

**PRIVATE PLEASURECRAFT PROPOSAL**



**THE INSURED**

Have you been insured with Mariner before? Y  N  Boating Club: \_\_\_\_\_

How did you hear about us? Broker/Boat Club  TradeMe  Google  from a Mariner Client  Print Media

Other: \_\_\_\_\_ Broker: \_\_\_\_\_

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

**OR** Company / Trust Name (if applicable): \_\_\_\_\_

Residential Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Postal Address (if different): \_\_\_\_\_ Postcode: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Email: \_\_\_\_\_

*(Note: Your renewal invitation will be emailed to this email address, if you wish to change at any stage please advise us).*

Occupation (Note: Director or Manager is not sufficient) \_\_\_\_\_

**PERIOD OF INSURANCE REQUIRED**

From: \_\_\_\_\_ at 4.00 pm New Zealand time for a period of 12 months.

**FINANCE COMPANY / INTERESTED PARTY: (if applicable)**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

**SECTION A: THE INSURED VESSEL**

Will the vessel be used for Charter/Commercial use? Y  N  **If Yes, do not proceed, please contact us.**

Has the vessel been advertised for sale during the past 12 months? Y  N  If Yes, at what price: \$ \_\_\_\_\_

Date Purchased: \_\_\_\_\_ Price Paid: \$ \_\_\_\_\_ Vessel Name: \_\_\_\_\_

Type of Vessel:  Trailered Power Boat  Sailing Catamaran / Trimaran  PWC Jetski / Jetboat  
 Trailer Yacht  Sailing Dinghy / Dinghy  Yacht  Launch  
 Other: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_

Year Built: \_\_\_\_\_ Construction Material: \_\_\_\_\_ Length: (M/ft) \_\_\_\_\_

Fire Extinguisher Kept on Board? Y  N  If a gas installation is aboard, does it comply with NZ standards? Y  N

How is your boat usually stored?  Marina  Trailer  Piles  Swing Mooring  Hardstand  Drystack

Location: \_\_\_\_\_

**TYPE OF PROPULSION:**

Engine 1: Make \_\_\_\_\_ HP: \_\_\_\_\_ Year: \_\_\_\_\_ Serial No. \_\_\_\_\_

Fuel: Petrol  Diesel  Engine Type: Shaft Drive  Outboard  Sterndrive  Jet  Sail Drive  Pod Drive

Engine 2: Make \_\_\_\_\_ HP: \_\_\_\_\_ Year: \_\_\_\_\_ Serial No. \_\_\_\_\_

Fuel: Petrol  Diesel  Engine Type: Shaft Drive  Outboard  Sterndrive  Jet  Sail Drive  Pod Drive

**TRAILERBOAT OR PERSONAL WATERCRAFT (JETSKI) ONLY MUST COMPLETE THIS SECTION:**

**SECURITY:** *Your vessel and/or trailer, when unattended, must be protected with a locked, recognised security device.*

*Examples of recognised security devices can be found at [www.marinermarine.co.nz](http://www.marinermarine.co.nz)*

What type of security do you use? Cable Lock  Coupling Lock  Wheel Clamp

Other: \_\_\_\_\_ Trailer Registration: \_\_\_\_\_

Where is the vessel stored? Driveway  Locked Garage  Yard  Other: \_\_\_\_\_

Is your vessel/trailer craft ever moored on a swing mooring or marina berth? Y  N  Frequency: \_\_\_\_\_

Location: \_\_\_\_\_ Length of time: \_\_\_\_\_

**LAUNCHES / YACHTS MUST COMPLETE THIS SECTION:**

**FISHING GEAR EXTENSION:** *(If applicable we will add this to the 'Total Sum Insured' below in 'Insured Amount')*

Value of Fishing gear not insured elsewhere, that is permanently stored aboard a yacht or launch that you would like to be covered also? \_\_\_\_\_

What are the security arrangements? \_\_\_\_\_

**YACHT RIGGING / RACING COVER**

Please advise if the following attributes apply: Running Backstays? Y  N  Carbon Spars? Y  N

Canting Keel? Y  N  What age is the standing rigging? \_\_\_\_\_ Years, or: Unknown Y

Do you want Racing Cover? Y  N  If Yes, do you require cover for Windward / Leeward racing? Y  N

