

**HULL AND P&I INSURANCE APPLICATION**



**Applicant:** \_\_\_\_\_ **Producer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Website:** \_\_\_\_\_

**Proposed Effective Date:** \_\_\_\_\_

**Operations Description:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Any operations discontinued last 3 years? If so, describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Any material change in operations expected in next 12 months? If so, describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Owners/Operations Management's Previous Experience:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**If an independent safety audit has been conducted within the last 3 years, please attach a copy of the report and any recommendations made.**

**Receipts:** Last 12 months: \_\_\_\_\_

For year 12 to 24 months prior to now: \_\_\_\_\_

Projected for next 12 months: \_\_\_\_\_

**Navigation Limits:** \_\_\_\_\_

\_\_\_\_\_

Advise the start and end dates of any regular lay-up periods: \_\_\_\_\_



**Loss Experience:** Attach previous insurer's loss exhibit for last 5 years.

**Current Insurer:** \_\_\_\_\_

**I acknowledge that any quotation that may be made by underwriters is based upon the above information, and any misrepresentation and/or omission may prejudice and/or void coverage. Further, I acknowledge that misrepresentation may be deemed a crime, subject to enforcement by civil fines and/or criminal penalties. I certify that the information provided is, to the best of my knowledge, accurate and correct.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

