

# **Boat Insurance Application Form**

AGENT:	
QUOTE NO.:	COVER NOTE NO.:

# TYPE OF COVER

**Comprehensive:** Market Value Agreed value

(subject to a valuation from an authorised boat dealer or boat broker, not available for personal watercraft)

Third Party Only (conditions apply)

Use of Boat: Private Hire/Charter Demonstration Stock Afloat

Other (details):

# **INSURED DETAILS**

Mr	Miss	Mrs	The Ir	ısured(s) (ir	n full):					
Address:								Post Code:		
Telephone:	(Home)				(Business)					
Mobile:					Email:					
Date of Birt	h: /	/			Occupation:					
Car Driver I	licence No:							Expiry Date:	/	/
Boat Driver	Licence No:							Expiry Date:	/	/
Interested	Parties:									
Are you reg	istered for GS	ST?	Yes	No	ABN Number:					
Registered	Business Nam	ie:								
To what extent are you entitled to claim an Input Tax Credit on your insurance premium?						mium?	%			
Has the insured(s): Ever had any insurance refused or cancelled?					cancelled?	Yes	No			
Had any boat or any theft claims in the last five years?					Yes	No				
Been convicted of any offence in the last five years? Yes No					No					
(If you have tie	cked yes to any o	f these ques	tions, pleas	se supply the d	etails and date.)					
Boating Co	urse?	Yes	No							
Details										
Boating exp	perience (yrs)									

# RISK DETAILS (DUTY OF DISCLOSURE OVERLEAF)

**PERIOD OF INSURANCE FROM:** TO: 1

**BOAT NAME:** 

**Boat Cover** 

Hull: Type: Make:

Model: Year Built: Length: mtr / ft Reg /Sail No: Const. Material: Max Speed: kts

HIN No.

Motor/s: Make: No. of

Serial No 1: Year: Motor/s Power: ΗP Serial No 2: Motor/s Power: ΗР Year: Type of motor: Outboard Stern drive

Inboard runabout: Rear mount Mid mount

Inboard

Fuel: Petrol Diesel Gas

Trailer: Make: Year: Registration No: Length:

Sailboats Only - Mast, Spars & Rigging:

Running backstays Yes No Inline Spreaders Yes No

(2 or more)

Sweptback Spreaders 3 or more Yes Carbon Mast Yes No

Rod Rigged Yes Age of rig?

**Legal Liability** 

Select liability required: \$5,000,000 \$10,000,000 other Do you require water skiing legal liability cover? Yes No

**Commercial Only:** 

No. of Passengers: Skipper: Yes No Is food or drink supplied? No Yes

**Market Value Total Sum Insured** 

**Agreed Value** 

Separate values required for each component of the boat. A valuation from an authorised boat dealer or boat broker must be attached.

Hull

Motor

(including fuel tanks)

**Trailer** 

Jet

**Mast, Spars** & Rigging

**Sails** 

**Equipment & Accessories** 

**Boat Tender** 

**Agreed Value** 

**Total Sum Insured** 

**Personal Accident** 

(automatic cover if applicable)

**Personal Effects** 

(automatic cover if applicable)

**Total Premium** 

**Excess** 

### OPTIONAL BENEFITS

Sailboat Racing: (Sailboat racing up to 100 nautical miles is automatically included.)

Is the sailboat used for official and/or organised races exceeding a distance of 100 nautical miles? Yes No

Maximum race length: nautical miles Named Sailboat Races greater than 300 nautical miles:

**Lay up** (for trailerable craft only)

Lay up address if different from the Insured(s) address:

Tick the months the boat will be in lay up: Number of months lay up required:

JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC

## **GENERAL**

Type of fire extinguisher: Automatic Manual None Transit Risk: Yes No

Is the boat moored / penned? Yes No Type of Mooring?

Location of Mooring/Storage: Post Code:

Date Boat Purchased: / / Price: Date last Surveyed: / /

## **DECLARATION**

#### **Your Duty of Disclosure**

We rely on the information you provide us with, to decide whether to insure you and the terms on which we will insure you.

To comply with your duty of disclosure when first entering into an insurance contract with us, you must tell us everything you know and that a reasonable person in the circumstances could be expected to tell us, in answer to the guestions we ask you.

This applies to every insured under the policy. If you fail in your duty of disclosure we may reduce or deny any claim you make or cancel your policy. If you fraudulently keep information from us or deliberately make a false statement we may avoid your contract and treat your insurance as if it never existed. You do not have to tell us anything that is common knowledge that we should know through our business, that reduces the risk of a claim or that we tell you we do not need to know.

#### **Privacy Act Requirements**

The Privacy Act 1988 contains National Privacy Principles which require us to tell you that we collect, handle, store and disclose your personal and sensitive information in order for us to provide you with and inform you about insurance and insurance related services. To do this we may communicate your personal information to our service providers. This will always be done as permitted by the relevant privacy legislation.

#### I/We acknowledge that as the Insured(s), I/We:

- 1. must act with the utmost good faith in respect of any matter relating to this insurance
- 2. have a duty of disclosure as stated in this application form
- 3. have provided the correct information on previous losses and insurance history
- 4. **confirm** that **all answers and statements** in this application **are correct** and that **no information** has been **withheld** which may affect our decision to accept this application or the terms of the proposed policy
- 5. have received a combined Product Disclosure Statement and Financial Services Guide that relates to the product the subject of this application form. Yes No

Signature of The Insured(s):	Date:	/ /	1
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## **PAYMENT OPTIONS**

Cheque/Money Order Pay By The Month (attach completed direct debit form)

Credit Card: Bankcard Mastercard Visa

Card No: Amount \$ Expiry Date /

I authorise the debit of my credit card. Name on card:

Signature:



#### NM Insurance Pty Ltd t/as Kawasaki Marine Insurance

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