

## Watercraft Application

| 1. Risk Details                           |              |
|---|--------------|
| Applicant/Insured:                        | Broker name: |
| Effective date (dd/mm/yy):                | Broker code: |
| Loss payable/Lienholder name and address: |              |

- i) Has any insurer cancelled, declined or refused to renew or issue watercraft insurance in the past 5 years? ☐ Yes ☐ No
- ii) Previous carrier name, policy number and expiry date:

| 2. Description of Boat(s) |      |              |       |                                       |        |           |
|---------------------------|------|--------------|-------|---------------------------------------|--------|-----------|
|                           | Year | Manufacturer | Model | Serial # (Hull Identification Number) | Length | Max Speed |
| 1.                        |      |              |       |                                       |        |           |
| 2.                        |      |              |       |                                       |        |           |
| 3.                        |      |              |       |                                       |        |           |

|    | Boat Type   | Hull Material  | Date Purchased (dd/mm/yy) | Waters Navigated  |
|----|---|--|---------------------------|---|
| 1. | <input type="checkbox"/> Sailboat <input type="checkbox"/> Motorboat <input type="checkbox"/> Catamaran<br><input type="checkbox"/> Pontoon <input type="checkbox"/> Personal Watercraft (    hp) | <input type="checkbox"/> Aluminum<br><input type="checkbox"/> Fibreglass |                           | <input type="checkbox"/> Inland<br><input type="checkbox"/> Coastal |
| 2. | <input type="checkbox"/> Sailboat <input type="checkbox"/> Motorboat <input type="checkbox"/> Catamaran<br><input type="checkbox"/> Pontoon <input type="checkbox"/> Personal Watercraft (    hp) | <input type="checkbox"/> Aluminum<br><input type="checkbox"/> Fibreglass |                           | <input type="checkbox"/> Inland<br><input type="checkbox"/> Coastal |
| 3. | <input type="checkbox"/> Sailboat <input type="checkbox"/> Motorboat <input type="checkbox"/> Catamaran<br><input type="checkbox"/> Pontoon <input type="checkbox"/> Personal Watercraft (    hp) | <input type="checkbox"/> Aluminum<br><input type="checkbox"/> Fibreglass |                           | <input type="checkbox"/> Inland<br><input type="checkbox"/> Coastal |
| 4. | Other – Specify   | <input type="checkbox"/> Aluminum<br><input type="checkbox"/> Fibreglass |                           | <input type="checkbox"/> Inland<br><input type="checkbox"/> Coastal |

- i) Is the boat equipped with cooking or heating facilities? ☐ Yes ☐ No
- ii) Is the boat registered or primarily used in the United States? ☐ Yes ☐ No
- iii) Was a marine survey completed within the last 7 years? ☐ Yes ☐ No
- iv) Will the boat be used for pleasure use only? ☐ Yes ☐ No
- v) Will the boat be used for any business, commercial or rental purposes? ☐ Yes ☐ No

| 3. Description of Motor(s) |      |              |       |          |             |   |                           |
|----------------------------|------|--------------|-------|----------|-------------|---|---------------------------|
|                            | Year | Manufacturer | Model | Serial # | Horse-power | Type  | Date Purchased (dd/mm/yy) |
| 1.                         |      |              |       |          |             | <input type="checkbox"/> Outboard <input type="checkbox"/> Inboard<br><input type="checkbox"/> Inboard/Outboard |                           |
| 2.                         |      |              |       |          |             | <input type="checkbox"/> Outboard <input type="checkbox"/> Inboard<br><input type="checkbox"/> Inboard/Outboard |                           |
| 3.                         |      |              |       |          |             | <input type="checkbox"/> Outboard <input type="checkbox"/> Inboard<br><input type="checkbox"/> Inboard/Outboard |                           |

