

MARINE PLEASURECRAFT APPLICATION – All Boat Classes except PWC

QUOTE only BIND (Please attach quote) Requested Effective Date: _____ Reference # _____

REGISTERED OWNER/APPLICANT DETAILS (Company names also require our supplementary "Company Name Audit Form")

Registered Owner #1: _____ DOB: / / (dd/mm/yyyy) Age: _____

Registered Owner #2: _____ DOB: / / (dd/mm/yyyy) Age: _____

Mailing Address: _____ City: _____ Prov.: _____ Postal Code: _____

Watercraft Location: Is the boat used and stored in same province as address above? YES NO

If no, please explain: _____

Are there more than 2 Registered owners? YES NO

If yes, please explain: _____

List of Prior Boats Owned or Operated (prior to this one): _____

Has Insurance ever been cancelled or declined or refused? YES NO

If yes, please explain: _____

Current insurance on this boat: Premier Not currently Insured / unknown Other Company If other, Insurer Name: _____

CLAIMS / LOSS HISTORY

Any Boating Losses or Claims in last 5 years? YES NO

If yes, please advise Dates/Payout/Description: _____

OPERATOR DETAILS

Name	DOB	% Use (Total 100%)	Years as a Boat Owner	Years exp. as a driver/operator	Education / Course List	Clear Auto Record *
	/ /	%			<input type="checkbox"/> Voluntary Boat Education (Excl. Mandatory Boat Lic.) <input type="checkbox"/> Canadian Power Squadron Certified (CPS) <input type="checkbox"/> Cruising or Yacht Club	<input type="checkbox"/> YES <input type="checkbox"/> NO If no, explain: _____
	/ /	%			<input type="checkbox"/> Voluntary Boat Education (Excl. Mandatory Boat Lic.) <input type="checkbox"/> Canadian Power Squadron Certified (CPS) <input type="checkbox"/> Cruising or Yacht Club	<input type="checkbox"/> YES <input type="checkbox"/> NO If no, explain: _____
	/ /	%			<input type="checkbox"/> Voluntary Boat Education (Excl. Mandatory Boat Lic.) <input type="checkbox"/> Canadian Power Squadron Certified (CPS) <input type="checkbox"/> Cruising or Yacht Club	<input type="checkbox"/> YES <input type="checkbox"/> NO If no, explain: _____

VESSEL DETAILS

Year: _____ Length(ft): _____ Brand/Make/Manufacturer: _____ Model: _____

Max Speed: _____ mph *(Note boats over 60mph also require high performance supplemental application)*

Hull Material: Fiberglass Aluminum Wood FG over wood Steel Other (Describe) _____

Propulsion Type: Jet Sail Outboard IN/Outboard /Stern Drive Inboard Other (Describe) _____

Horsepower each Main engine/motor*: *(* Electric motors not accepted as main motor)* #1: _____ #2: _____

Horsepower/Thrust of Auxiliary motor(s): Gas Electric #1: _____

Gas Electric #2: _____

Does Vessel have **All 3** of the following built in. Galley (Kitchen), Head (Bathroom) and Sleeping Quarters? YES NO

Lienholder/Loss Payee name and address (or indicate if none): _____

Is this Boat Leased? *(Please Note: Leased boats do not qualify)* YES NO

Is Vessel used for Recreational Private Pleasure use only? YES NO

If no, please explain: _____

Navigational limits Required (Province/Region/ or Waters where boat will be used?): _____

Is this boat lived aboard as a seasonal or primary residence? YES NO

If yes, please explain when, how long and why: _____

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Layup/Storage on land address:

Mooring Location - In water address:

How is Boat kept during boating season? (Please check below)

- In water tied to a Dock In water tied to **Floating** Mooring Buoy or on Anchor or Raft Moored
 On Land on Trailer when not in use Suspended on Private Boat Lift
 Other (describe):

VALUATION and LIMITS of COVERAGE (\$Canadian currency inclusive of tax)

