



PERSONAL LINES PACKAGE APPLICATION WATERCRAFT / INLAND MARINE SECTION

DATE (MM/DD/YYYY)

AGENCY TMK RISK MANAGEMENT INC	954-389-5897	APPLICANT'S NAME COMPANY
CODE:	SUB CODE:	

WATERCRAFT COVERAGES/LIMITS OF LIABILITY

BOAT #	HULL			OUTBOARD MOTOR		PORTABLE ACCESSORIES		TRAILER		LIABILITY		MEDICAL PAYMENTS	
	LIMIT	DEDUCTIBLE	PREMIUM	LIMIT	PREMIUM	LIMIT	PREMIUM	LIMIT	PREMIUM	LIMIT	PREMIUM	LIMIT	PREMIUM

OTHER COVERAGES, ENDORSEMENTS AND CREDITS TO APPLY TO BOAT

WATERCRAFT BOAT INFORMATION

BOAT #	POWER					HULL TYPE	HULL MATERIAL	FUEL TANK	REGISTRATION NUMBER	HULL ID #	YEAR	MAKE/MODEL	COST NEW	LENGTH
	IB	OB	IO	SAIL	WTR JET									

BOAT #	MAX SPEED	DATE PURCHASED	PRESENT VALUE	NAME OF BOAT	WATERS NAVIGATED	TERR	BERTH / STORAGE LOCATION	LAY UP PERIOD						
								FROM	TO					

WATERCRAFT ENGINE/OUTBOARD MOTOR

BOAT #	YEAR	MAKE/MODEL	SERIAL NUMBER	HORSE POWER		DATE PURCH	COST NEW	PRESENT VALUE	OTHER

WATERCRAFT TRAILER INFORMATION

BOAT #	YEAR	MANUFACTURER/MODEL	SERIAL #	# AXLES	CAPACITY

WATERCRAFT EQUIPMENT INFORMATION

BOAT #	BILGE PUMP	COOK STOVE	CO2 - CHEMICAL SYS	FIRE EXT	DEPTH SOUNDER	SHIP TO SHORE RADIO	OTHER

HULL INFORMATION

EXPLAIN ALL "YES" RESPONSES IN REMARKS	YES	NO	EXPLAIN ALL "YES" RESPONSES IN REMARKS	YES	NO
1. IS THE BOAT CHARTERED TO OTHERS?			5. DOES THE APPLICANT EMPLOY A PAID CREW?		
2. IS THE BOAT USED COMMERCIALY OR FOR BUSINESS PURPOSES?			6. ANY SLEEPING FACILITIES? (Provide number of beds)		
3. IS THE BOAT USED FOR RACING?			7. ANY EXISTING DAMAGE TO THE BOAT?		
4. IS THE BOAT USED FOR WATERSKIING?					

GENERAL INFORMATION

EXPLAIN ALL "YES" RESPONSES IN REMARKS	YES	NO	EXPLAIN ALL "YES" RESPONSES IN REMARKS	YES	NO
1. ANY OPERATOR HAVE A PHYSICAL/MENTAL IMPAIRMENT? (Not applicable in WI)			3. ANY OPERATOR HAD AN ACCIDENT/CONVICTION DURING THE LAST 3 YEARS?		
2. ANY DRIVERS LICENSE SUSPENDED/REVOKED DURING THE LAST 3 YEARS?					

REMARKS

