

Seacoast Program Administrators

**PRODUCER INFORMATION**

Date of Application: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Agency Contact Name: \_\_\_\_\_

Agency Contact Email: \_\_\_\_\_ Phone#: \_\_\_\_\_

Is Applicant a Current Insured of Your Agency:  Yes  No If Yes, for how long: \_\_\_\_\_

Is Account:  Direct Client or  Sub-Produced

**INSURED INFORMATION**

Named Insured(s): \_\_\_\_\_

Named Insured is:  Individual  Partnership  DBA  Corporation

Owner(s) Name(s) & Date(s) of Birth: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Phone: Business #: \_\_\_\_\_

Cell #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Fax #: \_\_\_\_\_ Website: \_\_\_\_\_

Mortgage Holder(s):  Not Applicable

1) Name: \_\_\_\_\_ Loan Balance: \_\_\_\_\_ Loss Payee:  Yes  No

Address: \_\_\_\_\_

2) Name: \_\_\_\_\_ Loan Balance: \_\_\_\_\_ Loss Payee:  Yes  No

Address: \_\_\_\_\_

**OWNER EXPERIENCE**

Certificates/Qualifications/Licenses Held: \_\_\_\_\_

Number of Years in the Tow Boat Industry: \_\_\_\_\_

Number of Years as Tow Boat Business Owner: \_\_\_\_\_ # of Years in Business at Current Location: \_\_\_\_\_

Has Insurance on vessel ever been Denied or Cancelled:  Yes  No

If Yes, please explain: \_\_\_\_\_

Details of Commercial Vessels Owned and/or Skipped in the Last 10 Years:

Vessel Name/Make	Size	Type of Use i.e. tow assist, etc	Area of Navigation	Position: Owner, Skipper, or Both	# of Years

**LOSSES IN PAST 5 YEARS** (On Any Owned or Operated Vessels):  Yes  No If yes, please describe:

Date of Loss	Description of Loss	Status of Loss	Paid to Date	Reserve Set by Carrier	Insurance Carrier

**EXTENDED LOSS HISTORY** Have you, at any time in the last 10 years, been involved in any major Hull & Machinery or Protection & Indemnity losses; whether insured or not?  Yes  No If Yes, please provide brief details including date of loss, type of loss and vessel(s) involved: \_\_\_\_\_

Seacoast Program Administrators

**CAPTAIN/OPERATOR INFORMATION** – Below information required for ALL operators.

- 1) Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Owner:  Yes  No  
# of Years Boating Experience: \_\_\_\_\_ # of Years Towing Experience: \_\_\_\_\_ # of Years With Owner: \_\_\_\_\_  
Licensed:  Yes  No Towing Endorsement:  Yes  No # of Years Licensed: \_\_\_\_\_  
Losses is the past 5 years?  Yes  No If yes, describe: \_\_\_\_\_
- 2) Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Owner:  Yes  No  
# of Years Boating Experience: \_\_\_\_\_ # of Years Towing Experience: \_\_\_\_\_ # of Years With Owner: \_\_\_\_\_  
Licensed:  Yes  No Towing Endorsement:  Yes  No # of Years Licensed: \_\_\_\_\_  
Losses is the past 5 years?  Yes  No If yes, describe: \_\_\_\_\_

**CURRENT OPERATION DETAILS**

Maximum Size of Vessels In Tow: \_\_\_\_\_ Average Size of Vessels In Tow: \_\_\_\_\_  
Maximum Value of Vessels In Tow: \_\_\_\_\_ Average Value of Vessels In Tow: \_\_\_\_\_  
Does Vessel Engage in Salvage Work:  Yes  No  
Homeport City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Docked or Moored: \_\_\_\_\_  
Lay-Up Dates & Location: \_\_\_\_\_ Vessel Afloat:  Yes  No  
Navigation Range (from and to): \_\_\_\_\_  
Miles Offshore:  Lakes, Bays & Sounds  25 miles or less  50 miles or less  100 miles or less  Greater than 100  
If Greater than 100 miles offshore, please describe: \_\_\_\_\_  
Overnight Trips:  Yes  No If Yes, please describe, include duration: \_\_\_\_\_

Are Charters for Hire Ever Offered:  Yes  No If Yes, please describe: \_\_\_\_\_  
Pleasure Use By Owner(s):  Yes  No Pleasure Use During Lay Up?:  Yes  No

