



BUILDERS RISK APPLICATION

1. **BUILDER**
 - (a) Name: _____
 - (b) Address: _____
 - (c) Vessel being built for: _____
 - (d) Address of owner: _____
 - (e) Years in business _____
2. **LOSS PAYABLE TO:** _____

3. **DESCRIPTION OF VESSEL WHEN COMPLETED:** _____
 - (a) Type of vessel: _____
 - (b) Wood, Fiberglass, Steel etc.: _____
 - (c) Propulsion machinery: Gasoline ___ Diesel ___ Horsepower: _____ # of Engines: _____
 - (d) Molded Dimensions: Length _____ Beam _____ Depth _____
 - (e) Estimated gross tonnage: _____
4. **VALUES:** Pre Keel Values: \$ _____ each
Contract Price: \$ _____ each
Additional Values: \$ _____ each
Insured Value: \$ _____ each
Total Value: \$ _____

Is contract price fixed or adjusted ? _____
If adjusted, is there a limit of escalation ? Yes ___ or No _____. If "Yes" please show the limit of escalation \$ _____
5. **TIME FOR BUILDING:** Attach schedule, if necessary.
 - (a) Pre Keel _____ (b) Keel Laying _____
 - (c) Launching _____ (d) Delivery _____Number of months of insurance required on each vessel (Pre Keel to delivery) _____
6. **PLACE OF COVERAGE:** Assured's Plant at _____

 - (a) Fire and extended coverage rates for boats under construction at the above location.
Fire _____ Extended Coverage _____
Percent of co-insurance _____ %.Specify is vessel under construction in buildings or in open _____
Is yard fenced ? _____ Describe type and height _____
Area Enclosed _____ Is yard under watchman service _____
How many employed _____ Hours covered _____

(b) Are any materials used stored off premises _____

Address _____

Specify fire and extended coverage rates at these locations: _____

Are any of the above areas subject to flooding _____, cyclone, tornado, hurricane or windstorm _____

(c) Are vessels to be moved while in course of construction ? _____

Describe: _____

What type of equipment is used to move vessels ? _____

Are Vessels worked on after they are launched ? _____

Are the vessels taken on trial trips ? _____

7. DELIVERY: Does the builder deliver vessels:

At Yard _____ By land _____

Buyers Premises _____ By water _____

Under Power _____ Towed _____

If towed, is there a release of tower ? _____

8. LOSS INFORMATION: Indicate details of each loss showing vessel name, accident date, type claim & amount. Paid and/or outstanding.

9. PRESENT CARRIER: List details of current insurance showing carrier, form and any other pertinent information _____

The above statements are true and accurate to the best of my knowledge and it is understood that these facts are material to the placement of this insurance.

SIGNED _____

BY THE ASSURED OR OFFICER OF CORPORATION

PRODUCER NAME: _____

ADDRESS: _____

DATE: