



**SMALL CRAFT INSURANCE PROPOSAL FORM
(FOR PRIVATE PLEASURE PURPOSE ONLY)**

Please complete this form in BLOCK letters and fax/email it to our offices. Please attach a separate sheet(s), if required.

Owner's Name: _____

Address: _____

Mobile No.: _____

Name of Craft: _____

Registration No.: _____

Date of Construction: _____

Material of Construction:
(please choose)

GRP

WOOD

STEEL

DIMENSIONS Length: _____

Width: _____

Depth: _____

Make of Engine: _____

Engine No.: _____

**Inboard/
Outboard:** _____

Horse Power: _____

Designed Speed: _____

INSURED VALUE Hull..... AED _____

Engine..... AED _____

Trailer..... AED _____

Personal Effects..... AED _____

TOTAL: AED _____

Previous Insurer (if any) : _____

Loss Experience (if any) : _____

LIABILITIES

(a) Third Party & Passenger's Legal Liability **AED** _____ (any one occurrence)

(b) Water skier's Legal Liability **AED** _____

Where the craft is normally moored whilst out of commission? _____

Period of Insurance

From: _____

To: _____

Area of Navigation Limits: _____

I hereby declare that the boat is in sound/seaworthy condition.

Date:

Signature: