

PROPOSAL FOR HULL INSURANCE

AGENT / BROKER / BRANCH

Name	
Code No.	

Please note that no cover is in force until confirmed by the Company in writing and the premium paid.
Please complete in BLOCK CAPITALS throughout and tick boxes where appropriate.

GENERAL INFORMATION

1. Full name of Proposer (s) including Trading Name (if any)				
2. Postal Address			
			
3. Telephone/Fax Nos./E-mail	Home Telephone		Office Telephone	
	E-mail			Fax

4. Type of trade the vessel is engaged in and nature of cargo carried

5. Master, Officers and Crew :-
Give details of Nationality and Maritime experience

6. What are the Trading Limits ?

7. Policy to commence on

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Policy to be renewed on

<input type="text"/>	<input type="text"/>	<input type="text"/>
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8. Give full details of current/last insurances :

(a) Insured Value

(b) Insurance Conditions

(c) Statistics of premiums and claims over the past three years shown separately. Show any outstanding claims separately.

Year	Premium	Settled Claims	Outstanding Claims
19			
19			
19			

(d) Briefly detail losses over Rs. 25,000/-

9. Has any insurer in respect of any insurance

9.1 declined the insurance, cancelling an existing policy or refused renewal of policy Yes No

9.2 Imposed special terms, and conditions of insuring or continuing to insure including renewal of an existing policy. Yes No

10. Scope of insurance cover required

11.	VALUES TO BE INSURED	SUM INSURED
	(a) Hull	<input style="width: 100%;" type="text"/>
	(b) Machinery	<input style="width: 100%;" type="text"/>
	(c) Any other Interests (Please specify)	<input style="width: 100%;" type="text"/>
	(d)	<input style="width: 100%;" type="text"/>
	(e)	<input style="width: 100%;" type="text"/>
		Total

12. (a) Name of vessel

(b) Place of build

(c) Year of build

(d) Builders name

(e) Place of Registration?

(f) Registered Number

(g) Tonnage : i. Gross

ii. Net

(h) Number in Lloyd's Register of Ships

13. State type of vessel (i.e - Steamer, Tub, Motor Launch, etc.)

14. Type of construction (i.e. - Wood, State kind of wood), steel, iron etc.)? If with out-board Motor, Identification No.

15. What are the navigational aids fitted ?

16. Dimensions : (a) Length

(b) Beam

(c) Draught Loaded

(d) Moulded Depth

17. State type of engine (s), H.P. and fuel used.

18. What is maximum designed speed of vessel ?

19. Has the vessel recently been overhauled, or any major repairs undertaken?
If "Yes", please give details

Yes

No

20. When was vessel last surveyed, where and by whom? Please attach copy of the last survey report.

21. How often are surveys conducted ?

22. (a) Is vessel ever towed or used as a tug ?
If "Yes", also answer questions 22,23,24.

Yes

No

(b) If your vessel is towed give details of the tugs normally used and whether the tugs are used for any purpose other than towage.
Also experience and nationality of the owners and crew.

23. What is the maximum number of vessels towed any one time, by any one tug?

24. Whether towage arrangements are approved by the London Salvage Association?
if "No", who supervises towage ?

Yes

No

25. Passenger capacity

26. If vessel is entered in any classification Society other than the Lloyd's Register of Ships give particulars.

27. Are 'moorings' inspected regularly and maintained in sound condition?

Yes

No

Very Important

YOU ARE REMINDED OF THE NEED TO DISCLOSE ANY FACTS WHICH THE INSURER WOULD TAKE INTO ACCOUNT IN THE ASSESSMENT AND ACCEPTANCE OF THIS PROPOSAL. IF YOU HAVE ANY DOUBTS AS TO WHETHER CERTAIN FACTS ARE RELEVANT, PLEASE ASK YOUR INSURANCE BROKER OR AGENT OR JANASHAKTHI OFFICE. FAILURE TO DISCLOSE ALL RELEVANT FACTS MAY INVALIDATE YOUR POLICY OR MAY RESULT IN YOUR POLICY NOT OPERATING FULLY.

DECLARATION

I/We declare that the information given in this Proposal is to the best of my /our knowledge and belief correct and complete in every detail, and will be the basis of the contract between me/us and Janashakthi Insurance Co. Ltd.

Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Signature :

FOR OFFICE USE

Rated By		Processed By		Credit Approved By	
Rate Approved By		Authorised By		Authorised Date	