

## Jet Surf Application

Applicants Name: \_\_\_\_\_

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

Number of years in business: \_\_\_\_\_

Additional related experience a/o certification: \_\_\_\_\_

Jet Surf operation      Lesson's       Rentals       Sales

Annual Gross Receipts: \$ \_\_\_\_\_

Indicate typical duration of Lessons / Rentals: \_\_\_\_\_

Are Jet Surfs operated in a closed course?      Yes       No

Will there be any operations outside of the closed course?      Yes       No

Are Students required to wear Helmets and life jackets at all times?      Yes       No

Maximum number of students per Instructor?: \_\_\_\_\_

Maximum number of Jet Surf's permitted to be operated in the closed course at any one time? \_\_\_\_\_

Maximum number of students or rentals in closed course at any one time?: \_\_\_\_\_

Describe orientation and safety procedures given to students prior to surfing: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Where are the Jet Surf Boards Stored when not in use each day? \_\_\_\_\_

What security measures are taken to prevent theft? \_\_\_\_\_

What waters are the Jet Surfs operate in: \_\_\_\_\_

Usual operating Season: \_\_\_\_\_

Lay-up period: \_\_\_\_\_

Provide address where the Jet Surf's will be stored in the off season \_\_\_\_\_

Security measures: \_\_\_\_\_

Previous insurance company: \_\_\_\_\_ Policy No. \_\_\_\_\_

Renewal Premium: \$ \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Ever been cancelled by an Insurance Company:      Yes       No

If yes please advise why: \_\_\_\_\_

Do you have a commercial general liability policy in force?:      Yes       No

Insurer: \_\_\_\_\_ Policy No.: \_\_\_\_\_

### Additional Requirements:

- Liability Waiver is mandatory for this adventure sport, please provide a copy with this application
- Completed Instructor Questionnaire for all Instructors, see page 3 of this application.
- Please provide a copy of clients Safety Procedures and Process check list.



**Jet Surf Schedule:**

Year	Make	Serial Number	Insured Value
			\$
			\$
			\$
			\$
			\$
			\$
			\$

Insurance Coverage's Required	Total Values	Rate	Premium
Hull & Machinery total of all Jet Surf's	\$		
Protection & Indemnity: for each vessel	\$1M    \$2M		
Total # of Watercraft to be insured?	#		

**Date:** \_\_\_\_\_

**Brokerage:** \_\_\_\_\_

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

**Agents Signature:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_

By signing this application the applicant declares that all information contained herein is accurate and true to his/her knowledge and understands that non-disclosure or misrepresentation of a material fact may entitle Underwriters to void the insurance. By signing this application the applicant also grants permission for the Insurer, Broker, or their representatives to verify that the above information contained in this application is true

## Instructor Questionnaire

TO BE COMPLETED BY THE SKIPPER AS A SUPPLEMENT TO THE APPLICATION:

1. NAME OF INSTRUCTOR: \_\_\_\_\_  
\_\_\_\_\_
2. ADDRESS: \_\_\_\_\_  
\_\_\_\_\_
3. DATE OF BIRTH: \_\_\_\_\_
4. HOW LONG HAVE YOU BEEN OPERATING A JET SURF? \_\_\_\_\_
5. WHERE DID YOU RECEIVE YOUR TRAINING FOR TEACHING JET SURFING? \_\_\_\_\_
6. DO YOU HAVE AN CERTIFICATES? \_\_\_\_\_
7. CLAIMS/LOSS RECORD: HAS THE INSTRUCTOR HAD ANY CLAIMS OR LOSSES DURING THE LAST 5 YEARS IN RELATION TO WATERCRAFT WHETHER INSURED OR NOT     YES     NO

**IF YES, PLEASE COMPLETE THE FOLLOWING: (WRITE ON BACK IF NECESSARY)**

YEAR	DETAILS OF LOSS	AMOUNT INVOLVED	INSURER	AMOUNT OF CLAIM

8. HAVE YOU AT ANY TIME BEEN INVOLVED IN ANY MAJOR DAMAGES/TOTAL LOSSES ON ANY VESSEL WHETHER INSURED OR NOT: IF SO, GIVE BRIEF DETAILS INCLUDING DATE, COSTS, AND NAME(S) OF VESSEL(S) INVOLVED.  
  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. I HEREBY DECLARE THAT THE PARTICULARS AND ANSWERS GIVEN IN THIS QUESTIONNAIRE ARE IN EVERY RESPECT TRUE AND CORRECT AND THAT I HAVE NOT WITHHELD ANY INFORMATION WHICH COULD INFLUENCE THE DECISION OF THE COMPANY IN REGARD TO IT'S ACCEPTANCE.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_