Purchase Date: **Purchase Price of All items:** **Current Market Total of all items:**
 / / (dd/mm/yyyy) \$ \$

Coverage Item	Detailed Description (e.g., Year, Length, Brand, Model, HP, Serial#)	Current Market Value breakdown in CAN\$
VESSEL/WATERCRAFT (including Main Motor and attached electronics)	Year: Length(ft): Brand: Model: Hull ID/HIN/serial#: Main Engine/motor(s) Year: Brand: Horsepower each: / Engine/motor serial#:	Total hull incl. main motors value: \$
Aux motor #1	Year: Brand: Hp: Serial#:	\$
Aux motor #2	Year: Brand: Hp: Serial#:	\$
Tender/Dinghy Boat	Year: Brand: Length: Serial#:	\$
Tender/Dinghy Motor	Year: Brand: Hp: Serial#:	\$
Trailer	Year: Brand: Serial#:	\$
Personal Effects (incl. \$500 fishing equipment)	An automatic standard limit is included (optional upgrade max \$5,000)	\$Std limit or \$
Extra Fishing Equipment (AEE)	Limit Options: <input type="checkbox"/> Default \$0 <input type="checkbox"/> \$2,500 <input type="checkbox"/> \$5,000 <input type="checkbox"/> \$7,500	<input type="checkbox"/> \$0 / <input type="checkbox"/> \$
Water Sport Equipment (WSE)	Limit Options: <input type="checkbox"/> Default \$0 <input type="checkbox"/> \$2,500 <input type="checkbox"/> \$5,000 <input type="checkbox"/> \$7,500	<input type="checkbox"/> \$0 / <input type="checkbox"/> \$
P&I Liability limits included:	3 million P&I Liability included as Standard	<input checked="" type="checkbox"/> \$3M std
P&S Pollution &Spill Liability:	1 million P&S Liability included or see optional Upgrade	<input checked="" type="checkbox"/> 1M <input type="checkbox"/> 2M <input type="checkbox"/> 3M

Additional Comments/Coverage request:

DECLARATION / CONSENT

PLEASE READ BEFORE SIGNING: A claim will become invalid and the Insured's right of recovery is forfeited where (a) an Applicant for this contract gives false particulars to the prejudice of the insurer or knowingly misrepresents or fails to disclose any fact in any part of this application required to be stated therein; or (b) the insured fails to inform material changes to these facts during the term of the contract; (c) the insured contravenes a term of the contract or commits a fraud; or (d) the insured willfully makes a false statement in respect of a claim. The Applicants have reviewed all parts and attachments of this application and acknowledge that all information is true and correct and understand that this application for insurance is based on the truth and completeness of this information.

The personal information provided in this document and in the future including, but not limited to, credit information and claims history may be collected, used and disclosed by the insured's representative or insurance company, subject to local legislation, for the purpose of communicating with the insured or their representative, assessing the application for insurance and underwriting any such policies, evaluating claims, detecting and preventing fraud, and analyzing business results. I confirm that all individuals whose personal information is contained in this document have authorized that I agree to the above on their behalf.

NOTE: Insurance is not in effect until Premier has issued a binder or policy documents.

PRINT NAME OF APPLICANT(S): SIGNATURE OF APPLICANT(S): DATE:

BROKERAGE NAME / BRANCH: SIGNATURE OF BROKER:

BROKER EMAIL: BROKER PHONE:

NOTE: Insurance is not in effect until Premier has issued a binder number. The company in its sole judgment may elect to accept or reject any application.

Premier Marine Insurance Managers Group (WEST) Inc. is one of Canada's largest Managing Underwriting Agents. The underwriting insurance carrier varies by line of business and region - please refer to specific quote for declaration of the underwriting insurance company(s).

**** Email application and attachments to - newbizmarine@premiergroup.ca ****

Western Region - T 604.669.5211 F 604.669.2667 Ontario & Atlantic Canada - T 519.850.1610 F 519.850.1614