



West Coast Fishing Vessel Application

Directions

| | |
|--------------------|-----------------------|
| Vessel Owner _____ | Vessel Name _____ |
| Address _____ | |
| City _____ | State _____ Zip _____ |
| Phone _____ | Fax _____ |
| Loss Payee _____ | |

Vessel Details

| | | | | |
|--|-----------------------|---------------------------|------------|----------------|
| Length _____ | Beam _____ | Draft/Depth _____ | Grt _____ | Yr Built _____ |
| By _____ | Where _____ | | | |
| Doc # _____ | Const _____ | Type _____ | Fuel _____ | |
| Last Survey _____ | | Recs Complied _____ | | |
| <input type="checkbox"/> Copy Attached | Market Value \$ _____ | Replacement Cost \$ _____ | | |
| Last Stability Test _____ | Purchase Date _____ | Purchase Price \$ _____ | | |

Machinery Details

| | |
|---------------------------------------|--|
| Engine Year Built _____ | Total Hours Used _____ |
| Make _____ | H.P. _____ |
| Date of Last Overhaul _____ | Engine Hours Since Last Overhaul _____ |
| Age/Type of Auxiliary Engine(s) _____ | |

Details of Any Major Refit/Overhaul on Hull & Machinery During the Last 5 Years *(Include Dates)*

Approximate Cost \$ _____

Insurance Details

| Effective Date _____ | | |
|------------------------|----------|------------|
| | Limits | Deductible |
| Hull & Machinery | \$ _____ | \$ _____ |
| Trailer/Skiff | \$ _____ | \$ _____ |
| Protection & Indemnity | \$ _____ | \$ _____ |
| Breach Of Warranty | \$ _____ | \$ _____ |
| War Risks | \$ _____ | \$ _____ |
| Pollution | \$ _____ | \$ _____ |

Previous Insurance Record**Yes No**

In respect of this or any other vessel owned or operated by you, has any insurer cancelled or refused to renew coverage?

☐☐**Losses In Last 5 Years** *(Write details in the remarks section below.)*

Hull & Machinery \$ _____ Protection & Indemnity \$ _____

Trading Warranty

****It is important to include within this all areas where the vessel may navigate as this will become your trading warranty.**

| Fishery | Operating Area | Mo's Operating | Crew # |
|---------|----------------|----------------|--------|
| | | | |
| | | | |
| | | | |
| | | | |

Vessel Laid Up From _____ To _____

Location of Lay _____

Owner Operated? ☐ ☐

If no, name of operator _____

Remarks

Please provide recent photograph of vessel and complete skipper's questionnaire, also copy of current condition and valuation survey is required.

I hereby declare that the particulars and answers given in this application are in every respect true and correct and that i have not withheld any information which could influence the decision of the company in regard to its acceptance.

Signature _____

Date _____