

Coastal Marine Services Limited

Blue Water Vessel Proposal Form



Owner(s) Name:				
Address				
Contact name:				
Telephone No:			Fax No:	
Mobile			E-Mail:	
Manager(s) Name:				
Address				
Contact name:				
Telephone No:			Value of vessel:	
Mobile			E-Mail:	
Mobile			L William.	
Length of time		_		
Vessel owned:		Pui	chase price	2:
Date vessel		Nan	ne of previou	15
purchased			ners of vesse	
Name of		Val	ue of	
mortgagee:		ves		
Amount of		Am	ount of	
original mortgage			rent mortga	ge:
Vessel Name:				
Previous Name of V	essel (if any)			
Type of Vessel:				
Age/Year of Build:				
GT/DWT:				
ISM/IMO No/Status				
Material of Constru	ction:			
Flag				
Class				
Details of Machiner	ry:			
Main Engine Make:				
Model				
RPM		вні		

Details of any major reconstruction/alterations or installation of new machinery:



Period of operation (e.g. Annual)
Cargo Carried:
Cargo Carrieu.
Liner/Tramp/Charter:
Maintenance
President 2 manufacture and subject
Previous 3 years maintenance outlay
Details of I.S.M. Compliance (if applicable)
Details of 1.3.M. Comphance (if applicable)
Details of language of communication land all officers and every fluority
Details of language of communication (are all officers and crew fluent?)
Details of Captain and Chief Engineer
Details of Captain and Chief Engineer
Captain:
Chief Engineers
Chief Engineer:



Number and Crev	of Officers w:	Officers:			Crew:		
National Officers	lity of and Crew:	Officers:			Crew:		
Date of l	Last on Survey:						
Outstand Defects:		YES / NO	If YES	please provio	le а сору с	of last P&I Club Surv	ey
Limit of	Liability:						
Deductil	oles requir	ed:					
Crew an	y one accid						
or occur							
	ny one clai						
	ctive Total	Loss:					
1/4th RE		DC:					
	nal 3/4th R	DC.					
All Othe	are a						
All Othe							
All Othe						/Management.	
All Othe	Have the	If so, p		ses for this C ide details ar			
	Have the	If so, p	lease prov				
	Have the	If so, p	lease prov				
	Have the	If so, p	ease prov	ride details ar	nd amount		
	Have the	If so, p	ease prov		nd amount		
	Have the	If so, p	tails:	ride details ar	nd amount		
Amount	Have the	If so, po	tails:	vide details ar	nd amount		
Amount	Have the	If so, po	tails:	vide details ar	nd amount		
Amount	Have the	ils of curren	t and prev	vide details ar	ces (5 yea		
Amount	Have the	ils of currentim Amount Insurance –	t and prev	vide details ar	ces (5 yea	rs history)	
Amount	Have the  Deta  Cla  Previous  Declined	ils of currentim Amount Insurance –	t and prev	vide details ar	ces (5 yea	rs history) essel owned or	
Amount Year	Previous Declined Cancelled Imposed	If so, portion of the contract	t and prevented by	vide details ar	ces (5 year) ny other vo	rs history) essel owned or No:	
Year  (a) (b) (c)	Previous Declined Cancelled Imposed additiona	If so, portion of the contract	t and prevented by	vide details ar	ces (5 year) ny other volumer: Yes:	essel owned or  No:  No:	
Year  (a) (b) (c)	Previous Declined Cancelled Imposed additiona	If so, portion of the contract	t and prevented by	vide details ar	ces (5 year) ny other volumer: Yes:	essel owned or  No:  No:	



## **CHECK LIST**

## Please ensure that the following supporting documentation is included with this entry form:

1. Copy of MCA Certificate or Local Authority equivalent	}	D ( )
2. Proof of no claims bonus, if applicable	}	Refer to
3. Copy of most recent survey, if applicable	}	Policy

You must complete this DECLARATION carefully which confirms the information you have provided within the proposal form

## **HOW TO MAKE A COMPLAINT**

- 1. Before entering into this insurance contract, you / the policyholder must make a fair presentation of the risk to the Insurer, in accordance with Section 3 of the Insurance Act 2015. In summary, you / the policyholder must:
  - a.Disclose to the Insurer every material circumstance which the Insured knows or ought to know. Failing that, the Insured must give the Insurer sufficient information to put a prudent insurer on notice that it needs to make further enquiries in order to reveal material circumstances. A matter is material if it would influence the judgement of a prudent insurer as to whether to accept the risk, or the terms of the insurance (including premium)
  - b. Make the disclosure in clause (1)(a) above in a reasonably clear and accessible way; and
  - c.Ensure that every material representation of fact is substantially correct, and that every material representation of expectation or belief is made in good faith.
- 2. For the purposes of clause (a) above, you / the policyholder is expected to know the following:
  - a.If the you / the policyholder is an individual, what is known to the individual and anybody who is responsible for arranging his or her insurance.
  - b.If the you / the policyholder is not an individual, what is known to anybody who is part of the Insured's senior management; or anybody who is responsible for arranging the Insured's insurance.
  - c.Whether you / the policyholder is an individual or not, what should reasonably have been revealed by a reasonable search of information available to the Insured. The information may be held within the Insured's organisation, or by any third party (including but not limited to subsidiaries, affiliates, the broker, or any other person who will be covered under the insurance). If the Insured is insuring subsidiaries, affiliates or other parties, the Insurer expects that the Insured will have included them in its enquiries, and that the Insured will inform the Insurer if it has not done so. The reasonable search may be conducted by making enquiries or by any other means.



## **DECLARATION**

I/we declare that I/we have made a fair presentation of the risk, by disclosing all material matters which I/we know or ought to know or, failing that, by giving the Insurer sufficient information to put a prudent insurer on notice that it needs to make further enquiries in order to reveal material circumstances.

I/We undertake to inform you before any contract of insurance is concluded, if there is any material change to the information already provided or any new fact or matter arises which may be relevant to the consideration of our proposal for insurance.

Name of partner/principal/director	
Position	
Signature of partner/principal/director	
Date	