

## FISHING VESSEL PROPOSAL/PROPOSAL FORM HULL AND MACHINERY/PROTECTION & INDEMNITY

### Owner(s)/Manager(s)

Owner(s) name:		Manager(s) name:	
Address:			

Telephone No:		Fax No:	
Mobile:		E-Mail:	
Boat:			

Length of time vessel owned:		Name of previous owners of vessel:	
Date vessel purchased:		Purchase price:	

Name of mortgage:		Value of vessel:	
Amount of original mortgage:		Amount of current mortgage:	

### Details of Skipper

Is the owner the skipper	<b>Yes / No</b>
Certificate/qualifications held:	
Total fishing experience (years):	
Length of service with proposal vessel (years):	
Previous vessels skippered:	
Other relevant experience:	

### Cover Required

Period (from):	<b>Noon</b> ( / / )	(to):	<b>Noon</b> ( / / )
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H&M:	Yes		No	
P&I	Yes		No	
4/4 <sup>th</sup> Collision risk:	Yes		No	

**Vessel Details:**

Vessel's name:		Port registration no.	
Previous name(s):		R.S.S. no.:	
Builder:		Where built:	
Year built:		Home port:	
Fishing no:		Vessel Type:	
Flag:		Gross reg. tonnage:	
LOA:		Registered length:	
Material of construction:		Date of next dry docking:	
Date of last survey/slipping:		By class/DoT:	
Type of propeller:		Type of sterngear:	
Special electronic equipment fitted (e.g. Sonar, Radar, V.H.F. etc.):		Owned (Y/N):	
		Value:	
		Hired (Y/N):	
		Value:	
Make and type of fire extinguishers:			

**H&M**

Engine year built:		Make and model:	
H.P.:		R.P.M.:	
Date of last overhaul:		Hours (total):	
Hours (since last o/h)			
Age and type of gearbox:			
Age and type of auxiliary engine(s):			
Age and type of winch:			

Special features (e.g. turbo)		Maximum designed speed:	
Details of any major refit/overhaul on hull over last five years:	Date:		
	Approx. cost:		
	Details:		
Does the vessel hold a current DTI survey certificate?	<b>Yes / No / NA</b>	Expiry Date:	
Is the vessel in class?	<b>Yes / No / NA</b>	If yes, which classification society?	
Number of crew		Nationality of crew	
Are all crew covered by a Separate Personal Accident Cover?	<b>Yes / No</b>	Capital sum:	
Weekly sum:		Maximum duration of payments:	
Current Third Party Insurer:			

## OPERATION

Port of operation:	
Area of operation:	
If you carry passengers state how many:	
Are Vessels laid up at any time?	<b>Yes / No</b>
If Yes, Approximate period vessel is laid up each year:	
State type of mooring when laid up (Ashore/Mud berth etc):	
Where is vessel kept when laid up / Out of commission?	

Type of Fishing							
Trawling		Seining		Line		Longline	Crab
Dredging		Abalone		Gill Nets		Pots	Traps
Support		Mothership/factory					

Coastal Marine Services Ltd must be advised if the vessel is used at any time for operations other than fishing or if the fishing method changes.

**Insurance History**

Incidents of Skipper, Owner and vessels(s) in last 5 years whether insured or not: (Continue on separate sheet if necessary)	

Name of current insurer (if none, last insurer): & premium, conditions etc	
Has any insurer ever declined to insure you or the skipper?	Yes / No
If Yes, please provide details:	
<b>OR</b> imposed restricted terms in respect of this vessel or any other vessel Owned, Operated or Managed	Yes / No
Has the owner or skipper ever been convicted of fraud or any criminal offence	Yes / No
If Yes, please provide details:	

**Check List**

Please ensure that the following supporting documentation is included with this entry form:

- |    |   |   |          |
|----|---|---|----------|
| 1. | Copy of MCA Certificate or Local Authority equivalent | } | Refer to |
| 2. | Proof of no claims bonus, if applicable               | } | Policy   |
| 3. | Copy of most recent survey, if applicable             | } |          |

**Disclosure of Material Facts**

You must disclose all material facts, not only those covered by specific questions in this Form. Material facts are those which an insurer would regard as likely to influence the acceptance and assessment of your application. If you fail to disclose a material fact, your insurance cover could become completely void. If you are in doubt as to whether any fact is material, you should disclose it. Cover is always subject to the Policy of Coastal Marine Services Limited .

**Declaration**

I declare that the above particulars are correct and complete in every respect to my knowledge and belief. I agree that this proposal and declaration shall form the basis of the contract of insurance between the Underwriters and I if a policy is issued.

I further declare and agree that if the statement and particulars have been completed in the handwriting of any person other than the undersigned, such person is deemed to be the agent of the proposer for the purpose of completing this proposal

**Signed:**.....

**Capacity (i.e. Director,etc):**.....

**Dated:**.....