**VESSEL DETAILS**

Name: \_\_\_\_\_ Official #: \_\_\_\_\_ HIN #: \_\_\_\_\_ State Reg #: \_\_\_\_\_  
Date of Purchase: \_\_\_\_\_ Purchase Price: \_\_\_\_\_ Cost of Improvements/Upgrades: \_\_\_\_\_  
Survey Date: \_\_\_\_\_ Surveyor: \_\_\_\_\_ NAMS/SAMS Accredited:  Yes  No  
All Survey Recommendations Completed:  Yes  No  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Where Built: \_\_\_\_\_  
Build Year: \_\_\_\_\_ Length: \_\_\_\_\_ Gross Tons: \_\_\_\_\_ Hull/Construction Material: \_\_\_\_\_  
Was Vessel Designed for Specified/Intended Use:  Yes  No  
If No, Please Describe All Modifications: \_\_\_\_\_  
Engines:  Diesel  Gasoline /  Inboard  Outboard  Inboard/Outboard # of Engines: \_\_\_\_\_  
1) Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ HP: \_\_\_\_\_ Hours: \_\_\_\_\_  
2) Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ HP: \_\_\_\_\_ Hours: \_\_\_\_\_  
3) Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ HP: \_\_\_\_\_ Hours: \_\_\_\_\_  
Towing Line & Gear Information: \_\_\_\_\_

Electronics: List all electronics, navigation, communication, and special equipment: \_\_\_\_\_

Trailer Build Year: \_\_\_\_\_ Length: \_\_\_\_\_ Make/Model: \_\_\_\_\_ Serial/ID #: \_\_\_\_\_

Seacoast Program Administrators

**INSURANCE COVERAGES REQUESTED**

Desired Effective Date: \_\_\_\_\_

Hull & Machinery Limit: \_\_\_\_\_ Deductible: \_\_\_\_\_  
 Breach of Warranty Limit: \_\_\_\_\_ (BOW Coverage is available in favor of Financial Institutions Only)  
 Trailer Limit: \_\_\_\_\_ Deductible: \_\_\_\_\_  
 P&I (Liability) Limit: \_\_\_\_\_ Deductibles: \_\_\_\_\_ Bodily Injury \_\_\_\_\_ Property Damage  
 Crew coverage\*:  NA  Accepted  Declined **\*Do Not Include Any Crew Who Have Ownership in Vessel**  
 Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_

Optional Coverages\*\*:

Salvage Liability (Subject to \$500,000 Maximum Sub-Limit):  Yes  No

Other: \_\_\_\_\_ Limit: \_\_\_\_\_ Deductible: \_\_\_\_\_  
 Other: \_\_\_\_\_ Limit: \_\_\_\_\_ Deductible: \_\_\_\_\_  
 Other: \_\_\_\_\_ Limit: \_\_\_\_\_ Deductible: \_\_\_\_\_

Additional Insureds (Required for ALL Additional Insureds to be listed):

- 1) Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Relationship to Vessel and/or Operation: \_\_\_\_\_
- 2) Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Relationship to Vessel and/or Operation: \_\_\_\_\_
- 3) Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Relationship to Vessel and/or Operation: \_\_\_\_\_

**POLLUTION LIABILITY OPTIONS:**

- A) Liability Coverage Provided by Water Quality Insurance Syndicate:
- \$100,000 Limits (US Basic Clean Up Only, Civil Fines & Penalties Excluded)
  - \$300,000 Limits (US Basic Clean Up Only, Civil Fines & Penalties Excluded)
  - \$1,000,000 Limits (Worldwide Broadened Coverage, Civil Fines & Penalties Included)
- B)  Coverage Declined. I DO NOT Wish to Provide any Pollution for my Vessel. I understand the AIMU Pollution Clause 08/01/73 will apply and Wreck Removal Coverage provided under the Primary Hull and P&I Policy will be deleted.

By signing and dating this Application **I CONFIRM THAT THE INFORMATION PROVIDED IS CORRECT AND COMPLETE.**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Date**

**Please Attach Copies of:** Current Survey

FOR THE PURPOSES OF QUOTING: Requesting limits/coverages within this application is not a guarantee of quotation; please refer to the quote for the offer of coverage.

FOR THE PURPOSES OF BINDING: Any discrepancies from the original submission or additions since binding must be requested separately for Underwriters' review

The application must be completed in its entirety or the application will be rejected.