

Commercial Hull Application Form



Quote No.:

1 – TYPE OF COVER

Comprehensive: Market Value Agreed value (subject to a valuation from an authorised boat dealer or boat broker)

Use of Boat: Skippered Charter Hire Sail Training Other (details):

2 – INSURED DETAILS

The Insured(s) (in full):

Address: _____ Post Code: _____

Telephone: _____ Business: _____ Mobile: _____

Email: _____ Date of Birth: / / Occupation: _____

Skippers Name: _____ Business website: _____

Car Driver Licence No: _____ Expiry Date: / /

Boat Driver Licence No: _____ Expiry Date: / /

Interested Parties:

Are you registered for GST? Yes No ABN Number

Registered Business Name:

To what extent are you entitled to claim an Input Tax Credit on your insurance premium? %

Has the insured(s): Ever had any insurance refused or cancelled? Yes No

Had any boat or any theft claims in the last five years? Yes No

Been convicted of any offence in the last five years? Yes No

If you have ticked yes to any of these questions, please supply the details and date.

Boating Course? Yes No Details

Boating experience (yrs)

3 – RISK DETAILS (DUTY OF DISCLOSURE OVERLEAF)

Period of Insurance from: / / to / /

Boat Name:

Boat Cover

Hull: Type: Make:

Model: Year Built: Length: mtr /ft

Reg /Sail No: Const. Material:

Max Speed: kts HIN No.

Motor/s: Make: No. of

Serial No 1: Year: Motor/s Power: HP

Serial No 2: Year: Motor/s Power: HP

Type of motor: Inboard Outboard Stern drive Jet

Inboard runabout: Rear mount Mid mount

Fuel: Petrol Diesel Gas

Trailer: Make: Year:

Registration No: Length:

Sailboats Only – Mast, Spars & Rigging:

Running backstays Yes No Inline Spreaders Yes No
(2 or more)

Sweptback Spreaders 3 or more Yes No Carbon Mast Yes No

Rod Rigged Yes No Age of rig?

Legal Liability

Select liability required: \$5,000,000 \$10,000,000 \$20,000,000

Do you require water skiing legal liability cover? Yes No

No. of Passengers: Skipper: Yes No

Is food or drink supplied? Yes No

Market Value

Total Sum Insured

Agreed Value

Separate values required for each component of the boat. A valuation from an authorised boat dealer or boat broker must be attached.

Hull

Motor

(including fuel tanks)

Trailer

Mast, Spars & Rigging

Sails

Equipment & Accessories

Boat Tender

Agreed Value

Total Sum Insured

Personal Effects \$5,000

(automatic cover if applicable)

Proposed Excess

4 – OPTIONAL BENEFITS

Sailboat racing cover (up to 100nm)	Yes	No		
Breach by Bareboat Hirer or Member of a Managed Recreational Boating Group			Yes	No
Mechanical Breakdown (Motors / Refrigeration units up to 5 years old)	Yes	No		

5 – GENERAL

Details of Commercial work:

Navigation Limits:

Is the boat moored / penned? Yes No

Type of Mooring?

Is the vessel street parked? Yes No

Location of Mooring/Storage:

Post Code:

Date Boat Purchased: / / Price: Date last Surveyed: / /

Is AMSA certificate of survey available? Yes No (if yes, please attach and provide)

6 – DECLARATION

Your Duty of Disclosure

We rely on the information you provide us with, to decide whether to insure you and the terms on which we will insure you.

To comply with your duty of disclosure when first entering into an insurance contract with us, you must tell us everything you know and that a reasonable person in the circumstances could be expected to tell us, in answer to the questions we ask you. This applies to every insured under the policy.

If you fail in your duty of disclosure we may reduce or deny any claim you make or cancel your policy. If you fraudulently keep information from us or deliberately make a false statement we may avoid your contract and treat your insurance as if it never existed.

You do not have to tell us anything that is common knowledge that we should know through our business, that reduces the risk of a claim or that we tell you we do not need to know.

Privacy Act Requirements

The Privacy Act 1988 contains National Privacy Principles which require us to tell you that we collect, handle, store and disclose your personal and sensitive information in order for us to provide you with and inform you about insurance and insurance related services. To do this we may communicate your personal information to our service providers. This will always be done as permitted by the relevant privacy legislation.

I/We acknowledge that as the Insured(s), I/We:

1. **must act** with the **utmost good faith** in respect of any matter relating to this insurance
2. **have a duty of disclosure** as stated in this application form
3. **have provided** the **correct information** on previous losses and insurance history
4. **confirm** that all **answers and statements** in this application **are correct** and that **no information** has been **withheld** which may affect our decision to accept this application or the terms of the proposed policy
5. have received a combined Product Disclosure Statement and Financial Services Guide that relates to the product the subject of this application form. **Yes** **No**

Signature of The Insured(s):

Date: / /

Nautilus Marine Insurance

ABN: 34 100 633 038 **AFSL:** 227186 **P:** 02 8287 3790 **F:** 02 8287 3799

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