

AGENT/BROKER NAME:		EFFECTIVE DATE DESIRED:
AGENT/BROKER ADDRESS:		AGENT/BROKER CODE:
		TELEPHONE NUMBER:

OWNER NAME AND ADDRESS

OWNERSHIP TYPE: ☐ PRIVATELY OWNED ☐ CORPORATE OWNED		
YACHT OWNER (INSURED or CORPORATE) NAME:	TELEPHONE #1:	
	TELEPHONE #2:	
	EMAIL ADDRESS:	
STREET ADDRESS:		
CITY:	STATE:	ZIP CODE:

MOORING ELIGIBILITY DETAILS

MOORING LOCATION BETWEEN JUNE 1 AND NOVEMBER 1: ☐ PRIMARY RESIDENCE ☐ MARINA ☐ OTHER LOCATION		
NAME OF MARINA OR OTHER LOCATION:		
STREET ADDRESS:		
CITY:	STATE:	ZIP CODE:

YACHT ELIGIBILITY DETAILS

HULL MATERIAL: ☐ ALUMINUM ☐ CEMENT ☐ FIBERGLASS ☐ KEVLAR ☐ RUBBER ☐ STEEL ☐ WOOD		
YACHT MANUFACTURER:	YACHT LENGTH:	YACHT MODEL YEAR:
INTENDED USE: ☐ PRIVATE PLEASURE ☐ CHARTER ☐ FISHING GUIDE ☐ COMMERCIAL ☐ LIVE ABOARD		
IF CHARTER, # OF TRIPS PER YEAR: IF FISHING GUIDE, # OF GUIDE TRIPS PER YEAR:		
DO YOU HAVE PAID CAPTAIN OR CREW? ☐ YES ☐ NO TOTAL NUMBER OF CREW INCLUDING CAPTAIN:		

OWNER OPERATOR INFORMATION (If more than two owners/operators please provide information on separate piece of paper)

OWNER/OPERATOR #1 NAME:		☐ OWNER AND OPERATOR ☐ OPERATOR ONLY	DATE OF BIRTH:
LENGTH OF LARGEST YACHT OWNED (FT):	LENGTH OF LARGEST YACHT OPERATED (FT):	HAVE YOU EVER HAD INSURANCE CANCELLED OR REFUSED? ☐ YES ☐ NO	
NUMBER OF YEARS AS OWNER OF LARGEST YACHT:	NUMBER OF YEARS OPERATING LARGEST YACHT:	IF YES EXPLAIN:	

DESCRIPTION OF YACHT LOSSES IN THE LAST 3 YEARS: ☐ NONE (If more than two losses please provide information on separate piece of paper)

#1 LOSS DATE:	#1 CLAIM: ☐ OPEN ☐ CLOSED	#1 LOSS AMOUNT:
#1 DESCRIPTION:		
#2 LOSS DATE:	#2 CLAIM: ☐ OPEN ☐ CLOSED	#2 LOSS AMOUNT:
#2 DESCRIPTION:		

DESCRIPTION OF MOVING TRAFFIC VIOLATIONS IN THE LAST 3 YEARS: ☐ NONE (If more than two MTV's please provide information on separate piece of paper)

#1 MOVING TRAFFIC VIOLATION DATE:	#1 MOVING TRAFFIC VIOLATION TYPE: ☐ SPEEDING ☐ RECKLESS DRIVING ☐ ALCOHOL OR DRUG RELATED ☐ OTHER
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#2 MOVING TRAFFIC VIOLATION DATE:	#2 MOVING TRAFFIC VIOLATION TYPE:			
	☐ SPEEDING	☐ RECKLESS DRIVING	☐ ALCOHOL OR DRUG RELATED	☐ OTHER

DESCRIPTION OF DWI / DUI / OUI IN THE LAST 3 YEARS: ☐ NONE (If more than one DWI / DUI / OUI please provide information on separate piece of paper)

DWI / DUI / OUI CONVICTION DATE(S):

OWNER/OPERATOR #2 NAME:		☐ OWNER AND OPERATOR ☐ OPERATOR ONLY	DATE OF BIRTH:
LENGTH OF LARGEST YACHT OWNED (FT):	LENGTH OF LARGEST YACHT OPERATED (FT):	HAVE YOU EVER HAD INSURANCE CANCELLED OR REFUSED? ☐ YES ☐ NO	
NUMBER OF YEARS AS OWNER OF LARGEST YACHT:	NUMBER OF YEARS OPERATING LARGEST YACHT:	IF YES EXPLAIN:	

DESCRIPTION OF YACHT LOSSES IN THE LAST 3 YEARS: ☐ NONE (If more than two losses please provide information on separate piece of paper)

