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MARINE COMMERCIAL PROPOSAL FORM

THE POLICY MAY COVER

- 1. LOSS OF OR DAMAGE TO the Hull, Machinery, Engines, Dinghies, and Boats caused by any Perils specified in the applicable Institute Clauses while the vessel is used for the agreed purposes within the Navigating Limits agreed between you and Guardian General Insurance Limited
- COLLISION LIABILITY Legal Liability for loss or damage to third party vessels subject to certain exclusions 2

NOTE: Collision Liability cover pays 3/4ths of your liability up to an amount not exceeding 3/4ths of the Insured Value of the vessel, with respect to the insured vessel colliding with any other vessel.

COVER TYPES

The following brief descriptions of cover types are for guidance only. They are subject to the more precise Terms, Conditions and Exclusions of the policy. Specimen copies of the Institute Clauses are available to you on request.

The policy can be based on any of the following standard cover types:

- Institute Time Clauses-Hulls 1.
- Institute Time Clauses-Hulls Restricted Perils 2
- Institute Time Clauses-Hulls Total Loss, General Average and 3/4ths Collision Liability Institute Time Clauses-Hulls Total Loss Only 3.
- 4
- Institute Time Clauses-Hulls Port Risks 5.
- Institute Time Clauses-Hulls Port Risks including Limited Navigation 6.
- Institute Fishing Vessel Clauses 7.

GENERAL LIABILITY

In accordance with the Institute Protection and Indemnity Clauses

EACH OF THESE QUESTIONS MUST BE ANSWERED COMPLETELY

A. DETAILS OF PROPOSER(S) PLEASE Names of Proposer(s) / Company _____ USE Date of Birth (individual) Marital Status (individual) BLOCK mm/dd/yy LETTERS Profession/Occupation Proposer's Address Email / Website Telephone Nos. Office _____ Cell _____ 1. Please give the name(s) of any Shipping Club or Association to which any of you belong How many years experience do you have in handling this type of craft? _____ 2. 3. Have you ever had any accidents or made any insurance claims during the last five (5) years in connection with any vessel you sailed or owned? YES 🗆 NO 🗆 If 'YES', please state details and upon which company claim(s) was/were made _____ Do you have any professional or other crew (including the primary operator) employed on 4. a permanent or other basis? YES 🗆 NO 🗆 If 'YES', please name crew members together with details and experience 5. Has any insurer or underwriter ever (a) declined your proposal? YES 🗆 NO 🗆 (b) increased your premium? YES 🗆 NO 🗆 (c) increased your excess? YES D NO 🗆 (d) refused to renew your policy? YES 🗆 NO 🗆 (e) cancelled your policy? YES 🗆 NO 🗆 If 'YES' to any of these, please state the reasons together with the name(s) of insurer(s) or underwriters responsible for altering terms to the policy_____ В. DETAILS OF VESSEL Previous name(s) if any 6. (a) Name of vessel Port of Registry and Registration number (b) (c) Type of vessel Wood 🗆 7. Steel D Fiberglass Combination of (a) Material of Hull If 'Wood', please state what kind, and how built (carvel, clincher, diagonal, sewn) _____

