

# Blue-Water Cruising/Racing Insurance Form



Date        /        /

Policy Number

Client's Name

Address

State

Postcode

## PART 1 – VOYAGE

State fully the countries or island groups in order of landfall which you propose to sail to

PLEASE NOTE: If you don't have a set itinerary please define the area in which you will be cruising by Latitude and Longitude.

Departure Date        /        /

Voyage Completion Date        /        /

## PART 2 – VESSEL

### Vessel Information

|                                    |             |                   |                   |             |
|------------------------------------|-------------|-------------------|-------------------|-------------|
| Hull Type                          |             |                   | Length            | Metres/Feet |
| Beam                               | Metres/Feet | Type/Style of Rig | Mast Construction |             |
| Arrangement of superstructure      |             |                   | Colour            |             |
| Colour of: Hull                    | Deck        | Mast              | Sails             |             |
| Distinguishing Features            |             |                   |                   |             |
| Registered Hull Number             |             |                   | Vessel Name       |             |
| Radio equipment, name type of sets |             |                   | Call Sign         |             |
| Frequencies                        |             |                   |                   |             |
| Proposed radio watch schedule      |             |                   |                   |             |
| Emergency set, name and type       |             |                   |                   |             |
| Engines number and make            |             |                   |                   |             |

Fuel capacity:

Litres

Gals

Consumption:

Litres/ Hour at

Gals / Hour at

knots

knots

List navigational equipment

## Emergency equipment

Liferaft – make and capacity

Boat/Dinghy (material, colour, size)

Flares – Number – Parachute

Handheld

Smoke

Radar reflector

Lifebuoys

Emergency position indicating radio beacon make and operating frequency:

Have you ever taken out extended cruising insurance?      Yes      No

(If yes, please provide details including previous insurance company)

If boat is a stock design please advise brief details of any blue-water cruising undertaken by similar vessels:

Country of Registration (if registered)

Registered Number

When was vessel last surveyed?

Surveyor's Name/Company

Type of Survey:      In water      Out of water

We will require a full out of water survey report to be completed for an extension of cover to be considered. A full out of water survey report less than 12 months old may be acceptable. (Please attach copy.)

## PART 3 – SKIPPER AND CREW

**List Full Names, Dates of Birth and Experience for all crew:**

|            |     |   |   |
|------------|-----|---|---|
| Name       | DOB | / | / |
| Experience |     |   |   |

|            |     |   |   |
|------------|-----|---|---|
| Name       | DOB | / | / |
| Experience |     |   |   |

|            |     |   |   |
|------------|-----|---|---|
| Name       | DOB | / | / |
| Experience |     |   |   |

|            |     |   |   |
|------------|-----|---|---|
| Name       | DOB | / | / |
| Experience |     |   |   |

|            |     |   |   |
|------------|-----|---|---|
| Name       | DOB | / | / |
| Experience |     |   |   |

*Please attach additional pages for any further crew members details.*

List all types of navigation in which the skipper is proficient, including all formal education relating to navigation and boat handling:

List type of watch system you will use for this passage:

List all safety precautions you will take while offshore:

List any publications or maritime charts you will consult for passage and landfall information:

Additional comments/information:

## Privacy Act Requirements

The Privacy Act 1993 require us to tell you that we collect, handle, store and disclose your personal and sensitive information in order for us to provide you with and inform you about insurance and insurance related services. To do this we may communicate your personal information to our service providers. This will always be done as permitted by the relevant privacy legislation.

Signature

Date        /        /

