Proposal Form for QBE Marine Pleasurecraft Insurance

This Proposal Form is intended for Pleasurecraft only. If a vessel is operated commercially but the scope of operation is purely recreational then it may be considered Pleasurecraft. Other commercially operated vessels are considered Commercial Hull and should be insured accordingly - please ask QBE or your agent /broker for further details.

Name or Account Number of Insurance Agent or Broker (where applicable): Ratana Tabuteau #00004990.

Section 1 - Owner

Name of Owner					
Postal Address					
Telephone No.		Fax No.		E-mail Address	
Nationality		Occupation		Date of Birth (or if company date established)	

Have you, or any other person or entity who will take charge of the vessel or who has a financial interest in the vessel:

a) Ever had any insurances refused or cancelled? (If YES, please give details below) ☐ YES ☐ NO

b) Suffered any accidents or losses in the last 5 years? (If YES, please give details below) ☐ YES ☐ NO

c) Been charged / convicted of an offence in the last 5 years? (If YES, please give details below) ☐ YES ☐ NO

Section 2 – Hull & Engines

	Vessel Details		***Engine(s) Details***
Vessel Name		How many engines?	
Country of Registration		Manufacturer	
Registration / ID Number		Make/ Model	
Date of Purchase		Serial Numbers	
Power or Sail		Type of engine	☐ Inboard
Make & Model			☐ Jet
No. of Hulls			☐ Outboard
Year of Construction			☐ Other (specify)
Hull Material (e.g. wood, GRP)			
Length (ft)		Turbo Drive	☐ YES ☐ NO
Beam (ft.)		Power (HP)	
Draft (ft)		Cruising Speed (knots)	
Does vessel have stabilizers fitted?	☐ YES ☐ NO	Topspeed (knots)	
Does vessel have lifting keel or centerboard?	☐ YES ☐ NO	Fuel	☐ Diesel ☐ Gasoline

Section 3 – Masts, Rigging, Sails

Type of Rig (e.g. sloop)		Type of Rigging	☐ Wire ☐ Rod ☐ Other (specify)		
Type of Main Mast	☐ Masthead ☐ Fractional	Mast Construction Material		No. of Spreaders	_____
List Sails Carried Onboard					

QBE INSURANCE (THAILAND) COMPANY LIMITED
A member of the worldwide QBE Insurance Group
15th Floor, U Chuliang Building, 968 Rama IV Road, Silom, Bangrak, Bangkok 10500, Thailand
Tel: (66) 02 238 0999 - Extensions 271, 272, 275 (Marine Underwriting) Fax: (66) 02 2380745 (Marine Underwriting);
(66) 02 2380837 (Marine Claims); (66) 02 2380838 (Accounts)

Section 4 - Equipment

Please indicate which items of equipment are fitted or carried aboard and give details where requested:

☐ VHF	☐ Lifejackets	*Quantity*	_____			
☐ SSB	☐ Safety Harnesses	*Quantity*	_____			
☐ Inmersat	☐ Lifebuoys	*Quantity*	_____			
☐ Auto Pilot	☐ Smoke Detectors	*Quantity*	_____			
☐ Compasses	☐ Flares	*Quantity*	_____	*Type*		*Expiry Date*
☐ GPS	☐ Fire Extinguishers	*Quantity*	_____	*Auto or Manual*		*Expiry Date*
☐ Radar Reflector	☐ Tender	*Make*			*Capacity*	*Value*
☐ Depth Sounder	☐ Outboard Motor for tender	*Make*			*Model*	
☐ EPIRB		*Serial No.*			*HP*	*Value*
☐ First Aid Kit	☐ Other Equipment	*Details*				

Section 5 - Operators

Please give the following details for anyone who will operate the vessel while it is underway:

Full Name	Age	Years Sailing	Licence / Formal Qualifications (e.g. Thai Captain Class 1, RYA Yachtmaster, AYA Coastal Skipper)

Section 6 – Navigation Area

What is vessel's normal navigation area?	☐ West Coast of Thailand	☐ Thailand in the Gulf of Thailand		☐ Langkawi, Malaysia	
	☐ All West Coast of Malaysia	☐ East Coast of Malaysia (Peninsular)		☐ East Malaysia (such as Salawak, Borneo, etc.)	
	☐ Singapore	☐ Indonesia, please specify area(s):			
	☐ Others, please specify:				
Where is vessel normally based?					
How is vessel normally stored?	☐ Marina Berth	☐ Fixed Mooring	☐ Own Anchor	☐ Hardstand	☐ Other
If you plan any trips outside the normal Navigation Area during the next 12 months please give details					
If you require cover for a one-off delivery voyage please give details	From:	To:		By Whom:	

Section 7 - Racing

Do you require cover for Club Racing?	☐ YES	☐ NO	If YES, please give Club name
Do you require cover for Regattas?	☐ YES	☐ NO	If YES, please list which Regattas in the space below:

Under Section 5, you stated who will operate the vessel. Please list which of these people will operate the vessel for racing and give details of their previous racing experience:

Name	Experience

Section 8 – Commercial Use (If you are using your boat for private pleasure, please skip this part)

