

DOUGLAS

LAMBERT INSURANCE SERVICES

COMMERCIAL FISHING VESSEL INSURANCE APPLICATION

Owner

Name: _____
Address: _____
Home Phone No.: _____ Business Phone No.: _____

General Operating Information

Type of Fishing: _____
Navigation Area: _____
Average No. Days/Trip: _____ Average No. Lay Days Between Trips: _____
If Fleet, are back to back trips undertaken? Yes No N/A
Is Vessel(s) Navigated Full Year? Yes No If No, Lay-up Period and Berth: _____

Hull Information

Name of Vessel: _____ Document No.: _____
Vessel Type/Rig: _____ Hull Construction: _____
Year Built: _____ Builder Name & Address: _____
Hull Dimensions: LOA: _____ Breadth: _____ Draft: _____
Tonnage: Gross: _____ Net: _____
Home Port: _____
Date Purchased: _____ From: _____ Price: _____
Last Haul Out: _____ Major Work: _____
Does Vessel Maintain a Stability Certificate? Yes No

Machinery Information

Main Engines: No.: _____ HP Each: _____ Year Built: _____
Manufacturer /Model No.: _____ Serial No(s): _____
Total Engine Hours (each): _____ Recent Overhaul: _____
Hours Since Last Overhaul: _____ Reason for Overhaul: _____

Other Engines: No.: _____ Purposes: _____ Year Built: _____
Manufacturer/Model No.: _____ Serial No(s): _____
Total Engine Hours (each): _____ Recent Overhaul: _____
Hours Since Last Overhaul: _____ Reason for Overhaul: _____

Electronic Information: List type, Manufacturer, Model No., Serial No. and Age

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Crew Information

Name of Captain: _____
Years of Experience: _____ Date of Birth: _____
Does Captain Own Interest in Vessel: Yes No
No. of Crew (Ex. Captain): Full Time _____ Part Time _____
Does Captain or Crew have US Coast Guard License? Yes No Name(s): _____
Can Crew be characterized as: Steady Transient (circle one)
Has Captain ever had a Hull and Machinery or P&I Claim on a Vessel under his command? Explain: _____

Insurance Information

Has Owner ever had any insurance canceled, non-renewed or declined for coverage? Yes No
If Yes, please identify Underwriter and reason: _____
Does Owner own Vessels not presented to this Company for coverage? Yes No
Current Insurer: _____ Expiration Date: _____
Current Premiums: Hull: _____
P&I: _____
Other: _____
Mortgage: _____
Mortgage Balance: _____
Loss Payee: _____
Limits Desired: Hull: _____ BOW: _____ P&I: _____

Loss Information:(List all Hull and Machinery and P&I Claims for last Five (5) years or all Vessels owned or operated by the Applicant including Vessels sold or lost)

Your Duty to Disclose

Before you enter into a contract of insurance with any company, you have to disclose to the company every matter that you know, or could reasonably be expected to know, that is relevant to the company’s decision whether to accept the risk of the insurance and if so on what terms. Failure to answer all questions fully and accurately may cause reduction or cancellation of coverage.

APPLICANT’S STATEMENT: the answers given herein and all information provided in connection with the declaration are in every respect true and correct. I have not withheld any information relative to this declaration. I will immediately advise any material changes or alterations to the contents of this questionnaire if it should occur during the currency of the hull and machinery insurance of the vessel. Statements are offered as an inducement to the company to issue the policy for which I am applying.

“The undersigned hereby acknowledges, understands and agrees that any insurance policy or services provided in connection herewith are being provided based upon, and in reliance upon, the credit of the vessel(s) insured, regardless of whether of the credit of the named insured is also relied upon. The undersigned hereby further acknowledges and understands that in the event of any failure to pay for premiums or charges for any insurance policy or services provided to the vessel(s), the insured vessel(s) may be arrested, subject to in rem proceedings and sold at public or private auction in accordance with the Commercial Instruments of Maritime Lien Act (46 USC § 31301, et seq.) and any amendments thereto. The undersigned further acknowledges, understands and agrees that the prevailing party in any action arising in connection with the failure to pay for such services, whether in personam or in rem, shall be entitled to reasonable attorneys’ fees and costs.”

Owner/Applicant Signature: _____ Date: _____

Producer Signature: _____ Date: _____