	(b)	Is the Vessel fully decked? If 'NO', please describe and state materials								NO 🗆		
		If NO, please desc	ribe ar	io state materials	i							
	(c)	Condition of Vessel			New 🗆	Good I		Fair 🛛		Poor 🛛		
8.	Year	built and Builders or I	Manufa	acturer's Name								
9.	Was	the vessel specially b	uilt for	its intended use'	?				YES 🗆	NO 🗆		
	lf 'NC	D', for what purpose w	as it o	riginally designed	1?							
10	Dimo	ensions of vessel										
10.	Leng				metres/fee	t Length (wat	erline)		met	res/feet		
	-	n (extreme width)				U (orinio)		11101			
		ded depth (keel to de	ck)				o waterline)		met	res/feet		
11.	-	stered tonnage (gross	s/net)		metric tons	5						
	Displ	acement (load/light)			metric tons	5						
12.	Maxi	mum design speed			kmh/knots							
13.	(a)	Number of propelle	rs									
	(b)	Details of engine(s)				(1)			(2)			
		Туре			Make			Make				
		Cylinders				de		Year made				
		Power)		Serial no.				
	(c)	Fuel used										
	(d) Details of gearing and shafts											
11	Dota	ils of bilge pump syste	om fitte	d								
14.	Dela	is of bige pump syste										
15.	Is the	e vessel fitted with pre	essuriz	ed gas cylinders?	?				YES 🗆	NO 🗆		
	lf 'YE	S', please state										
		Type of gas										
	 (b) Where cylinders are kept											
	(c)	Details of delivery tubi	ing (sp	ecity materials) _								
16.	Date	vessel purchased				Price paic	\$			_		
				mm/dd/yy								
17.	7. Values to be insured (a) Hull, Inboard Engines, Machinery and Fittings \$								_			
			(b)	Dinghies and/or	-							
						Total Insured Valu						
			(c)	Protection and I	ndemnity		\$			_		

NOTE: All dinghies and boats must be permanently marked with the name of the parent vessel.

Collision Liability is automatically covered for 3/4ths the value of the Vessel unless otherwise agreed with the Underwriters

C. GENERAL QUESTIONS

18.	Period of Insurance	From	om			to					
			mn	n/dd/yy			mm/dd/yy				
19.	Do you wish to cover the v	vessel for	(a)	Full Cover							
			(b)	Total Loss C	Only						
	Additionally, do you wish to	o include cover for	(2)	Road Transi	t Dieke		YES 🗆	NO 🗆			
	Additionally, do you wish to		. ,	War and Stri			YES D				
20	State fully the purpose for	which the vessel will be used	. ,					-			
20.											
21.	Proposed navigating limits		(a)	Coastal Wat	ers of		only				
	r ropolog navigating innite	(b) Within the Caribbean				only					
			• •	Other							
	If 'Other', please provide details of range										
22.	Where is the vessel usuall	y moored when in commission?									
23.	Where is the vessel propos	sed to be laid-up?	Pla	ice							
	State the period for which the vessel will be laid up From to to										
24.	Will the vessel be removed	d from the water when laid up?					YES 🗆	NO 🗆			
	If 'YES', please state location, and what security arrangements will be made?										
	NOTE: While laid up the Insurance Limited)	vessel must NOT be used as a	a hous	seboat (unles	s previo	usly agreed by	Guardian Gen	eral			
25.	Is the vessel fitted with aut fuel tank space or galley?	tomatic fire extinguishing system	ns in th	ne engine roor	n,		YES 🗆	NO 🗆			
	If 'YES', please state manufacturers of the system										
	If 'NO', please give details of fire extinguishers kept on board										
26.	When was the vessel last	surveyed and name of the surve	eyor?								
27.	Is there a Mortgage or Lier						YES 🗆	NO 🗆			
	If YES, please state the h	name and address of the Financ	e Com	ipany							
28.	A reduction in premium may be granted if you agree to bear a voluntary excess in addition to any compulsory excess.										
	Will you consider bearing such an excess for all claims?										
	If 'YES', please state amou	unt each loss \$									
DE	CLARATION										
I/W	e wish to effect an insuranc	e with Guardian General Insura	nce Li	mited on the T	Terms Co	onditions and Ex	clusions of the	Policy to			
be my/ I/W	issued by the Company. I/ our knowledge and belief tr e agree that this proposal a	We warrant that the statements rue and complete and no materi and declaration shall form the ba s incorporated in the Policy to b	s and al fact asis of	particulars giv has been mis the contract b	ven by m srepreser	e/us in this pro nted mis-stated	posal are to the suppressed or v	e best of withheld.			

Date ____

mm/dd/yy

Proposer's Signature

(Company Stamp)