

Vessel Name: _____ Date of Application: _____

Owner's Name: _____

1) Corporate name (if any): _____

2) Present Insurer: _____ Expiration Date: _____

3) Vessel Info:

Year: _____ Make: _____ Model: _____

Length: _____ Construction: Steel F/G Aluminum Other _____

4) Has your vessel ever been part of a recall? Yes No If yes, which vessel: _____

5) Where is your exhaust port located? Transom Side Top(stack) Other _____

6) Is vessel equipped with the following (Y/N)?

Burglar Alarm Yes No

Carbon Monoxide (CO) Detector(s) Yes No If yes, how many: _____

Smoke Detector(s) Yes No If yes, how many: _____

Gasoline Vapor (Fume) Detectors Yes No

Emission Control Device with engine/generator shutdown Yes No

High Water Level Alarm Yes No

Engine High Temp. / Low Oil Pressure Shutoff Yes No

Automatic Fire Extinguishing System W/Manual Override Yes No

If no for any of the above, please explain: _____

10) Date of vessel's last survey: _____ Is vessel NMMA certified? _____

11) Are there any losses in past 5 years? (on any owned vessel): Yes No If yes, list Date, Type, Amount, and Status.

You understand and agree this application is a request for a quote based on the information provided herein. You understand and agree the actual coverage, terms and conditions offered by One80 may be different than your request contained herein. The actual terms and conditions for coverage provided are represented by the policies issued and supersede any request or representations made prior to issuance.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

The applicant represents that the above statements and facts are true and that no material facts have been suppressed or misstated.

Applicant's Signature: _____ Date: _____

Print Name: _____ Title: _____