What categories of cover are required? CAT 5  CAT4  CAT 3  CAT 2

**INSURED AMOUNT**

**COVER REQUIRED:**

**SUM INSURED**

**HULL:** *(Including where applicable, spars, sails, engines, dinghy and other accessories that are normally sold with the vessel)* \$ \_\_\_\_\_

**TRAILER VALUE:** *(If applicable)* \$ \_\_\_\_\_

**TOTAL SUM INSURED:** *(Excluding Fishing Gear Extension above)* \$ \_\_\_\_\_

If the Hull / Trailer Total Sum Insured is higher / lower than the price paid, and you have bought the boat less than 24 months ago, please advise us where the difference lies: \_\_\_\_\_

*If you leave the trailer sum insured blank, we will estimate it. This will be the maximum that will be paid in the event of a loss of your trailer. If you wish to revise this you must let us know in writing.*

**SECTION B: THIRD PARTY LEGAL LIABILITY INSURANCE**

Cover for \$10,000,000 is included unless otherwise noted on your policy schedule.

**MAIN PROPOSER AND OPERATOR DETAILS**

1. Name: \_\_\_\_\_ Year of Birth: \_\_\_\_\_

Marine / Boating Qualification(s) *(if any)*: \_\_\_\_\_

Years of Experience: \_\_\_\_\_ Type of Vessel: Trailerboat  Personal Watercraft  Other: \_\_\_\_\_

2. Name: \_\_\_\_\_ Year of Birth: \_\_\_\_\_

Marine / Boating Qualification(s) *(if any)*: \_\_\_\_\_

Years of Experience: \_\_\_\_\_ Type of Vessel: Trailerboat  Personal Watercraft  Other: \_\_\_\_\_

---



---

**DISCLOSURE**

1. Have you or your family members, or any other person or entity to be covered by this insurance:

a) In the last 10 years:

- i. Suffered loss or damage exceeding \$1,000 to any vessel (whether insured or not)? Y  N
- ii. Made a vessel insurance claim? Y  N
- iii. Been subject to lawsuit or a legal liability claim? Y  N
- iv. Been bankrupt, insolvent or ever entered into an arrangement with creditors? Y  N
- v. Had a vessel repossessed? Y  N

b) Ever:

- i. Had any insurance declined, cancelled, avoided, renewal refused, terms imposed or claim declined? Y  N
- ii. Engaged in any criminal activity or had any criminal convictions, acquittals or diversion or have any criminal prosecution pending? Y  N

*The information sought by this question is subject to the rights set out in the Criminal Records (Clean Slate) Act 2004*

2. Is there any further information likely to affect this insurance? Y  N

**If you have answered 'Yes' above please provide full details and dates in the space provided below. If further space is required please complete on a separate sheet. Details should also include name of Insurance Company(s) where applicable.**

---



---

3. Who was your boat insurance company previously? \_\_\_\_\_

**IMPORTANT NOTICES AND DECLARATION**

**Mariner Marine Insurance Ltd. is an underwriting agent of Vero Insurance NZ Ltd.**

**Your duty of disclosure:** Subject to the rights set out in the Criminal Records ('Clean Slate') Act, you are under a duty to disclose all material information to Mariner Marine Insurance whether the information is asked for or not. Material information is information that might influence our decision to insure you and if so on what terms and/or premium. All information given must be complete and correct. If you have any doubt as to whether a fact is material then it should be disclosed. The duty to disclose all material information occurs prior to the commencement of cover, if the contract is varied and prior to each renewal. Failure to disclose all material information may result in Mariner Marine Insurance and/or Vero Insurance NZ Ltd avoiding your insurance policy. This means your policy would be deemed never to have existed and any claims would not be payable.

**Privacy Act 1993:** This proposal collects personal information in order to evaluate your insurance requirements for the purpose of deciding whether to issue insurance cover and if so on what terms. The information collected will be held by Mariner Marine Insurance, Building 6, 15 Accent Dr, East Tamaki, Auckland. Failure to provide any personal information requested may result in your application for insurance being declined. Individuals have a right to request access to and correction of their personal information subject to the Privacy Act 1993.

