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Application for Hull and Machinery Insurance

Section 1 – General Information

Applicant's Name				Broker's Name				
Applicant's Address				Broker's Address				
				Broker's Tel. No. ()				
Nature of Business								
Policy Term				Loss Payable				
Interest Insured								
Vessel's Name	Insured Value	Year Built	G.R.T	Classification	Length	Ship Type	Machinery	# of passengers (if applicable)
1.								
2.								
3.								
4.								
Area of Navigation								
Period of Navigation								
Use of Vessel								
Vessel Last Surveyed								
Name of Surveyor								



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Application for Hull and Machinery Insurance

Surveyor's Recommendations	
Is Protection and Indemnity Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	What Limit?
Where laid-up and out of commission?	
Experience of Captain and Crew	
Loss History?	
Is vessel currently insured?	Name of Insurer
Reason for Change	
Has Policy ever been cancelled or refused renewal?	
Current Premium	
Current Terms and Conditions	
This application does not bind the applicant or the company to complete the insurance but it is agreed that this form shall be the basis of the contract should a policy be issued, and it will be attached to and made a part of the policy. The undersigned applicant declares that to the best of his knowledge, the statements set forth in this application are true. The applicant further declares that is the information supplied on this application changes materially between the date of this application and the time when the policy is issued, the applicant will immediately notify the company of such change.	
Applicant's Signature	Date