

# Claim Form

## Particulars of Accident to Yacht or Motor Boat



<p><b>Assured's Vessel</b></p>	<p>Full name of owner _____          Address _____          Tel _____ Fax _____          Policy No. _____          What crew was carried? _____          Name of vessel _____          Licence No. _____ Full value _____</p>
<p><b>Navigator</b></p>	<p>Who was in charge of your vessel at the moment the accident occurred?          Give name, addressed and occupation together with particulars of his qualifications and experience in handling craft.</p> <p>_____          _____          _____</p>
<p><b>Details of Accident</b></p>	<p>Date _____ Time _____          Speed of your boat through the water _____          Place _____          Direction and speed of current _____          Depth of water _____          Did your vessel comply fully with the "Rule of the Road as Sea"          _____          What lights was she carrying? _____          Please state purpose for which vessel was being used at time of accident          Was vessel racing or under starter's orders? _____          If vessel is a wreck, give her position as accurately as possible          _____          Can she, in your opinion, be salvaged? _____          Explain fully how accident happened (use separate sheet if required) _____          _____          Please give sketch (use separate sheet). _____          _____          Have you reported to Marine Department of Police? If so please quote the case number.          _____          In your opinion was the accident caused by the fault of any person other than your Navigator? If so, give name, address and occupation of such person:          _____          _____</p>
<p><b>Damage to Your Vessel</b></p>	<p>Details of damage (a detailed estimate of probable cost of repairs should be sent with this report)</p>

<b>Tender</b>	If involved in an accident, was she permanently marked with the name of the parent vessel? _____
<b>Damage to Third Parties (Persons &amp; Property)</b>	Full details of damage or injury and names and addresses of all persons concerned: _____ _____ Have any claims been made on you? _____ If so, state amount _____
<b>Witness(es)</b>	Names and addresses (it is important that these be obtained). _____ _____ Passenger(s) in vessel _____ _____ Independent witness(es) _____
<b>Official Evidence</b>	Did a Coastguard, Harbour Official, or other officer witness the accident or take particulars? _____
<b>Repairs to Your Vessel</b>	Where is she now lying and in whose charge? _____ Is she in repairer's hands _____ If so, give name of firm _____ Have you obtained estimate for repairs _____ If so, from whom? _____ Amount _____
	Do you hold more than one policy indemnifying you in respect of this accident? _____
<b>Salvage</b>	If any salvage services have been rendered, please give full details thereof, including names of those who rendered same and under what circumstances: - _____ Give details of any claim received _____
	I/We do hereby declare that the foregoing particulars are true and correct in every respect, and that I/We have withheld no information material to the claim, I/We also undertake to render the Company all assistance in my/our power in dealing with the matter.  Date _____ Signature of Insured _____