

Offshore Navigation Application

Named Insured:				
Policy Number:				
Vessel Information:				
Cruising Itinerary:				
Longest anticipated passage between landfall.			 	
Captain / Owner / Crew Experience: Please attach crewmen	nber profiles.			
Please briefly describe your previous offshore experience.				
Have you and your crew preformed Man Overboard Drills?	□ Yes □ No			
Have you completed any offshore-related courses?				
Navigation				
Weather				
First – Aid				
When was the vessel last surveyed?				
Please list any equipment in addition to the equipment listed	below.			
Life raft with current certification	☐ Yes	□ No		
Is the vessel equipped with jack-lines	☐ Yes	□ No		
Safety Harnesses for each member of the crew	☐ Yes	□No		
Life jackets with reflective tape and whistles	☐ Yes	□No		
Sea cock / Through Hull plugs	☐ Yes	□No		
Radar Reflector,	☐ Yes	□ No		
Emergency tiller, or steering	☐ Yes	□ No		
406 MHz. EPIRB	☐ Yes	□ No		
SSB	☐ Yes	□No		
Tool Kit with Spares	☐ Yes	□No		
Sextant	☐ Yes	□ No		
Other equipment:				
Does this yacht comply with ORC regulations	☐ Yes	□ No		

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.