

United Marine Underwriters - Boat Insurance 1309 Bluegrass Parkway LaGrange KY 40031 800-477-7140 502-222-0199 502-222-0299 (fax) www.UnitedMarine.net umu@UnitedMarine.net

Important: Use this form to collect the information necessary for a Quote, then log into your Agency Center at www.UnitedMarine.net and request a quote.

Insured Information					
Number of Title Owners (husband and wife = 1 title owner)					
Owner's Name: Address:					
City: State: Zip:					
Vessel Information					
Boat Type: Bass Cruiser Houseboat Pontoon Runabout Sailboat Ski Boat Sport Fish Trawler					
Year: Length: Make: Model:					
Purchase Date: New Purchase Purchase Date: (mm/yyyy) Purchase Price: \$					
Hull Construction: ☐ Fiberglass ☐ Aluminum ☐ Steel ☐ Wood ☐ Other Top Speed:					
Number of Engines:					
<b>Engine Type:</b> $\square$ Inboard $\square$ Stern Drive (I/O): $\square$ Outboard $\square$ Jet $\square$ Other Fuel: $\square$ Gas $\square$ Diesel					
Automatic Fire Extinguishing System in the engine compartment: $\ \square$ YES $\ \square$ NO					
Gas Fume Detector in the engine compartment:					
Does the vessel have any unrepaired damage or deficiencies: $\ \square$ YES $\ \square$ NO					
Is the vessel raced in other than local club events (local club racing allowed for sailboats only):					
Is the vessel used as the primary residence: $\square$ YES $\square$ NO					
Has the vessel been surveyed by a certified Marine Surveyor: ☐ YES ☐ NO Survey Date: (mm/yyyy)					
Trailer - Tender (Dinghy) Information					
Trailer Year: Trailer Length: Trailer Make:					
Tender or Dinghy is a small auxiliary vessel used to service a larger vessel					
Tender Year: Tender Length: Tender Make:					
Tender Engine Year: Tender Engine Hp: Tender Engine Make:					
Vessel Location - Use - Navigation					
Where is the vessel located: (ie: residence, name of marina, private dock)					
City: State: Zip: County:					
Does Insured Live More Than 4 Hours From The Vessel:					
Use of Vessel: ☐ Pleasure ☐ Primary Residence ☐ Charter ☐ Commercial ☐ Other					
Navigational Limit:					
☐ Inland ☐ Great Lakes ☐ Chesapeake Bay ☐ Atlantic - excluding FL ☐ Atlantic - including FL ☐ Gulf ☐ Pacific ☐ Puget Sound ☐ San Francisco Bay ☐ Other:					
Lay Up: The time period the vessel is not used (winter months), a reduction of premium is applied, can be laid up ashore or afloat, is fully covered during lay up if not navigated, not ready for immediate use and not used to live aboard.					
# of months in lay up: Lay up start date (month and day)/					

	Operator Information					
Primary Operator Name:	DOB:	Occupation:				
Years of Boat Ownership:	Years of Boating Experience:					
Operator Has a Safe Boating Certificate Fr	rom: None USCG	☐ USPS ☐ Captain's License				
Total number of minor driving violations in	n the last 3 years:					
Total number of DUI or Reckless driving violations in the last 3 years:						
Prior Owned Boats: This information needs to correspond with ownership experience above. We base our underwriting on the years of boat ownership, not boating experience. If there is additional information on the boating experience that you would like us to consider, please use the comments section on page 3.						
Length: Make: Ye	ears Owned: Length: Mak	ke: Years Owned:				
Length: Make: Ye	ears Owned: Length: Mak	ce: Years Owned:				
# of additional regular operators: $\ \square\ 0$	□ 1 □ 2 □ 3 □ 4 □ > ·	4 see page 3 for additional operators.				
# of any PAID Captain or Crew:	Full Time or Part 1	Γime: ☐ Full ☐ Part				
	Coverages Requested					
Vessel Value: engine value(s) are included in Vessel Value. \$0 for liability only						
Trailer Value: Tender Value: Tender Outboard Value:						
<b>Liability Limit:</b> □ \$50,000 □ \$100,000 □ \$300,000 □ \$500,000 □ \$1,000,000 □ Other \$						
Uninsured Boaters: Limit is based on the type of boat and program. Please see limit when quote is returned.						
Medical Payments: ☐ \$1,000 ☐ \$5,000 ☐ \$10,000 ☐ \$25,000 ☐ Other \$						
Personal Effects: Limit is based on the type of boat or you can select the limit desired. Other 🗆 \$						
Towing-Emergency: Limit is based on the type of boat and program. Please see limit when quote is returned.						
Additional coverage details will be shown on the quote						
	Current Insurance Information					
Company:	Premium:	Expiration Date:				
Any Reported Boat Losses in Last 5 Years	3:	☐ YES ☐ NO				
Has any insurance coverage ever been Cancelled or Refused: $\square$ YES $\square$ NO						
Date of Loss: Date of Loss	s: Date of Loss:	Date of Loss:				
Notes/Comments * Loss Details/Refused Insurance Details: (required if YES to Losses/Refused Insurance)						
v.						

## This page only needed if there are additional operators.

	Additio	nai Operator				
Name:	DOB:		Occupation:			
Years of Boat Ownership:		Years of Boa	ting Experience: _			
Operator Has a Safe Boating ( Total number of Minor driving			•			
Total number of DUI or Reckle Prior Owned Boats:	ss driving violations (for ar	ny motor vehi	cle) in the last 3 ye	ears:		
Length: Make:	Years Owned: _	Length:	Make:	Years Owned: _		
Length: Make:	Years Owned:	Length:	Make:	Years Owned: _		
	Additio	nal Operator				
Name:	DOB:		Occupation:			
Years of Boat Ownership:		Years of Boa	ting Experience: _			
Operator Has a Safe Boating ( Total number of Minor driving						
Total number of DUI or Reckle	· · · -	-	-	-		
Prior Owned Boat:	oo ago.aoo (.o. a.	.,	o.o,oo. o , .			
Length: Make:	Years Owned: _	Length:	Make:	Years Owned: _		
Length: Make:	Years Owned:	Length:	Make:	Years Owned: _		
	Additio	nal Operator				
Name:	DOB:		Occupation:			
Years of Boat Ownership:		Years of Boating Experience:				
Operator Has a Safe Boating (	Certificate From: None	USCG	USPS 🔲 Capt	ain's License		
Total number of Minor driving	violations (speeding ticket	for any moto	r vehicle) in the la	st 3 years:		
Total number of DUI or Reckle Prior Owned Boats:	ss driving violations (for ar	ny motor vehi	cle) in the last 3 ye	ears:		
Length: Make:	Years Owned: _	Length:	Make:	Years Owned: _		
Length: Make:	Years Owned:	Length:	Make:	Years Owned:		