

5000 E. University Ste. 8. Odessa, Texas 79762 (432) 366-0260 www.asamutual.com

## **Boat Insurance Form**

the state of the s	Insured Information						
Number of Title Owners (husband a	nd wife = 1 title owner)	_					
Owner's Name:		Address:	-				
City:	State						
		Sailboat Ski Boat Sport Fish Trawler					
Year: Length: Make: Model:							
Purchase Date: New Purchase	Purchase Date: (mm/yyyy)	Purchase Price: \$					
Hull Construction: Fiberglas	ss Aluminum Steel Wood	d Top Speed:					
Number of Engines: 1 2	3 HP Per Engine: Eng	gine Year: Engine Make:					
Engine Type: Inboard Stern Drive (I/O): Outboard Jet Other Fuel: Gas Diesel							
Automatic Fire Extinguishing System in the engine compartment: YES NO							
Gas Fume Detector in the engine compartment: TYES TNO							
Does the vessel have any unrepaired damage or deficiencies: TYES TNO							
Is the vessel raced in other than local club events (local club racing allowed for sailboats only): YES NO							
Is the vessel used as the primary re	esidence:	YES TNO					
Has the vessel been surveyed by a	certified Marine Surveyor: TYES	NO Survey Date: (mm/yyyy)					
	Trailer - Tender (Dinghy) Inform	mation					
Trailer Year:		Trailer Make:					
Tender or Dinghy is a small auxilia	ry vessel used to service a larger ve						
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 Ho	urs From The Vessel:	_					
Use of Vessel: Pleasure	Primary Residence Charter	Commercial Other					
Navigational Limit:							
	Chesapeake Bay Atlantic - exd San Francisco Bay Other	scluding FL Tallantic - including FL fer:	gc+00*				
		ction 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: La	y up start date (month and day)	_/					

	Operator Information						
Primary Operator Name:	DOB:	Occupation:					
Years of Boat Ownership:	Very of Parting Europianos						
Operator Has a Safe Boating Certificate From:							
Total number of minor driving violations in the	last 3 years:						
Total number of DUI or Reckless driving violations in the last 3 years:							
Prior Owned Boats: This information needs to underwriting on the years of boat ownership, r boating experience that you would like us to compare the compared to the compared	not boating experience. If the onsider, please use the comm	re is additional information on the ents section on page 3.					
Length: Make: Years							
Length: Make: Years							
# of additional regular operators: 🔲 0 🗀	1 2 3 4 5 >	4 see page 3 for additional operators.					
# of any PAID Captain or Crew:	Full Time or Part	Time: 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:							
Liability Limit: □ \$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 o	f boat or you can select the li	mit desired. Other 🗆 \$					
Towing-Emergency: Limit is based on the type							
	the quote urrent Insurance Information Premium:	Expiration Date:					
Company:	Premium.	YES NO					
Any Reported Boat Losses in Last 5 Years:							
Has any insurance coverage ever been Cance							
Date of Loss: Date of Loss:		Date of Loss:					
Notes/Comments * Loss Details/Refuse	d Insurance Details: (required	if YES to Losses/Refused Insurance)					

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

		iai Operator				
Name:	DOB:		Occupation:			
Years of Boat Ownership:						
Operator Has a Safe Boating Ce	ertificate From: None	USCG	USPS Capt	ain's License		
Total number of Minor driving v	iolations (speeding ticket	for any moto	r vehicle) in the las	st 3 years:		
Total number of DUI or Reckles	s driving violations (for ar	ıy motor vehi	cle) in the last 3 ye	ars:		
Prior Owned Boats:						
Length: Make:	Years Owned:	_ Length: _	Make:	Years Owned: _		
Length: Make:	Years Owned:	Length:	Make:	Years Owned: _		
		nal Operator				
Name:	DOB:		Occupation:			
		Years of Boating Experience:				
Operator Has a Safe Boating Co	ertificate From: None	USCG	USPS Capt	ain's License		
Total number of Minor driving v						
Total number of DUI or Reckles	s driving violations (for a	ny motor vehi	cle) in the last 3 ye	ears:		
Prior Owned Boat:						
Length: Make:	Years Owned:	Length: _	Make:	Years Owned:		
Length: Make:	Years Owned:	Length: _	Make:	Years Owned:		
	***************************************	nal Operator	000000000000			
Name:	DOB:		Occupation:			
Years of Boat Ownership:		Years of Boa	ating Experience: _			
Operator Has a Safe Boating C	ertificate From: None	USCG	USPS Capt	tain's License		
Total number of Minor driving v						
Total number of DUI or Reckles Prior Owned Boats:	s driving violations (for a	ny motor veh	icle) in the last 3 ye	ears:		
Length: Make:	Years Owned:	Length: _	Make:	Years Owned:		
Length: Make:				Years Owned:		