



**TT Club Mutual Insurance Ltd**  
90 Fenchurch Street London EC3M 4ST  
United Kingdom  
www.ttclub.com

# Proposal Form

## Ship Operators

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This questionnaire may be completed by your broker.

Fields are marked with an asterisk(\*) are mandatory. Fields marked with a paperclip (📎) require you to attach further details to your proposal. Failure to give complete answers may cause delay.

### General Information

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**Registered Company name\***

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**Registered Address\***

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**Telephone**

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**Email Address\***

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**Year of Foundation**

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**Proposal Currency\***

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**Renewal Date\***

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## Proposal Form

### Equipment Section

#### Operating Areas\*

Please enter the proportion of your equipment shipped to or within each area (must total 100%):

Area	Proportion	Area	Proportion

#### Vessels\*

How many vessels do you operate?

**Owned:**

Please enter the capacity of your largest vessel(s) in TEUs:

**Chartered:**

Please enter details of the vessels you operate that are non-purpose built or over 15 years old

Name	Type	Class Approval	Year Built	Capacity TEU	P&I Club	IMO Number

*Class Approval: please tick if container stowage and securing plan approved by Classification Society.*

**Hong Kong**

T +852 2832 9301

E hongkong@ttclub.com

**London**

T +44 20 7204 2626

E london@ttclub.com

**New Jersey**

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E newjersey@ttclub.com

**Rotterdam**

T +31 (0)10 750 3400

E rotterdam@ttclub.com

**Sydney**

T +61 (0) 8262 5800

E sydney@ttclub.com



## Proposal Form

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### Carrying Equipment\*

Please attach a declaration of the carrying equipment you would like to insure and include the following details:

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**Category:** Container; chassis/trailer; rail wagon; powerpack; or swap body

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**Type:** Dry; refrigerated; tank; atmospheric; or powerpack

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**Size:** in feet

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**Quantity:** of each category/type/size

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**Insured value:** the value you wish to ensure each unit for

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**Basis of valuation:** New replacement value; market value; or depreciated (book) value

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**Basis of cover:** loss & damage, or total loss only

### Handling Equipment

Please attach a declaration of the handling equipment you would like to insure and include the following details:

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**Description of equipment:** e.g. tugmaster, fork lift truck

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**Quantity:** of each type

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**Insured value:** the value you wish to ensure each unit for

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**Basis of valuation:** New replacement value; market value; or depreciated (book) value

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## Proposal Form

### Insurance History\*

#### Claims\*

Are you currently insured for the type of risks insured by the TT Club?\* Yes  No

If 'Yes', please complete the table below for the last five complete years and in the current year. Please attach details of any single claim (paid or pending) which represents more than 50% of the premium paid in the year the claim occurred.

If 'No', please attach details of all uninsured losses which would be recoverable under a policy with the TT Club.

Policy Year	Premium	Deductible	Claims Paid		Claims Pending	
			Count	Sum	Count	Sum
Current year						
-1 year						
-2 years						
-3 years						
-4 years						
-5 years						

I confirm that this information is correct and confirmed by incumbent insurers on the effective date:

#### Policy Refusal/Cancellation\*

Have you ever had any insurance policy cancelled or refused? Yes  No

### Insurance Requirements\*

#### Policy structure\*

Cover	Required?	Limit	Deductible
Equipment Loss/Damage	Yes		
Liabilities	Yes		
Handling Equipment	Yes		

Remarks:

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### Additional Information

Please set out below any other information relevant to the insurance of your business 

It would assist us if you would forward with this questionnaire your company's latest annual report and accounts, plus any company brochures or literature describing your services. 

### Declaration\*

I hereby confirm that the information given above and in all attached sheets is true and correct.

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Signature

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Name

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Position

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Date

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