



Marine proposal form

Date produced on :
Quote required by :

Intermediary details (to be completed by your insurance intermediary)

Intermediary Name :
Address :

Postcode :
Contact person :
Direct Telephone no (inc code) :
Email address :

Existing Insurance Details

Does the Assured currently have or have they previously had any other Marine insurance cover in place?

If Yes, please state:

Name of insurer :
Period of Insurance:

Your Details

Name of the Assured:

Location of premises and/or yard:

Postcode :

How long has the business been in operation?
Please state any professional qualifications that the management have:

How many people do you employ?

Claims experience

In the past 5 years, have any claims been made?

If Yes, please provide the following details of each incident:

Date of intimation	Brief description of claim	Total payments including costs	Total outstanding reserves	Open/ Closed

Have all claims been notified to Insurers?

General Information

Have you ever been refused Marine insurance or quoted increased premiums or special conditions?

If Yes, please provide details :

Marine Liability Section

Please state the Limit of Liability that you require?

£

What terms of business do you operate under? (e.g. Ship and Boat Builders National Federation conditions)

Please provide a brief description, including type, age, capacity and condition of:

Buildings:	<input type="text"/>
Slipways	<input type="text"/>
Repair docks	<input type="text"/>
Other, please state	<input type="text"/>
Which of these do you own?	<input type="text"/>

Please provide details of all cranes, hoists, lifts, marine railways, their age and when last surveyed:

Item	Age	Date last surveyed

Are the statutory requirements for their inspection adhered to?

Please state the type of repair work you carry out:

Hull (no-Hot Work)	<input type="text"/>	%	Engine	<input type="text"/>	%
Welding/Burning (Hot)	<input type="text"/>	%	Boiler	<input type="text"/>	%
Electrical	<input type="text"/>	%	Painting	<input type="text"/>	%
Sandblasting	<input type="text"/>	%	Other	<input type="text"/>	%

Please state the following for all mooring and slip rental:

Number of slips:	
Number rented out:	
Number under cover:	
Number of docks:	
Number of slips at each dock:	
Type of moorings:	
Number of moorings:	
Number rented out:	

How many of the slips or moorings available were rented out during the last year for lay up storage afloat?

Are any fuelling operations carried out?

If Yes, what is the nature (petrol, diesel etc.):

Please describe methods and equipment used for hauling and launching:

Design:	
Power:	
Rated capacity:	
Size:	
Moveable or stationary:	

Please state the number of boats hauled out in the last year:

Please state the largest size vessel in tonnage and the estimated value that you:

	Tonnage	Value £
work on:		
slip or haul up:		
provide moorings for:		
provide mud berths for:		

	Average number	Maximum number
Please state the number of vessels in the repair yard at any one time:		

Please advise the percentage of annual gross receipts for each type of vessel worked on and the hull construction:

Vessel type	Material	%
	STEEL	
	WOOD	
	GRP	
	OTHER	

Please advise the percentage of annual gross receipts for the following activities:

Mooring/slip rental:	%
Hauling out and launching:	%
Fuelling:	%

Please provide details of your annual gross receipts for the last 4 years:

Year	Gross Receipts	Year	Gross Receipts
	£		£
	£		£
Estimated Gross Receipts for the next 12 months (including sub-contracted work):			£

Do you sell vessels either owned by you or on behalf of others?

If Yes, are these insured elsewhere?

Do you build new vessels?

If Yes, are special building policies issued?

Do you undertake ship conversion or reconstruction work?

If Yes, what percent of annual ship repairing gross receipts does this represent?

Do you do work on vessels that is not repair, conversion or reconstruction work?

If Yes, please describe the nature of work involved and state the percent of annual ship repairing gross receipts that this represents:

Is any work conducted away from the yard?

If Yes, please state the locations within the UK and overseas, including the type of work carried out, and the percent of annual ship repairing gross receipts that this represents:

Do you carry out any other incidental work of a non-marine nature?

Is cargo ever discharged from or contained in vessels being worked on, or in the care, custody or control of the yard?

Do you sub-contract out any part of your work?

If Yes, on what conditions are the sub-contractors employed and for what work:

What percent of annual gross receipts does this represent?

Do you own any mechanically propelled marine craft?

Do you engage in towage?

If Yes to either of the previous two questions, are these insured elsewhere?

