



COMMERCIAL WATERCRAFT RENTAL INSURANCE APPLICATION

Requested Effective Date		General Agent Code: _____ Producer Code: _____	
Applicant Name		Producer Name & Address	
Mailing Address			
City / St. / Zip Code			
Principal Contact; Title			
Physical Address Of Operation; List All Locations		Additional Interest(s) And Relationship To Applicant	
County	Phone Number		
LIENHOLDER		PREMIUM FINANCE COMPANY	
Name And Address		Name And Address	
How Are Watercraft Used By This Operation?			
What Is The Experience Of The Principals With This Type Of Operation?			
ORGANIZATION	OPERATING PERIOD	OPERATING FROM	How Many Years Has Applicant Owned/Operated This Business? ____
<input type="checkbox"/> Individual	<input type="checkbox"/> Year Round	<input type="checkbox"/> Marina	How Many Years Has Applicant Operated From This Location? ____
<input type="checkbox"/> Partnership	<input type="checkbox"/> Seasonally	<input type="checkbox"/> Beach Front	Gross Receipts For This Operation Last Year \$ _____
<input type="checkbox"/> Corporation	From: _____	<input type="checkbox"/> Public Ramp	Projected Gross Receipts For This Year \$ _____
<input type="checkbox"/> Joint Venture	To: _____	<input type="checkbox"/> Other: _____	
<input type="checkbox"/> Other:			
List And Describe All Other Commercial Activities Conducted On The Premise, Whether Owned Or Non-Owned:			
If Owned, Is There Other Insurance In Force? <input type="checkbox"/> No <input type="checkbox"/> Yes, Explain:			
Previous Insurance Carrier: _____		Has Any Company Ever Canceled Or Non-Renewed Insurance For This Applicant? (Missouri residents Need Not Answer)	
Expiration Date: _____		<input type="checkbox"/> No <input type="checkbox"/> Yes, Explain:	
NAVIGATION LIMITS DESIRED & RANGE OF NAVIGATION			
<input type="checkbox"/> US INLAND RIVERS/WATERWAYS ONLY <input type="checkbox"/> COASTAL Up To 25 Miles Offshore <input type="checkbox"/> ATLANTIC <input type="checkbox"/> PACIFIC <input type="checkbox"/> GULF <input type="checkbox"/> BAHAMAS <input type="checkbox"/> GREAT LAKES & TRIBUTARIES <input type="checkbox"/> LAKE MEAD, POWELL OR TAHOE		Extended Navigation Limits - NO BINDING AUTHORITY IS EXTENDED Submit for approval with detailed boating experience resume, MVR and current survey. Offshore navigation limit desired: <input type="checkbox"/> 25 – 50 MILES OFFSHORE <input type="checkbox"/> 50 – 75 <input type="checkbox"/> 75 – 100	
ADDRESS WHERE VESSEL IS KEPT WHEN IN SERVICE:		ADDRESS WHERE VESSEL IS STORED WHEN LAID-UP:	
		<input type="checkbox"/> ASHORE <input type="checkbox"/> AFLOAT (NO LAYUP CREDIT ALLOWED IF AFLOAT) LAY-UP PERIOD (MM/DD/YY) FROM: _____ TO: _____	
WHEN NOT IN USE, VESSEL IS:		WARRANTED ON SHORE LAY-UP PERIOD (MM/DD/YY)	
<input type="checkbox"/> ASHORE <input type="checkbox"/> AFLOAT (NO LAYUP CREDIT ALLOWED IF AFLOAT)		FROM: _____ TO: _____	
FIVE YEAR CLAIMS HISTORY - WATERCRAFT & PREMISES			
Date Of Event	Details Of Loss Or Claim	Amount Of Claim	Status



COMMERCIAL WATERCRAFT RENTAL USE SECTION

How Many Years Has The Applicant Been Doing Business As A Rental Operation?

If A New Venture, List Any Previous Watercraft Rental Experience

Who Is Responsible For Overseeing The Watercraft Rental Operations? Title Date Of Birth

Number Of Rental Operation Employees Employee(s) Ages Are Employees Trained In First Aid, CPR, Etc.? No Yes, Explain:

Describe How Renters Are Screened

How Old Must A Person Be To Rent The Watercraft? How Is Renter Age Verified?

What Type Of Instruction Is Provided To Each Renter? Who Provides The Instruction?

Are Renters Allowed To Trailer Units To Other Locations? No Yes, Explain: Does Insured/Owner Trailer Units To Other Locations? No Yes, Explain:

What Navigation Limits Are Placed On The Renter? (Body Of Water And Range Of Navigation)

How Is Each Rental Supervised And Assisted If Help Is Required?

Is Swimming, Snorkeling, SCUBA Or Diving Allowed From Vessels? No Yes, Explain:

Will Any Person Besides The Contracted Renter Be Allowed To Operate The Vessel? No Yes, Explain:

Are Renters Allowed To Tow Water-Skiers Or Water Toys? No Yes, Explain: Does Applicant Supply The Tow Rope, Skis Or Water Toys? No Yes, Explain:

Where Are Vessels Kept When Not In Use? How Are Vessels Secured Against Theft?

How Long Are Rental Agreements Kept On File? Does Applicant Keep Records Of Vessel Maintenance?

Does Applicant Or Any Employee Operate The Watercraft In The Course Of Employment? No Yes, Explain:

Does Applicant Or Any Employee Use The Watercraft For Personal Pleasure? No Yes, Explain:

Remarks

ATTACH A COPY OF THE CURRENT RENTAL AGREEMENT AND ANY CHECK OUT OR RENTER TRAINING PROCEDURES. COVERAGE WILL NOT BE BOUND WITHOUT AN ACCEPTABLE RENTAL AGREEMENT ON FILE.

COVERAGE	LIMITS REQUESTED	DEDUCTIBLE	PREMIUM
WATERCRAFT AND EQUIPMENT (Total of Hull Values from Schedule)		MINIMUM \$1000 DEDUCTIBLE	
WATERCRAFT LIABILITY		\$1000 DEDUCTIBLE	
WATERSPORTS LIABILITY			
PREMISES LIABILITY (SUBMIT PREMISES APP.)			
TRAILER PHYSICAL DAMAGE		250	

APPLICANT'S STATEMENT AND SIGNATURE

This notice is given in compliance with the Federal Fair Credit Reporting Act (Public Law 91-508). I understand that as part of the Company's underwriting procedure, a routine inquiry may be made which will provide applicable information concerning character, general reputation, personal characteristics, mode of living and driving record. Upon written request, additional information as to the scope of the report, if one is made, will be provided. The foregoing statements made and signed by the applicant represents the information set forth as correct and a true basis on which insurance may be granted but in no way binds the applicant to accept a quotation or the insurers to accept the risk. If coverage is bound by the Company, this application will attach to and be made part of the policy. **FRAUD WARNING: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY FILED AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME.**

APPLICANT'S SIGNATURE	DATE	PRODUCER'S SIGNATURE	DATE
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