Is Vessel Chartered / Hired Out to another party to use? ☐ YES If YES, please answer questions a) – e) below
☐ NO If NO, please answer question f) below

a) What is the normal charter / hire period: ☐ Hour ☐ Day No. of Day(s) _____ ☐ Overnight No. of Night(s) _____ ☐ Other

b) Is the vessel chartered/hired for purely recreational use? ☐ YES ☐ NO

c) Is a skipper/operator provided by you as part of the charter /hire? ☐ YES ☐ NO

d) Do you use a company to arrange charter/hire on your behalf? ☐ YES ☐ NO If YES, company name

e) Is there a written contract between you and the other party? ☐ YES ☐ NO

f) Please describe what the vessel is used for

Do you supply Food/Drink aboard the vessel? ☐ YES ☐ NO Do you want to include Food/Drink Liability? ☐ YES ☐ NO

How many passengers are you registered to carry? How many crew (including skipper) are you registered to carry?

Section 9 – Other Interests

Does any other party (e.g. co-owner / bank / mortgagee / installment payments) have a financial interest in the vessel? ☐ YES ☐ NO

Do you wish to include this other party as a beneficiary to the insurance? ☐ YES ☐ NO

If YES, please give details
Name
Address
Nature of Interest

Do you employ a boat management company to look after your vessel or manage charters on your behalf? – for commercial used ☐ YES ☐ NO

Do you wish to include this company in the insurance for any third party liability they may incur through management of the vessel? ☐ YES ☐ NO

If YES, please give details
Name
Address

Section 10 – Lay-Up

If your vessel is laid up (not used) for part of the year, we will continue to provide cover against fire, theft and accidental damage and a premium discount will be granted in view of the reduced cover. (Please note that lay-up does not apply to vessels which are out of commission undergoing refit). If a Lay-Up Period applies to your vessel please give details below:

Nature of Lay-Up ☐ Ashore at marina / yard ☐ Afloat at marina ☐ Afloat on fixed mooring ☐ Afloat at anchor ☐ Other (specify)

Lay-Up Location

Lay-Up Months ☐ Jan ☐ Feb ☐ Mar ☐ Apr ☐ May ☐ Jun ☐ Jul ☐ Aug ☐ Sep ☐ Oct ☐ Nov ☐ Dec

Section 11 – Insurance Coverage

1. Currency

Please select whether you wish to insure in ☐ Thai Baht OR ☐ US$ (United States Dollars) (please note we do not provide insurance in other currencies)

2 Basis of Vessel Cover

Please indicate which basis of insurance you require for the cover on your vessel:

☐ Indemnity Basis	The sum insured is based on the current market value of your boat (that is, the secondhand re-sale value) In event of a claim, if parts or equipment have to be replaced as new then depreciation may be applied to allow for the age of the original part or item. PLEASE NOTE - if you insure for less than full market value then you will be considered to be under insured and average will be applied (e.g. if you only insure for 75% of the full market value then your claim may be reduced by 25%)
☐ Replacement Value Basis	*For vessels up to 5 years* old you may insure on a replacement value basis. If you insure on this basis then the vessel sum insured should represent the full replacement value of your boat (that is, the cost of purchasing or building as new). In event of a claim, if parts or equipment have to be replaced then we will replace them as new without deduction for depreciation (some exceptions may apply to canvas/sails and finishes/paintwork).

For certain types of vessels (e.g. historical vessels) specific valuation may not be possible. In such cases you should contact QBE to discuss "Agreed Value" coverage.

3. Sums Insured

Please state the required sums insured in the relevant space:

SECTION 1: VESSEL COVER — Total Vessel Sum Insured

If you wish you may split the sum insured by component:

i) Hull
ii) Engines
iii) Mast Spars Rigging Sails
iv) Equipment
v) Tender Outboard
vi) Trailer

SECTION 2: LIABILITY COVER

SECTION 3: DEATH & DISABILITY BENEFIT (please see maximum limit in proposal note)
a) Limit any one person
b) Aggregate Limit for policy period

SECTION 4: PERSONAL EFFECTS COVER

4. Additional Cover

Do you require cover to include:

- ☐ Vessel Refit - please specify — Refit Location — Refit Dates
- ☐ Inland Transit Cover for Vessel
- ☐ Water Ski Liability

5. Compulsory Passenger Cover

All vessels in Thailand are required by law to carry Compulsory Passenger Cover. If you require QBE to provide cover please select which type of cover you require:

- ☐ TAT Limits — This applies to any vessel operating under a permit from the Tourism Authority of Thailand
- ☐ Standard Statutory Limits — This applies to all other vessels

The number of passengers and number of crew covered under the insurance must match the numbers stated in your vessel registration documents. Please ensure that you check the registration documents before confirming: Number of Passengers _____ Number of Crew _____

Section 12 - Declaration

If there is anything on this form that you do not fully understand, or if there is any additional information that you think may be relevant to the insurance, then please check with QBE marine underwriting department before signing and submitting this Proposal Form.

I / We declare that the information and answers provided by me / us in this Proposal Form are true and correct and may be relied upon by the Insurer in deciding whether to provide insurance cover and at what terms.

Signature _____ Date _____

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