#1 LOSS DATE:	#1 CLAIM: ☐ OPEN ☐ CLOSED	#1 LOSS AMOUNT:
#1 DESCRIPTION:		
#2 LOSS DATE:	#2 CLAIM: ☐ OPEN ☐ CLOSED	#2 LOSS AMOUNT:
#2 DESCRIPTION:		

DESCRIPTION OF MOVING TRAFFIC VIOLATIONS IN THE LAST 3 YEARS: ☐ NONE (If more than two MTV's please provide information on separate piece of paper)

#1 MOVING TRAFFIC VIOLATION DATE:	#1 MOVING TRAFFIC VIOLATION TYPE:			
	☐ SPEEDING	☐ RECKLESS DRIVING	☐ ALCOHOL OR DRUG RELATED	☐ OTHER
#2 MOVING TRAFFIC VIOLATION DATE:	#2 MOVING TRAFFIC VIOLATION TYPE:			
	☐ SPEEDING	☐ RECKLESS DRIVING	☐ ALCOHOL OR DRUG RELATED	☐ OTHER

DESCRIPTION OF DWI / DUI / OUI IN THE LAST 3 YEARS: ☐ NONE (If more than one DWI / DUI / OUI please provide information on separate piece of paper)

DWI / DUI / OUI CONVICTION DATE(S):

ADDITIONAL YACHT INFORMATION

YACHT MODEL:	YACHT TYPE:	☐ BASS BOAT	☐ CRUISER	☐ HOUSE BOAT	☐ PONTOON	☐ RUNABOUT
		☐ SAILBOAT	☐ TRAWLER	☐ OTHER		
YACHT PURCHASE DATE:			YACHT PURCHASE PRICE:			

ENGINE INFORMATION (If more than three engines, please provide information on separate piece of paper)

ENGINE #1 MANUFACTURER:	ENGINE #1 MODEL YEAR:	ENGINE #1 SERIAL NUMBER:	ENGINE #1 HORSE POWER:
ENGINE #2 MANUFACTURER:	ENGINE #2 MODEL YEAR:	ENGINE #2 SERIAL NUMBER:	ENGINE #2 HORSE POWER
ENGINE #3 MANUFACTURER:	ENGINE #3 MODEL YEAR:	ENGINE #3 SERIAL NUMBER:	ENGINE #3 HORSE POWER
ENGINE DRIVE TYPE: ☐ INBOARD ☐ I / O ☐ OUTBOARD ☐ JET		FUEL TYPE: ☐ GAS ☐ DIESEL ☐ ELECTRIC	MAXIMUM SPEED:

TRAILER INFORMATION

IS THERE A TRAILER TO INSURE: ☐ YES ☐ NO
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TENDER INFORMATION

DO YOU WANT TO SCHEDULE A TENDER EXCEEDING 16FT IN LENGTH AND 35HP? ☐ YES ☐ NO			
TENDER MANUFACTURER:	TENDER MODEL YEAR:	TENDER LENGTH:	TENDER HULL ID NUMBER:
TENDER ENGINE MANUFACTURER:	TENDER ENGINE MODEL YEAR:	TENDER ENGINE HORSE POWER:	

NAVIGATION AND LAYUP INFORMATION

NAVIGATION LIMITS:	LAY-UP FROM:
	LAY-UP TO:

COVERAGE SELECTION

IMUYT508 (10/09)

Yacht value including motor(s) and unscheduled tender not exceeding 16ft in length and 35hp?

\$ _____

Yacht Deductible ☐ 1% ☐ 2% ☐ 3% ☐ 4% ☐ 5%Liability Options: ☐ \$100,000 ☐ \$300,000 ☐ \$500,000 ☐ \$1,000,000

Personal Effects: \$1,000 (included, \$10,000 included if yacht length is greater than 27')

Additional Personal Effects Options:

☐ \$ 5,000	☐ \$20,000	☐ \$35,000	☐ \$50,000	☐ \$ 80,000
☐ \$10,000	☐ \$25,000	☐ \$40,000	☐ \$60,000	☐ \$ 90,000
☐ \$15,000	☐ \$30,000	☐ \$45,000	☐ \$70,000	☐ \$100,000

Medical Payments: \$10,000 (included)

Additional Medical Payments Options:

☐ \$10,000 ☐ \$20,000 ☐ \$25,000 ☐ \$50,000

Commercial Towing and Assistance: \$500 (included, \$2,000 included if yacht length is greater than 27')

Additional Commercial Towing and Assistance Options:

☐ \$1,000	☐ \$3,000	☐ \$5,000	☐ \$7,000	☐ \$ 9,000
☐ \$2,000	☐ \$4,000	☐ \$6,000	☐ \$8,000	☐ \$10,000

Trailer Value \$ _____

Trailer Deductible: \$100

Tender Value exceeding 16ft in length and 35hp \$ _____

Tender Deductible Options:

☐ \$100 ☐ \$250 ☐ \$500 ☐ \$1,000 ☐ \$2,500