- i) Is the boat equipped with engines that meet capacity label requirements? ☐ Yes ☐ No

| 4. Description of Trailer(s) |      |              |       |          |                           |
|------------------------------|------|--------------|-------|----------|---------------------------|
|                              | Year | Manufacturer | Model | Serial # | Date Purchased (dd/mm/yy) |
| 1.                           |      |              |       |          |                           |
| 2.                           |      |              |       |          |                           |
| 3.                           |      |              |       |          |                           |

| 5. Operator(s) Information |      |                          |                          |                  |                                 |                       |
|----------------------------|------|--------------------------|--------------------------|------------------|---------------------------------|-----------------------|
|                            | Name | Date of Birth (dd/mm/yy) | Years Boating Experience | Boat Licence No. | Automobile Driver's Licence No. | Boating Courses Taken |
| 1.                         |      |                          |                          |                  |                                 |                       |
| 2.                         |      |                          |                          |                  |                                 |                       |
| 3.                         |      |                          |                          |                  |                                 |                       |

i) Is the principal operator an active member of the Canadian Power and Sail Squadron? ☐ Yes ☐ No

| 6. Loss and Conviction History  |      |                                      |                                  |                             |
|---|------|--------------------------------------|----------------------------------|-----------------------------|
| Provide details of any boat losses within the past 5 years and list any automobile convictions within the past 3 years. |      |                                      |                                  |                             |
|   | Name | Date of Loss / Conviction (dd/mm/yy) | Description of Loss / Conviction | Paid Amount for Losses only |
| 1.  |      |                                      |                                  |                             |
| 2.  |      |                                      |                                  |                             |
| 3.  |      |                                      |                                  |                             |

| 7. Coverage and Premium |                                   |                                   |                                   |
|-------------------------|-----------------------------------|-----------------------------------|-----------------------------------|
| Coverage                | Watercraft 1                      | Watercraft 2                      | Watercraft 3                      |
| Type                    | <input type="checkbox"/> All Risk | <input type="checkbox"/> All Risk | <input type="checkbox"/> All Risk |
| Deductible              | <input type="checkbox"/> \$1000   | <input type="checkbox"/> \$1000   | <input type="checkbox"/> \$1000   |

| Amount of Insurance (Current Market Value) |      |       |         |           |       | Premium          |  |                 |       |
|--|------|-------|---------|-----------|-------|------------------|--|-----------------|-------|
|  | Boat | Motor | Trailer | Equipment | Total | Liability Limits | <input type="checkbox"/> \$1,000,000<br><input type="checkbox"/> \$2,000,000 | Physical Damage | Total |
| 1.   |      |       |         |           |       |                  |  |                 |       |
| 2.   |      |       |         |           |       |                  |  |                 |       |
| 3.   |      |       |         |           |       |                  |  |                 |       |

| 8. Disclosure and Signature   |                 |
|---|-----------------|
| <p>Where (a) an Applicant for this contract gives false particulars to the prejudice of the insurer or knowingly misrepresents or fails to disclose any fact in any part of this application required to be stated therein; or (b) the Insured contravenes a term of the contract or commits a fraud; or (c) the Insured willfully makes a false statement in respect of a claim, a claim will become invalid and the Insured's right to recovery is forfeited.</p> <p>The Applicants have reviewed all parts and attachments of this application and acknowledge that all information is true and correct and understand that this application for insurance is based on the truth and completeness of this information.</p> <p>I have provided personal information in this document and otherwise and I may in the future provide further personal information. I authorize my broker or insurance company to collect, use and disclose or verify any personal information using recognized organizations, as necessary, subject to the law and to my broker's or insurance company's policy regarding personal information, for the purposes of communicating with me, assessing my application for insurance and underwriting my policies, evaluating claims, detecting and preventing fraud, and analyzing business results. Some of this personal information may include, but is not limited to, my credit information and claims history. I confirm that all individuals whose personal information is contained in this document have authorized that I agree to the above on their behalf.</p> |                 |
| Signature of Applicant/Insured  | Date (dd/mm/yy) |
| Signature of Broker   | Date (dd/mm/yy) |