Vessel Based (home port / marina): \_\_\_\_\_

14. Will Vessel Engage in Charter Work:     Yes       No

15. Will Vessel be Used for Business Entertainment:       Yes       No

16. Other Remarks: \_\_\_\_\_

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Date: \_\_\_\_\_, 20\_\_\_\_      Signature of Owner: \_\_\_\_\_