



U.S. Risk, LLC | 14241 Dallas Parkway, Suite 850, Dallas, Texas 75254

PRODUCER NAME: \_\_\_\_\_ COMPANY: \_\_\_\_\_  
EMAIL: \_\_\_\_\_ COVER START DATE: \_\_\_\_\_

## 1. INSURED INFORMATION

a. Owner Name: \_\_\_\_\_  
b. LLC Name: \_\_\_\_\_  
c. Date of Birth: \_\_\_\_\_ d. Occupation: \_\_\_\_\_  
e. Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_ ZIP: \_\_\_\_\_  
f. Lien Holder: \_\_\_\_\_  
g. Additional Insured: \_\_\_\_\_

## 2. VESSEL INFORMATION

a. Vessel Name: \_\_\_\_\_ b. Year: \_\_\_\_\_  
c. Length: \_\_\_\_\_ d. Manufacturer: \_\_\_\_\_  
e. Make/Model: \_\_\_\_\_ f. Max Speed: \_\_\_\_\_  Knots  MPH  
g. Hull Type:  Sailboat  Sportfisher  Catamaran  Motor Yacht  Houseboat  
 Other (describe): \_\_\_\_\_  
h. Hull Material:  Fiberglass  Kevlar  Wood  Metal  Other: \_\_\_\_\_  
i. Primary Power:  Sail  Inboard  Outboard  
j. Hull ID number: \_\_\_\_\_ k. State/Country registration: \_\_\_\_\_  
l. Vessel Flag: \_\_\_\_\_ m. Date Purchased: \_\_\_\_\_  
n. Purchase Price: \$ \_\_\_\_\_ o. Present Value: \$ \_\_\_\_\_  
p. Date of Last Survey: \_\_\_\_\_  
q. Is the vessel for sale or will it be for sale in the next 12 months?  Yes  No **If yes, asking price:** \$ \_\_\_\_\_

### 2A. ADDITIONAL FEATURES (check all that apply):

Depth Finder  Anti-Theft  Auto Fire Extinguisher  Life Raft  
 Sat Nav or GPS  Radar  High Water Alarm  EPIRB

### 2B. ENGINE DETAILS

Manufacturer	Engine Serial Number	Horsepower	Year	Fuel Type
				<input type="checkbox"/> Gasoline <input type="checkbox"/> Diesel
				<input type="checkbox"/> Gasoline <input type="checkbox"/> Diesel
				<input type="checkbox"/> Gasoline <input type="checkbox"/> Diesel
				<input type="checkbox"/> Gasoline <input type="checkbox"/> Diesel
				<input type="checkbox"/> Gasoline <input type="checkbox"/> Diesel
				<input type="checkbox"/> Gasoline <input type="checkbox"/> Diesel

**2C. TENDER DETAILS**

- a. Year: \_\_\_\_\_
- b. Model: \_\_\_\_\_
- c. Manufacturer: \_\_\_\_\_
- d. Purchase Price: \$ \_\_\_\_\_
- e. Length: \_\_\_\_\_
- f. Present Value: \$ \_\_\_\_\_

**3. NAVIGATION**

- a. Main Mooring Location:  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_ ZIP: \_\_\_\_\_
- b. Navigational Requirements (please include bodies of water and radius navigation): \_\_\_\_\_
- c. Will the vessel be laid up?  Yes  No  
**If yes**, dates and location: \_\_\_\_\_

**4. OPERATORS**

**Operator No. 1**

- a. Name: \_\_\_\_\_
- b. Date of Birth: \_\_\_\_\_
- c. Paid Crew?  Yes  No
- d. Experience (number of years and boats operated): \_\_\_\_\_
- e. Boating Qualifications: \_\_\_\_\_
- f. Any Criminal Convictions?  Yes  No  
**If yes**, describe: \_\_\_\_\_
- g. Have you had any type of Maritime loss in the last 10 years?  Yes  No  
**If yes**, explain in detail: \_\_\_\_\_

