

PRIVATE MOORED CRAFT PROPOSAL



THE INSURED

Have you been insured with Mariner before? Y N

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

Other: _____ Broker: _____

Name: _____

Residential Address: _____
_____ Postcode: _____

Postal Address, (if different): _____

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) _____

Boating Club: _____

PERIOD OF INSURANCE REQUIRED

From: _____ To: _____ at 4.00 pm New Zealand time.

FINANCE COMPANY / INTERESTED PARTY: (if applicable)

Name: _____ Nature of Interest: _____

Postal Address: _____

SECTION A: THE INSURED VESSEL

In order to confirm our best terms we find recent photographs of your vessel beneficial.

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: Yacht Launch Sailing Catamaran/Trimaran

Make: _____ Model: _____ Year Built: _____

Construction Material: _____ Length: (m/ft) _____

Type of Propulsion: Shaft Sternleg Saildrive Outboard Jet Pod Drive

Engine 1: Make _____ Year _____ HP _____ Fuel: Petrol Diesel

Engine 2: Make _____ Year _____ HP _____ Fuel: Petrol Diesel

Location of Berth, Mooring or Storage: _____

Marina Swing Mooring Pile Mooring Hardstand Drystack

If a swing mooring, when was it last serviced? _____

The mooring must be of suitable size/scope for your vessel as defined by the appropriate authority.

Will the vessel used for private/pleasure use only? Y N (NOTE: if No, do not proceed - please call us)

How often is the vessel slipped for inspection? Annually Bi-annually Every three years plus

OFFICE USE ONLY

CO: _____ FSL: _____ Excess: _____

U/W: _____ Date: _____ Racing Excess: _____

Do you have a survey for the boat? Y N If yes, how old is it? _____
Note: We require a recent independent-out of-water survey or vessel condition report to cover vessels 20 years or older.

Has the boat been modified in any way? Y N Description: _____

SAFETY ITEMS

Bilge Water Alarm?	Y <input type="checkbox"/> N <input type="checkbox"/>	24 Hour Automatic Bilge pump?	Y <input type="checkbox"/> N <input type="checkbox"/>
Fume Detector?	Y <input type="checkbox"/> N <input type="checkbox"/>	In-service/current fire extinguisher?	Y <input type="checkbox"/> N <input type="checkbox"/>
VHF?	Y <input type="checkbox"/> N <input type="checkbox"/>	In-service/current flare pack?	Y <input type="checkbox"/> N <input type="checkbox"/>
Radar?	Y <input type="checkbox"/> N <input type="checkbox"/>	Gas installation to current New Zealand standards?	Y <input type="checkbox"/> N <input type="checkbox"/>

YACHTS ONLY MUST COMPLETE THIS SECTION:

Please advise if the following attributes apply:

Running Backstays? Y N What age is the standing rigging? _____ Years Unknown

Carbon Spars? Y N Are there any (other than rudder blade) moveable underwater appendages? Y N

RACING COVER

Do you want Racing Cover? Y N

If Yes, what is the highest Category race you require cover for? CAT 5 CAT4 CAT 3 CAT 2

(as defined in 'Safety Regulations of Sailing 2013 - 2016' published by Yachting New Zealand)

If Yes, do you require cover for Windward / Leeward racing? Y N

INSURED AMOUNT

COVER REQUIRED:	SUM INSURED
The Boat <i>(including where applicable, spars, sails, dingy and outboard and other accessories that are normally sold with the vessel):</i>	\$ _____
Fishing Gear <i>(permanently stored aboard the vessel):</i>	\$ _____
TOTAL	\$ _____

If the Sum insured is higher / lower than the price paid, and you have bought the boat less than 12 months ago, please advise where the difference lies: _____

SECTION B: THIRD PARTY LEGAL LIABILITY INSURANCE

Cover for \$5,000,000 is included unless otherwise noted on your policy schedule.

PROPOSER AND OPERATOR DETAILS *(include all who may operate the vessel)*

1. Name: _____ Year of Birth: _____
 Years of Experience: _____ Type of Boat _____
 Qualification(s) *(if any)*: _____

2. Name: _____ Year of Birth: _____
 Years of Experience: _____ Type of Boat _____
 Qualification(s) *(if any)*: _____

3. Name: _____ Year of Birth: _____
 Years of Experience: _____ Type of Boat _____
 Qualification(s) *(if any)*: _____

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' to any of the above questions 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 market 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: _____

MOORED CRAFT 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 \$5,000,000
- 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

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 your premium will attract a 2% surcharge if you wish to pay via Credit Card, please complete the section below.

INSTALLMENT: Please call the office to discuss installment options.

*NOTE: Despatch of payment or transmission of Credit Card details does not constitute our acceptance of cover.
Written confirmation of cover will be despatched confirming inception date.*

CREDIT CARD DETAILS

Please charge my credit card: Mastercard VISA

Card Number:

Name on Card: _____

Payment on Behalf of: _____

Card Expiry: _____ Amount: \$ _____

Cardholders Signature: _____ Contact Phone: _____

