

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)

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

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