**Operator No. 2**

- a. Name: \_\_\_\_\_
- b. Date of Birth: \_\_\_\_\_
- c. Paid Crew?  Yes  No
- d. Experience (number of years and boats operated): \_\_\_\_\_
- e. Boating Qualifications: \_\_\_\_\_
- f. Any Criminal Convictions?  Yes  No  
**If yes**, describe: \_\_\_\_\_

g. Have you had any type of Maritime loss in the last 10 years?  Yes  No

**If yes**, explain in detail:

**For additional operators, please include a separate sheet.**

**5. CLAIMS INFORMATION**

a. Any claims in the last 10 years?  Yes  No

**If yes**, describe:

b. Any total loss?  Yes  No

**If yes**, describe:

c. Has the vessel suffered any damage or undergone repairs in the last 5 years?  Yes  No

**If yes**, complete the following:

Name: \_\_\_\_\_

Date of Loss: \_\_\_\_\_

Cost of Claim: \$ \_\_\_\_\_

Claim details:

**For additional claims, please include a separate sheet.**

**6. COVERAGE REQUIRED**

- a. Hull Physical Damage: \$ \_\_\_\_\_
- b. Hull Deductible: \_\_\_\_\_ %
- c. Windstorm Deductible: \_\_\_\_\_ %
- d. Third Party Liability: \$ \_\_\_\_\_
- e. Crew Liability: \$ \_\_\_\_\_
- f. Passenger Liability: \$ \_\_\_\_\_
- g. Tender/Dinghy: \$ \_\_\_\_\_
- h. Uninsured Boaters: \$ \_\_\_\_\_
- i. Medical Payments: \$ \_\_\_\_\_
- j. Personal Property: \$ \_\_\_\_\_
- k. Non-Emergency Towing: \$ \_\_\_\_\_
- l. Trailer: \$ \_\_\_\_\_
- m. Pollution Coverage: \$ \_\_\_\_\_
- n. Breach of Warranty: \$ \_\_\_\_\_
- o. Other (please specify): \$ \_\_\_\_\_

**7. GENERAL INFORMATION**

- a. Is the vessel used for fare paying passengers?  Yes  No  
**If yes**, complete the following:  
Number of passengers per trip: Maximum: \_\_\_\_\_ Average: \_\_\_\_\_  
Number of trips per year: Maximum: \_\_\_\_\_ Average: \_\_\_\_\_
- b. Is the vessel chartered to others with a captain?  Yes  No
- c. Is the vessel chartered to others without a captain?  Yes  No
- d. Does the applicant employ a paid crew?  Yes  No  
**If yes**, how many? Full-time: \_\_\_\_\_ Part-time: \_\_\_\_\_
- e. Is this vessel used for waterskiing or diveboat charter?  Yes  No  
**If yes**, provide details:
  
- f. Is the vessel used for any other commercial or business purposes?  Yes  No  
**If yes**, provide details:
  
- g. Will this vessel be operated single handedly and/or at night?  Yes  No  
**If yes**, describe when, where and how often:
  
- h. Does anyone reside aboard the vessel full time?  Yes  No
- i. Will this vessel participate in any races, rallies, or speed trials during this policy period?  Yes  No
- j. Was any insurance declined, cancelled or non-renewed in the last 5 years?  Yes  No  
**If yes**, provide details:

**8. SIGNATURE PANEL**

**IMPORTANT: THIS APPLICATION MUST BE SIGNED BY THE APPLICANT. SIGNING THIS FORM DOES NOT BIND THE COMPANY TO COMPLETE THE INSURANCE.**

I/we hereby declare that the statements and particulars in this application are true and I/we agree that this application shall be the basis of the contract with the insurance company.

\_\_\_\_\_  
Applicant signature \_\_\_\_\_  
Date

Typed or printed name: \_\_\_\_\_ Title: \_\_\_\_\_