

## MARINE HULL INSURANCE PROPOSAL FORM

### INFORMATION (DETAILS OF OWNER)

Broker Name (if any)

Name of Vessel Owner(s)

Address of the Vessel Owner(s)

Fax Number:

Telephone Number :

Mobile Number:

Email Address:

P.O. Box :

Emirates:

Cruising Area(s)

Mooring Location(s)

## VESSEL'S DETAILS

### i. Use of Vessel

- Leisure  Fishing  Trade  
 Commercial Transport  Others, please specify:

### ii. Specifications of Vessel

Name	Type	
GRT/NRT	DWT/LDT	
Year of Built	Name of Glass	
Flag	Ex Name	
Call Sign	Length	
Beam	Draft	
Depth	Engine Make	
Engine Speed	Model	
	Sum Insured	AED

### iii. Fire Fighting Appliances

- Fire Extinguisher  Yes & Number:  No  
Fire Alarm  Yes  No

If yes, where is it connected?

### vi. Security System

- Surveillance Camera  Yes  No  
Burglar Alarm System  Yes  No

Others, please specify:

### v. Additional Coverage Required

- Personal affects  Yes  No

Please provide us with the Sum Insured

Third Party Liability

Yes

No

Please provide us with the limit of Liability

## CLAIMS EXPERIENCE

Losses for Last Three years

Date of Loss	Nature of Loss	Amount Claimed (AED)

Details of Expiring Insurance

Insurer:	Sum Insured (AED):
Annual Premium:	Excess:
Expiry Date:	Other Details:

## OTHER INFORMATION

Trading Area (if any)

Wireless Equipment (if any)

Type of Cargo Carried (if any)

Existing H&M Insurers

P&I Club

Has any Insurer ever refused your proposal or renewal of your policy

Yes

No

If yes, please provide details:

<b>DETAILS OF SURVEY</b>			
<b>Name of Survey</b>	<b>Survey Due</b>	<b>Carried on</b>	<b>Validity</b>
Cargo Ship Safety Construction Certificate			
Cargo Ship Safety Equipment Certificate			
Cargo Ship Safety Radio Telegraphy Certificate			
International Load Line Certificate			
International Oil Pollution Prevention Certificate			
ISM Certificate (if Applicable)			
Class Survey Carried			
<b>DOCUMENTS ENCLOSED</b>			

\_\_\_\_\_  
Date (DD/MM/YY)

\_\_\_\_\_  
Signature and Stamp of Proposer