

Boat Insurance Application Form



Agent: _____

Quote No.: _____ Cover Note No.: _____

Type of Cover

Comprehensive: Market Value Agreed value (subject to a valuation from an authorised boat dealer or boat broker, not available for personal watercraft)

Third Party Only (conditions apply)

Use of Boat: Private Hire/Charter Demonstration Stock Afloat Other (details): _____

Insured Details

Mr Miss Mrs The Insured(s) (in full): _____

Address: _____ Post Code: _____

Telephone: (Home) _____ (Business) _____

Mobile: _____ Email: _____

Date of Birth: _____ Occupation: _____

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? _____% Boating Course? Yes No

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

Had any boat or any theft claims in the last five years? Yes No Boating experience (yrs) _____

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.)

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 other _____

Do you require water skiing legal liability cover? Yes No

Commercial Only:

No. of Passengers: _____ Skipper: Yes No

Is food or drink supplied? Yes No

Market Value Total Sum Insured	
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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 Accident (automatic cover if applicable)	\$50,000.00
Personal Effects (automatic cover if applicable)	\$10,000.00
Total Premium	
Excess	

Optional Benefits

Sailboat Racing: (Sailboat racing up to 100 nautical miles is automatically included.)

Is the sailboat used for official and/or organised races exceeding a distance of 100 nautical miles? **Yes** **No**

Maximum race length: _____ nautical miles Named Sailboat Races greater than 300 nautical miles: _____

Lay up (for trailerable craft only)

Lay up address if different from the Insured(s) address: _____

Cross the months the boat will be in lay up: Number of months lay up required: _____

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC

General

Type of fire extinguisher: Automatic Manual None Transit Risk: **Yes** **No**

Is the boat moored / penned? **Yes** **No** Type of Mooring? _____

Location of Mooring/Storage: _____ Post Code: _____

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

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: _____

Payment Options

Cheque/Money Order Pay By The Month (attach completed direct debit form)

Credit Card: Bankcard Mastercard Visa

Card No: Amount \$ _____ Expiry Date ___ / ___

I authorise the debit of my credit card. Name on card: _____ Signature: _____

NM Insurance Pty Ltd T/as Nautilus Marine Insurance

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