



**Application for Hull and Protection & Indemnity Insurance**

**General Information**

Name of Applicant:	Producer:
Address:	Effective Date:
Operations:	
Has any company ever canceled or non-renewed insurance for the applicant? If yes, please explain.	
Owner/Operator Experience (include years of expertise and prior experience if any):	

**Loss Information**

Year	Gross Premium	Paid Losses	Outstanding Losses

**Hull Limits:**

Vessel Name	Year Built	Construction	Type	Limit
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				



Deductible:	
Mortgagee Information:	
Navigation Limits:	
Date of Last Survey: (please attach)	Survey Contact:
Additional Equipment:	Trailers:

**Protection & Indemnity Limits:**

Limits:	BI Deductible:
	PD Deductible:
Does applicant Tow owned and/or Barges of others?	Owned/Others/Both/None
If Yes, average/maximum number of Barges any one tow?	_____ / _____
If Yes, types of Vessel Towed:	_____ Petroleum / _____ Chemical / _____ Dry Cargo
If others, please explain:	
Is applicant released from Liability?	YES / NO
Do others Tow applicants Vessels?	YES / NO
If Yes, is Tower released?	YES / NO
Navigation Limits Requested:	\$ _____
Does applicant require Cargo Legal Liability?	YES / NO If Yes, please specify
Types of Cargo Carried:	
Maximum Value per Shipment:	\$ _____
Limit of Liability Required:	\$ _____
Please provide details of all contractual obligations the applicant might incur as applicable to this insurance	
Crew Experience:	
	Number of Crew Employers      Years with Applicant      Total Years Experience
Captain	
Engineers	
Other Crew	
Do you have a lay-up period? If so, please explain and location of lay-up.	

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Producer Signature

**ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES.**