

YACHT PROPOSAL FORM

INSURED DETAILS						
Name of Insured						
Nationality			Date of birth			
Address						
Profession / Occupation/ Type of Business						
Beneficial Owner (If not the Insured)						
Sailing experience &/or qualifications						
Claims history (have you had any claims with this or any other vessel)	NO	YES	Date, amount and details			
Have you ever been refused Insurance?	NO	YES	If YES please provide reason:			
Have you or any other person who will be in charge of your vessel ever been charged with or convicted of any offence relating to dishonesty, theft, fraud, arson, robbery or any other criminal offence which might affect the assessment of this risk		YES	If YES please provide details:			
VESSEL DETAILS						
VESSEL DETAILS						
Vessel name						
Make/Model						
Length – feet/meters			Year Built			
Flag and Registration number						
Hull material			Mast Material			
Date of Survey			Max Designed Speed			
Age of standing rigging						
Purchase Price (ccy)			Purchase date			
(If the insured value is areater than the pure	chase nrice	iustificat	tion for the increase will be required)			



ENGINE DETAILS					
Type of Drive Unit	Outboard / Inboard / Stern Drive / Surface Drives / Jets Azipods / Other				
Make/Model	Year Built				
Number of engines / Horsepower per engine	Fuel type				
Engine serial number(s)					
TENDER AND OUTBOARD DETAILS					
Tender - Make/Model					
Length – feet/meters	Age				
Outboard Motor - Make/Model					
Horsepower	Age				
INSURED VALUES					
Current Market Value of :					
Vessel (ccy)					
Tender/Outboard motor					
Personal Effects (limit any one item £500 unless specifically declar	red *)				
Jet Ski/Jet Boat					
Trailer/Cradle					
Liferaft					
Additional Items (*) *Details and values to be advised by separate schedule					
TOTAL SUM TO BE INSURED (ccy)					



YES YES YES	NO NO NO					
		Laid up period				
YES	NO	Local Club / Offshore / Non Spinnaker				
Mast	(ccy)					
Spars Sails*						
Rigging TOTAL						
		*maximum value set at any one time				
		maximum value set at any one time				
		Fronting data				
		Expiry date				
ANY OTHER INFORMATION: If you are aware of any fact of information which may affect or influence our assessment of the risk, then is should be disclosed. If you are in any doubt as to whether any information may or may not affect our assessment of the risk, you should disclose it for underwriters consideration.						
	YES YES YES Wast Spars Sails* Rigging TOTAL	YES NO YES NO YES NO YES NO Mast (ccy) Spars Sails* Rigging TOTAL Thich may affect or interest to whether any inference or whether any inferen				



IMPORTANT NOTICE

Please read the following carefully before you sign and date the Declaration below.

- The questions on this proposal form, and any other information that we specifically request, relate to information which we consider important to accepting this insurance. Failure to respond accurately and completely to the questions that we have asked may invalidate your insurance.
- We recommend that you should keep a record of any information, including this Proposal Form, supplied to us for the purpose of entering into this insurance.
- All personal information supplied by you will be treated in confidence by AHJ Ltd and will not be
 disclosed to any third parties except where your consent has been received or where permitted by
 law. In order to provide you with products and services this information will be held in data systems of
 AHJ Ltd or our agents or subcontractors.
- AHJ Ltd may pass your personal data to other companies for processing on its behalf. Some of these
 companies may be based outside Europe in countries which may not have laws to protect your
 personal data, but in all cases the AHJ Ltd will ensure that it is kept securely and only used for the
 purposes for which you provided it. Details of the companies and countries involved can be provided
 to you on request.

DECLARATION

Before signing the Declaration please check your answers carefully, particularly if this Proposal Form is not completed in your own hand.

- I/We confirm that the statements and particulars contained in this proposal form are true and complete. I /We will provide details of any alteration to this information as soon as possible prior to commencement of the period of this insurance.
- I/We agree that if any answers have been completed by any other person, such person shall for the purposes be regarded as my/our agent and acting on my/our behalf, and not the agent of AHJ Ltd
- I/We declare that this Proposal Form is for insurance in the normal terms and conditions of the Insurer's policy.

Signature of Proposer (s)		Date of signing	
Title of signatory			
Signing this proposal form d	oes not bind the proposer or the	insurer to complete	this insurance.

Please return this form to Global Yacht Cover via your Insurance adviser

If any information declared on this form should change in any way you must notify us immediately via your Insurance adviser.