



BUILDERS RISK APPLICATION

1. BUILDER

(a) Name: _____

(b) Address: _____

(c) Vessel being built for: _____

(d) Address of owner: _____

(e) Years in business _____

2. LOSS PAYABLE TO: _____

3. DESCRIPTION OF VESSEL WHEN COMPLETED: _____

(a) Type of vessel: _____

(b) Wood, Fiberglass, Steel etc.: _____

(c) Propulsion machinery: Gasoline ___ Diesel ___ Horsepower: ___ # of Engines: ___

(d) Molded Dimensions: Length _____ Beam _____ Depth _____

(e) Estimated gross tonnage: _____

4. VALUES: Pre Keel Values: \$ _____ each

Contract Price: \$ _____ each

Additional Values: \$ _____ each

Insured Value: \$ _____ each

Total Value: \$ _____

Is contract price fixed or adjusted? _____

If adjusted, is there a limit of escalation? Yes ___ or No ___. If "Yes" please show the limit of escalation \$ _____

5. TIME FOR BUILDING: Attach schedule, if necessary.

(a) Pre Keel _____ (b) Keel Laying _____

(c) Launching _____ (d) Delivery _____

Number of months of insurance required on each vessel (Pre Keel to delivery) _____

6. PLACE OF COVERAGE: Assured's Plant at _____

(a) Fire and extended coverage rates for boats under construction at the above location.

Fire _____ Extended Coverage _____

Percent of co-insurance _____ %.

Specify is vessel under construction in buildings or in open _____

Is yard fenced? _____ Describe type and height _____

Area Enclosed _____ Is yard under watchman service _____

How many employed _____ Hours covered _____

(b) Are any materials used stored off premises _____

Address _____

Specify fire and extended coverage rates at these locations: _____

Are any of the above areas subject to flooding _____, cyclone, tornado, hurricane or windstorm _____

(c) Are vessels to be moved while in course of construction ? _____

Describe: _____

What type of equipment is used to move vessels ? _____

Are Vessels worked on after they are launched ? _____

Are the vessels taken on trial trips ? _____

7. DELIVERY: Does the builder deliver vessels:

At Yard _____ By land _____

Buyers Premises _____ By water _____

Under Power _____ Towed _____

If towed, is there a release of tower ? _____

8. LOSS INFORMATION: Indicate details of each loss showing vessel name, accident date, type claim & amount. Paid and/or outstanding.

9. PRESENT CARRIER: List details of current insurance showing carrier, form and any other pertinent information _____

The above statements are true and accurate to the best of my knowledge and it is understood that these facts are material to the placement of this insurance.

SIGNED _____

BY THE ASSURED OR OFFICER OF CORPORATION

PRODUCER NAME: _____

ADDRESS: _____

DATE: