

## Yachtsman Euromarine Proposal Form

**IMPORTANT:** - Please check the following information carefully. Your insurance contract is based on the information disclosed by you set out in this proposal. Failure to disclose all material information or any change in the information advised (i.e. information likely to influence the assessment of the risk) could invalidate the insurance. If you are in doubt whether any information is material it should be disclosed. Cover will be subject to the terms and conditions contained in the policy wording.

Please check that you have answered ALL questions before signing and return to Yachtsman Euromarine. Main Street, Clane, Co. Kildare.

### Proposer Details

Full name of Proposer		
Address		
Tel no.	Email	Date of Birth
Occupation(s)		

### Particulars of Vessel (please attach a photograph of vessel if possible)

Name of Vessel	MAKE / MODEL	Serial No:
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Builders name	Length overall
Year of Build	
Is the Vessel registered YES/NO if yes where:	Hull material

Date of Purchase:		Purchase Price: €		
Details of Engines	Make	Year made	BHP	Serial Number <small>(must be advised before theft cover is operated)</small>
Outboard I				
Outboard II				
Inboard				Not Required for inboard motors
What is the maximum speed of vessel with these engines?				Knots/MPH

### Fire & Security Precautions

**Where the craft has inboard engine/s and has a maximum design speed of over 17 knots;**

1. A remote controlled or automatic fire extinguishing system must be fitted in the engine compartment.
2. A manually operated fire extinguisher and a fire blanket must be fitted in the galley (where applicable)

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<b>Sums to be Insured</b>	<b>Total Value</b>
<b>1. Vessel &amp; inboard Machinery</b> (including all items normally given in the vessel specification should it be offered for sale)	€
<b>2. Tender/Dinghy</b> (the vessels name must be shown to comply with this policy) Give Details below:	€
<b>3. Life Raft</b>	€
<b>4. Outboard motor(s) as shown above</b> (please state individual values)	(I) €
	(II) €
<b>5. Road Trailer/Trolley</b>	€
<b>6. Personal Effects</b> e.g. Life Jackets/Yachting Gear. Please note, a limit of €350 applies to any one unspecified item. Please use list attached	€
<b>7. Navigation Equipment</b> e.g. Electronic equipment/radio telephone etc. Please use list attached. Please note unless specifically itemised the maximum amount paid on any one item is €750	€
<b>TOTAL SUM INSURED</b>	<b>€</b>

**I confirm that:**

- In respect of trailered craft, the trailer is fitted with a hitch lock or the trailer wheel is fitted with a wheel clamp, when not in use. YES/NO
- In respect of craft (or their tenders/ dinghies) with outboard motors, the outboard motor are fitted with a proprietary outboard motor lock, or kept in a locked building if away from the vessel. YES/NO
- The Craft is professionally built. YES/NO
- The Craft is not a conversion. YES/NO
- The craft is maintained is a seaworthy condition YES/NO

SPECIALISTS IN MARINE INSURANCE

**Joint Owners & Financial Interest** (Name, Address and Contact details)

**Liability Limits**

Third Party Limit of Indemnity **€3,000,000**

**Use**

The vessel will be used for Private & Pleasure only YES/NO (if NO please give details)

Cruising Range (Please give full details)

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## Mooring, Storage

Where will your vessel be moored?

How will the vessel be moored?     Marina Berth     Swing Mooring     Enclosed Harbour     Other

Do you use a secondary mooring during the summer months?    YES/NO

Specify exact detail of this mooring (Type & Location)

## IMPORTANT NOTICE:

**It will be a warranty of your policy that between the date's 1<sup>st</sup> October to 31<sup>st</sup> March inclusive your vessel must be moored on an approved marina berth (disclosed by you above) or taken ashore when not in use.**

## Extensions:

**Water Skiers Liability**                      YES/NO                      € 1,000,000

**Water Toys Liability**                      YES/NO                      Maximum 2 persons  
at any one time                      € 500,000

**Racing Vessels**                      YES/NO                      Replacement value of the  
Mast, Rigging, Spars & Sails.                      €

SPECIAL MARINE INSURANCE  
Please give details as to  
the type of racing i.e.  
Club, Nationals, Offshore

## I confirm that I and all persons who live with me, (or the directors where the proposer is a limited company):

Are resident(s) in the Republic of Ireland.                      YES/NO

Have had no claims in the past 5 years.                      YES/NO

Have not been convicted of any offence other than minor motoring offences.                      YES/NO

Have not been refused or declined insurance, or had increased premiums,  
or special terms imposed.                      YES/NO

Have not suffered from diabetes, epilepsy, heart condition or any other physical  
infirmary or disease, or had any condition controlled by drugs.                      YES/NO

Have experience of using this, or similar type craft, for more than 1 year  
(this also applies to any other person using the vessel)                      YES/NO

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## General Question

Has the vessel ever been damaged?

What boating experience do you have with this type of craft?

Name of Previous Insurer?

**No of years No Claim Bonus**

Do you have any boating qualifications?

**YES/NO**

**DETAILS:**

Are you a member of the ISA

**YES/NO**

**CLUB:**

**Period of Insurance - 12 months commencing**

**/ /**

**\*NOTE:** The policy is warranted that when the vessel is underway the skipper will be on board & in control. A skipper means you, or a person nominated by you, who must have suitable experience for its declared use and has declared details of any accident or loss.

### DISCLOSURE

You are reminded of the need to disclose facts, which the Insurer would take into account in the assessment and acceptance of this application and to advise the Insurer in the event of any alteration of the risk after commencement of the policy. If you are in any doubt whether certain facts are relevant, please ask us for advice. Failure to disclose all relevant facts may invalidate your policy or may result in your policy not operating fully. You are advised to keep a record (including copies of letters) of all information you give to us of the Insurer when entering into this contract of insurance.

### DECLARATION – very important

**I/We understand the contents of this completed application and I/we declare that the information given is, to the best of my/our knowledge and belief correct and complete. I/We agree that the statements in this application shall form the basis of the contract between the Insurer and myself/ourselves and if the risk is accepted I/we undertake to pay the premium when called upon to do so. I/We understand that our information may also be disclosed to the regulatory bodies for the purposes of monitoring and/or enforcing the Insurer's compliance with any regulatory rules/codes.**

**I/We confirm that I/we have examined the terms of business and summary of cover carefully and agree that the terms and conditions should form the basis of any insurance contract offered to me/us by the Insurers and their acceptance of this application**

Signature(s):..... Date: / /

(all co-owners must sign if there is a joint ownership)

If signing on behalf of a company or organisation, please state position.....

**This Proposal Form is issued by Yachtsman Euromarine. Cover does not commence until this proposal has been accepted and premium paid except as provided in writing by Yachtsman Euromarine.**

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CLIENT NAME: «NAME»

VESSEL NAME: “«VESSNAME»”

## NAVIGATION EQUIPMENT LIST

Please list all items of navigation equipment over € 750 in value, if cover is required. Please refer to policy book under Definitions if in doubt as to what is covered under 'Navigation Equipment'.

NAVIGATION EQUIPMENT	SERIAL NO.	VALUE
TOTAL		

## PERSONAL EFFECTS LIST

Please list all personal effects over € 350 in value if cover is required. Please refer to policy book under Definitions if in doubt as to what is covered under 'Personal Effects'.

ITEM	NUMBER OF ITEMS	VALUE OF EACH ITEM
TOTAL		