

# Yacht and Motorboat/Smallcraft insurance

## Additional/Change of interest

Please write in BLOCK LETTERS and tick correct answer boxes. Please remember to sign the Declaration at the end of the form.

Policy number:

### This form is to be completed by the new owner(s)

#### 1. General details

Full name of Proposer

State: Mr, Mrs, Miss

Surname

Forenames

Name of any joint owner

Occupation in full

If Company director, manager or similar please state nature of business

Age of Proposer

Full postal address

Postcode

Telephone no

Email address

#### 2. Vessel use

Where is the vessel kept at present

Is the vessel for sale?

If you are not using the vessel, please ignore sections 3 and 4 of this form.

### 3. Experience

Please give details of experience as owner/crew including types and size of vessel and cruising area.

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Do you hold any helmsman's qualifications? If so please give details

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### 4. Claims experience

Have any accidents or losses occurred in the past 5 years in connection with any vessel owned or sailed by you or your professional skipper?

Please answer  Yes  No

If YES please give date and amount of each accident or loss.

Date	Amount	Details

### 5. General questions

Has any other insurer at any time refused to insure you, imposed special terms or requested extra precautions?  Yes  No

If YES, please attach a note giving full details.

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Are there any other material facts you should disclose?  Yes  No

If YES, please attach a note giving full details.

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Have you or any person having an interest in the vessel ever been convicted of arson, or of any offence involving dishonesty of any kind such as smuggling, fraud, robbery, theft or handling stolen goods?  Yes  No

If YES, please attach a note giving full details.

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## Important notice

Failure to disclose facts could result in your policy being invalidated. Material facts are those facts which might influence the acceptance or assessment of your proposal. If you are in any doubt as to whether a fact is material you should disclose it.

## Declaration

I declare that to the best of my knowledge and belief the information given on this form is true in every respect.

I also declare that if anything on this form was written by another person he or she acted as my agent for this purpose.

## Signature of Proposer(s)

Signed

Date

The Company reserves the right to decline any proposal.

### Navigators & General

Head Office: PO Box 848, Brighton BN1 3GQ. Tel 01273 863400. Fax 01273 863401.  
email: [enquiries@navandgen.co.uk](mailto:enquiries@navandgen.co.uk) [www.navandgen.com](http://www.navandgen.com)

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UK branch registered in England and Wales Registration No. BR7985.  
UK Branch Head Office: The Zurich Centre, 3000 Parkway, Whiteley, Fareham, Hampshire PO15 7JZ.

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