

# Bowline

## BOWLINE INSURANCE PROPOSAL FORM

Proposer's Details

Full Name

Date of Birth  dd.mm.yy

Address Line 1

Address Line 2

Address Line 3

County  Postcode

Contact Name  Telephone No:

Email Address  Mobile No:

Occupation / Nature of Business.

Names of Other Joint Owners / Mortgage / Finance

Are you entitled to No Claims Bonus from a previous Insurer? Yes  No

**If Yes, Please state entitlement in percentage or years and policy details.**

% No of Yrs

Insurer Name:  Policy No:

Do you have any previous boating experience of qualifications for this type of Craft?

Yes  No

**If Yes, Please give full details.**

Have you had any accidents or losses in the past five years in connection with any craft you have sailed or owned?

Yes  No

**If Yes, Please give full details.**

Have you or any member of your family normally residing with you, or directors where the proposer is a Limited Company ever been convicted of any offence other than driving offences or been refused insurance or had terms imposed?

Yes  No

**If Yes, Please give full details.**

//////Boat Details

Name of Craft

Manufacturer

Model / Type

Year Built

Serial No / HIN No:

Date of Purchase

Price paid

Proof may be required.

State Maximum Speed  MPH  Knots

Length of Craft

Construction

**NB: If your boat is not professionally built or built from timber we will require full details.**

Details:

//////Engine Details

Inboard     Outboard     Single     Twin

Make

Outboard Serial No:

**\*Outboard motors must be secured to your boat with an outboard motor lock.**

**HP of each:**

<input type="text"/>	<b>Diesel</b>	<input type="text"/>	<b>Petrol</b>	<input type="text"/>	<b>LPG</b>	<input type="text"/>	<b>Other</b>	Details	<input type="text"/>
<b>HP</b>	<input type="text"/>	<b>HP</b>	<input type="text"/>	<b>HP</b>	<input type="text"/>	<b>HP</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Use

Residential

Towing / Toys

Waterskiing

Racing Risks  
(Please provide details.)

If Racing Risk, Please provide full details.

If this craft is not solely used for private, pleasure use, please provide full details of all commercial use and experience of the Skipper.

Schedule of Insurance

Hull / Inboard engine.  
(If Fitted)

£

Outboard Motors

£

Dinghy / Tender

£

Road Trailer / Trolley

£

**\*Trailers must be secured with an approved wheel clamp or trailer hitchlock.**

Personal Effects

£

Special Equipment

£

Sails / Rigging

£

Other:

<input type="text"/>	£ <input type="text"/>
<input type="text"/>	£ <input type="text"/>
<input type="text"/>	£ <input type="text"/>

Total Value Insured.

£

NB: All Amounts shown should represent current market value.

Fire and Security Precautions

Fire Precautions – Please detail all Extinguishers.

Make:

Type of Fire Extinguishers:

Water

Manual

Dry Powder

Automatic

Locations:

Other.

Please provide more details.

When last serviced?

DD MM YY

Do you use bottled gas?

Yes

No

If Yes...

Is it in a self contained in a self draining locker which drains overboard?

Yes

No

Does delivery tubing conform to the British Standard?

Yes

No

*Security*

Is your boat fitted with:

Purpose made burglar alarm?

Yes

No

Any other precautions to prevent theft?

Yes

No

If Yes: Please provide full details:

//////Mooring

Specify Mooring Location.

When was the Mooring Laid?

Who By?

When was it last inspected?

Who by?

Laid up period 

DD	MM	YY
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 TO 

DD	MM	YY
----	----	----

**Select cruising range**

Inland and non tidal waters of the United Kingdom

Inland and coastal waters of the United Kingdom.

Mediterranean Waters.

North Sea Brest-Elbe limits

Other

If Other, please provide more information.

It is agreed that this form shall be the basis of the contract should a policy be issued and that no information has been withheld that is necessary to enable the underwriters to estimate the risk.

//////Navigating Limits & Additional Information

Please supply additional (In relevant) information on a separate sheet, If necessary.