**I/We declare that:**

- 1. Subject to any rights I/we have under the Clean Slate Act, the information given is in every respect correct and complete and all material information has been disclosed to Mariner Marine Insurance.
- 2. This proposal shall be the basis of the contract between us/me and Vero Insurance NZ Ltd, and I am/we are willing to accept cover subject to Mariner Marine Insurance policy terms, conditions, exclusions and any special terms they may require.
- 3. The sum insured represents the current mWarket value of the property to be insured.
- 4. I/We are fully authorised to complete and sign this proposal on behalf of the person/s named in the proposal.

**I/We authorise:**

- 1. Mariner Marine Insurance and Vero Insurance NZ Ltd to give and obtain from other Insurance Companies, Insurance Brokers, the Insurance Claims Register Ltd or any other party any information relating to this or any other insurance held or previously held by me/us and any claims(s) made by me/us.
- 2. Mariner Marine Insurance to use my/our personal information to advise me/us of Mariner Marine Insurance's products and/or services.

**I/We undertake** to inform Mariner Marine Insurance immediately of any material events or changes in circumstances which occur after the commencement of this policy or after any renewal.

**Name of Proposer:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## POLICY BENEFITS

### COVER INCLUDES:

- Sudden accidental physical loss or damage
- Agreed value single sum insured on the vessel which includes, where applicable, spars, sails, machinery, tender, outboards, trailer, equipment and other accessories that would normally be sold with the craft
- Provision to insure fishing gear kept permanently aboard moored craft
- Navigation limits up to 200 nautical miles from North and South Islands of New Zealand.

### AUTOMATIC EXTENSIONS INCLUDE:

- Automatic additions and deletions clause for items bought and sold for the vessel
- Emergency towing costs following a breakdown up to \$2,000 per year
- Crew rescue costs up to \$10,000
- Reimbursement of temporary accommodation costs up to \$1,000 following an accident to your vessel
- Personal effects, your own or guests whilst aboard your vessel and not otherwise insured. Up to \$1,000 for fishing gear and \$5,000 in total
- Reimbursement of costs up to \$1,000 for replenishing, refilling or replacing fire extinguishers and/or safety flares used during an incident giving rise to an admitted claim
- Reimbursement of costs, up to 25% of the sum insured, incurred in preventing or attempting to prevent loss or damage
- Medical expenses up to \$2,000 incurred as a result of an accident to any person while in, upon boarding or leaving your vessel
- Items purchased for the vessel during any one period of insurance automatically covered up to \$25,000 in respect of moored vessels
- Lump sum payment of \$10,000 in total for the accidental death of the insured/s as a result of bodily injury whilst aboard the vessel
- Legal liability arising from the ownership or use of the vessel up to \$10,000,000
- Punitive or exemplary damages \$250,000
- General damages for mental injury \$250,000
- With our prior approval legal costs up to \$10,000 should you or your vessel be involved or implicated in a maritime accident which is the subject of a MSA, TAIC or Coroner's inquiry.

### OPTIONAL EXTENSIONS INCLUDE:

- Full racing cover for yachts
- Bluewater off shore facility.

*This is a resume only and full details are contained in the policy conditions.*

## PAYMENT OPTIONS

### PLEASE CIRCLE OR TICK WHICH OPTION WILL BE YOUR PREFERRED METHOD FROM THE FOLLOWING:

- CHEQUE:** If you wish to pay by cheque, please attach your cheque to this completed proposal and mail back. We can confirm cover pending receipt if you wish us to do so.
- DIRECT CREDIT:** Please make certain the reference 'Boat Name' and your 'Surname' are entered into the payee reference fields.  
Our Bank Account: ASB Bank: 12-3237-0022105-00
- CREDIT CARD:** We accept Visa and Mastercard. Please note that this method does attract a 2% surcharge and will be available to pay over the phone or on our website at <http://marinermarine.co.nz/pay-your-account>.
- INSTALLMENTS:** Monthly payments by direct debit mandate. Fees (\$10 administration fee and 10% loading of total premium) and additional paperwork apply, we will forward these to you in due course. Please note that automatic payments are not an accepted payment method.

**PLEASE NOTE:** *Despatch of payment does not constitute our acceptance of cover.*

*Written confirmation of cover will be despatched confirming inception date.*