

PROPOSAL FORM FOR BOAT INSURANCE

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BOAT INSURANCE APPLICATION

INSURED INSURED OR BUSINESS NAME (in full): ADDRESS: POSTCODE: SUBURB:..... PHONE: (Business) (.....).... PHONE: (Home) (......).... OCCUPATION: DATE OF BIRTH:...../..../....../ EMAIL: Boat Drivers Licence No. Expiry Date:/....... Have you ever had a quote, cover note or policy arranged by Trans Pacific Assurance Ltd? ☐ Yes □ No **HISTORY** Have you, your spouse, your partner or any other interested parties: (Note: history The questions must be completed by Insured.) Ever had any insurance ☐ Yes---details Refused or cancelled? □ No Suffered claims of any nature ☐ Yes---details In the last five years? □ No Been charged or convicted of ☐ Yes---details any offence in the last five years? □ No Are you a member of a Boating Association? ☐ Yes □ No If yes, Name of Association and Membership No. Number of years of boating experience?

COVERAGE DETAILS

SECTION 1 - BOAT COVER - TOTAL SUM INSURED K						
(Boat cover includes: Hull, Motor, Trailer, Mast, Spars, Rigging and Sails, Equipment and Accessories.)						
PERIOD OF INSURANCE: From:/to/						
If other use, provide details:						
Will the boat be used for: Private ☐ Demonstration ☐	Hire and Charter □ Stock Afloat □					
TYPE OF POLICY REQUIRED: COMP (Please place a tick in the boxes provided)	PREHENSIVE Market Value □	Third Party Only 🗖				

SECTIO	ON 2 – PR	OTECTION	I & IN	DEMNITY – Personal	injury and pro	perty damage
Select 7	Γhird Party	□ K 1,000	,000	□ K 2,000,000 □ K 5	5,000,000	
Do you	require W	ater Skiing	Yes			
Numbe	r of Passer	ngers?				
Hull Su	ım Insure	ed Hull K		Motor(s) K	Accesso	ories K
TOTAL (incl. G		ı: K		EXCESS/D	EDUCTIBLE: K	<u></u>
BOAT I	DETAILS					
Interested Parties (if applicable)						
воат	COVER (It	is important	that al	l serial/registration num	nbers are comple	eted.)
	Make and	d Model	Year Built	,	Length/HP/ Construction	HIN/VIN Number
Hull Motor	1					
Motor	2					
Trailer	_					
To reco	rd your eq	uipment an	d acce	ssories if required, ple	ease attach you	r list.
BOAT I	NAME:			Do you require l	Land transit cov	ver? □ Yes □ No
Has you	ur boat bee	en surveyed	l? □ Ye	es 🗆 No		
Date of	last surve	y?/	/ P	lease attach copy of re	eport	
Type of	Motor:	☐ Inboard ☐ Rear Mo	d ount	☐ Outboard☐ Mid Mount	☐ Jet☐ Sterndriver	
		Maximum	Speed	of Boatknots/	kph	
Fuel:	i Diesel □	Petrol 🗖 G	ias			
Turbo-	Charged:	□ Yes □ N	lo			
Fire Ext	inguishers	: • None	☐ Mai	nual 🗖 Automatic		

Description:					
TRAILERABLE CRAFT					
(To be completed for trailerable and off the beach craft only.)					
Is the boat used for official and/or organised racing and/or speed trials? ☐ Yes ☐ No If yes, details:					
Is your boat moored or left on hard-stand when not in use? \square Yes \square No					
Location:					
MOORED CRAFT					
(To be complete for moored craft.)					
Mooring Location or where boat is stored:					
How is Boat Moored/Stored: Swing □ Fore/Aft □ Marina Berth □ Dry Stack □					
Other					
When was mooring last serviced and by whom?					
Yacht Details: Type of Rig: Masthead □ Fractional □ Rod Rigged: Yes □ No □					
Number of Spreaders:					
Mast Construction: Aluminium \square Carbon \square Wood \square Fibreglass \square Aluminium and Carbon \square					
Date when the craft was checked/serviced and by whom: / /					
Details:					
Is the proposed craft used for official and/or organised racing and/or speed trials? Yes □ No □ If yes, please supply full details.					
GENERAL					
Where can boat be inspected?					

Have you had the boat insured during the past 12 months? Yes \square No \square				
Have you advertised the boat +for sale during the past 12 months, and if so for how much? Yes \square No \square				
K				
Has your boat been professionally designed? Yes□ No□				
Has your boat been professionally built? Yes□ No□				
Is your hull or motor modified or performance enhanced in any way? Yes $lacksquare$ No $lacksquare$				
If yes, please list the specific details:-				
Hull				
Motor				
Purchased from: Date:/ Purchase Price: K				

IMPORTANT NOTICE

Your duty of disclosure and answering questions.

The decision we make whether or not to insure you will depend on the information you give us. Before you enter into an insurance contract with us, you must provide us with the information and on what terms your proposal for insurance is acceptable and to calculate how much premium is required for your insurance.

Your duty to disclosure when you enter into this policy with us for the first time You will be asked various questions when you first apply for this policy. When you answer these questions, you must:

- Give us honest and complete answer,
- Tell us everything you know, and
- Tell us everything that a reasonable person in the circumstance could be expected to tell us.

Your Duty of Disclosure when you renew, vary, extend, reinstate or replace your policy

When you renew, vary, extend, reinstate or replace the policy your duty is to tell us before the renewal, variation, extension, reinstatement or replacement is made, every matter known to you which:

- You know or
- A reasonable person in the circumstances could be expected to know, is relevant to our decision whether to insure you and whether any special conditions need to apply to your policy

What you do not need to tell us for either duty

You do not need to tell us about any matter:

- That diminishes our risk,
- That is of common knowledge,
- That we know or should know as an insurer, or
- That we tell you we do not need to know.

Who do the above two duties apply to?

Everyone who is insured under the policy must answer the questions in this way.

What happens if you or they do not comply with the relevant duty?

If you or they do not comply with the relevant duty, we may cancel the policy or reduce the amount we pay if you make a claim. If fraud is involved, we may treat the policy as if it never existed and pay nothing.

DECLARATION

As an insurer will collect your personal and other information in order to decide whether to insure a policy, determines the term and conditions of your policy, compile data and handle claims. In certain circumstances, for example in handling claims, we may have to disclose your personal and other information to third parties such as other insurers, loss adjusters, external claims data collectors, investigators and agents, etc or other parties as required by law. If you provide us with personal information about any one else, we rely on you to have told them that you will provide their information to us, to whom we may provide it, the purposes for which we will use it and that they can access it. If the information is sensitive, we rely on you to have obtained their consent on these matters. You have the right to seek access to your personal information and correct it at any time by contacting us during office hours.

I/we declare the answers and information given by me/us in this proposal are true and correct in all respects. I/we also acknowledge having been clearly informed of the following:

- the nature and effect of my/our Duty of Disclosure;
- the only person whose interests are covered; and
- the most I/we can recover under a claim.

I/we further acknowledge that any cover that may be granted by You, Your agents or employees on completion of this Proposal prior to You advising me/us of its acceptance or declination of this offer to insure, is Interim Cover only.

I/we also acknowledge that I/we have read and understood the Privacy Act information referred to above and consent to the collection, storage, use and disclosure of personal and sensitive information of all persons affected by this proposal. I/we acknowledge that if I/we do not agree to the collection of this personal and sensitive information then unfortunately Trans Pacific Assurance Limited will be unable to process my/our proposal.

Insured's Signature	Date://
Name & Position	