Are your docks, repair berths etc. tidal?

Do craft being repaired take the ground at low tide?

Please describe the state and type of berth:

Is any work carried out on American and/or Canadian vessels?

If Yes, please state the percentage of your turnover that results from this type of work: %

Marine Liability Risk Management

Please give details of the disposal of flammable waste, including frequency and means:

How close is the nearest public fire station?

Please give details and types of all fire extinguishers at the premises and/or yard:

Are you on a mains hydrant system?

Are gas-freeing operations at your yard?

If Yes, do your own employees or sub-contractors perform the work?

If your own employees do gas-freeing work please attach a list of their names, professional qualifications and experience.

How many gas-freeing operations are carried out annually?

Do you employ your own night watchmen?

Are your premises within a properly maintained and recognised security fence?

Material Facts

All material facts must be disclosed. Failure to do so could invalidate the policy. A material fact is one which is likely to influence an insurer in the acceptance and assessment of the risk presentation. If you are in any doubt as to whether a fact is material then it should be disclosed to the insurer. If any changes in circumstances arise during the period of insurance cover please provide your insurer with details.

A specimen copy of the policy wording is available on request. We recommend you keep a record (including copies of letters) of all information provided to the insurer for your future reference. A copy of the completed proposal form will be supplied on request within a period of three months after its completion.

Disclosures should be clear and specific. The insurer will not be deemed to have knowledge of any information generally referred to (for example the contents of company websites listed in the proposal form) or any matter not expressly drawn to our attention.

Data Protection Act

For the purposes of the Data Protection Act 1998, the Data Controller in relation to any personal data you supply is Aviva Insurance Limited.

Fraud Prevention and Detection

In order to prevent and detect fraud we may at any time share information about you with other organisations and public bodies including the Police.

Insurance Administration

The insurer, its associated companies and agents, reinsurers and your intermediary, may use information you supply for the purposes of insurance administration. It may be disclosed to regulatory bodies for the purposes of monitoring and/or enforcing the insurer's compliance with any regulatory rules/codes.

Your information may also be used for offering renewal, research and statistical purposes and crime prevention. It may be transferred to any country, including countries outside the European Economic Area for any of these purposes and for systems administration. In assessing any claims made, the insurer or its agents may undertake checks against publicly available information

(such as electoral roll, county court judgements, bankruptcy orders or repossessions). Information may also be shared with other insurers either directly or via those acting for the insurer (such as loss adjusters or investigators).

In the case of personal data, with limited exceptions, and on payment of the appropriate fee, you have the right to access and if necessary rectify information held about you.

Credit Searches and Accounting

In assessing your application the insurer may search files made available to it by credit reference agencies who may keep a record of that search. The insurer may also pass to credit reference agencies information it holds about you and your payment record. Credit reference agencies share information with other organisations, enabling applications for financial products to be assessed or to assist the tracing of debtors or to prevent fraud.

The insurer may ask credit reference agencies to provide a credit scoring computation. Credit scoring uses a number of factors to work out risks involved in any application. A score is given to each factor and a total score obtained. Where automatic credit scoring computations are used by the insurer, acceptance or rejection of your application will not depend only on the results of the credit scoring process.

Sensitive Data

In order to assess the terms of the insurance contract or administer claims that arise, the insurer may need to collect data that the Data Protection Act defines as sensitive (such as medical history or criminal convictions). By proceeding with this application you will signify your consent to such information being processed by the insurer or its agents.

Marketing

Aviva group and its agents may use your information to keep you informed by post, telephone, e-mail or other means about products and services which may be of interest to you. Your information may also be disclosed and used for these purposes after your policy has lapsed. If you do not wish your information to be used for these purposes please write to Aviva, FREEPOST, Mailing Exclusion Team, PO Box 6412, Derby, DE1 1SB.

DECLARATION

You have read and checked the statements in the proposal form and agree its contents. You declare that the information provided is, to the best of your knowledge and belief correct and complete. You agree that any statements in the proposal form shall form the basis of the contract between the Insurer and you and if the risk is accepted You undertake to pay the premium when called upon to do so. You understand that your information may also be disclosed to regulatory bodies for the purposes of monitoring and/or enforcing the Insurers compliance with any regulatory rules/codes.

Signed:		Date:	
Position Held:			

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