



The application form that follows is aimed to generate information regarding your operation's exposure to risk and guide underwriters to provide the best package of cover and terms available. Please complete all relevant sections in full as accurately as possible as this may form a part of your future contract.

YACHT INSURANCE QUESTIONNAIRE

INSUREDS NAME		INSUREDS AGE		D.O.B.		PRODUCERS CODE: office use only	
MAILING ADDRESS				BENEFICIARY			
CITY		COUNTY		STATE		ZIP	
PHONE				HOME		BUSINESS	
OCCUPATION				LIENHOLDER INFORMATION			
VESSEL NAME				NAME			
EFFECTIVE DATE				NUMBER & STREET			
FROM:		TO:		CITY		STATE	
LAI D UP		ON SHORE		STATE		ZIP CODE	
FROM:		TO:		AFLOAT			
LAI D UP LOCATION (City, State, Province, Country)							
COVERAGES WILL NOT BE PROVIDED UNLESS REQUESTED HEREON							
COVERAGES		SUM INSURED		EQUIPMENT		SAIL	
HULL - PHYSICAL DAMAGE				BILGE PUMPS		OUTBOARD	
TENDER/DINGHY				COOKING STOVE		INBOARD	
LIABILITY COVERAGE				FLAME DETECTOR		INBOARD/ OUTDRIVE	
CREW LIABILITY				CO2/HALON SYSTEM		OTHER	
COMMERCIAL PASSENGER LIABILITY				FIRE EXTINGUISHERS		SAILBOAT Mono. Multi.	
MEDICAL PAYMENTS				ANTI-THEFT DEVICES		PERFORMANCE	
PERSONAL PROPERTY				DEPTH SOUNDER		RUNABOUT	
UNINSURED BOATERS				RADAR		WOOD	
TRAILER				LORAN/DIRECTION FINDER		METAL	
NON-EMERGENCY TOWING				SHIP TO SHORE RADIO		FIBREGLASS	
OTHER				SATNAV/OMEGA		METAL	
				AUX GENERATOR GAS		FIBREGLASS	



SHIELD INSURANCE

shieldinsurancevi.com 340-201-1349

VESSEL INFORMATION:							
YEAR	LENGTH (ft)	DATE PURCHASED	PURCHASE PRICE	PRESENT VALUE	MAX SPEED	REG. No.	Flag
HULL IDENTIFICATION NUMBER:				MANUFACTURER/MODEL			
TENDERS OR DINGHIES:							
ANTI-THEFT PRECAUTIONS:							
NAVIGATION INFORMATION							
MAIN MOORING/ STORAGE LOCATION/ HOME BASE/ HOME PORT:							
WATERS TO BE NAVIGATED:							
WILL VESSEL BE LOCATED BETWEEN 12°40' to 23' 30' NORTH AND 55° - 85° WEST DURING THE PERIOD JULY 1 ST - NOV 1 ST							YES/NO

ENGINE/OUTBOARD MOTOR INFORMATION							
ENG	H.P.	GASOLINE	DIESEL	YEAR	DATE PURCHASED	PURCHASE PRICE	PRESENT VALUE
1							
2							
3							
	MANUFACTURER/MODEL					SERIAL NUMBER	
1							
2							
3							
DATE VESSEL LAST SURVEYED:							ASHORE/AFLOAT

TRAILER INFORMATION			
YEAR	DATE PURCHAED	PURCHASE PRICE	PRESENT VALUE
MANUFACTURER/MODEL:		SERIAL NUMBER:	
DETAILS OF PREVIOUS VESSELS OWNED:			

OPERATOR(S) INFORAMTION (ALWAYS LIST INSURED AS OPERATOR #3)						
	NAME	DATE OF BIRTH	AUTO DRIVERS LICENSE #	STATE	SOCIAL SECURITY	USCG/POWER SQUADRON CERTIFICATE
1						
2						
3						
	VIOLATIONS/SUSPENSIONS (INCLUDING AUTO) IN LAST 5 YEARS				YEARS OF BOAT OWNERSHIP	
1						
2						
3						

