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CLAIM FORM

Policy No.	Client Code	Due Date	Claim No.
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Note: All questions on this form must be clearly and fully answered otherwise the processing of this claim may be delayed until the required information is supplied.
 If any question does not apply to the circumstances of your claim it must be marked "Not Applicable".
 The underwriters do not admit liability by the issue of this form.

Details of Insured

Insured's full name

Address

Phone (Work)..... (Mobile) (Home)

Email Fax Occupation

Vessel Name Type

Particulars of Casualty

a) Date of loss and/or damage:/...../..... Time:

b) Location/Chart Reference:

c) Owners and/or Skippers report on circumstances of loss and/or damage (if necessary, continue on separate sheet and attach)

d) Was Vessel being raced at the time of casualty? YES/NO

e) Weather conditions at time of casualty:

f) Was your craft on an approved mooring and in a site authorised for its use? YES/NO

g) If YES, by whom approved and authorised:

h) If NO, give full details:

i) Detail damage and/or items lost:

.....

j) State estimated cost of repairs:

k) Name of repairer:

.....

For Theft and Third Party Claims refer overleaf.
 Note: This Claim Form must be signed and dated overleaf.



If Loss by Theft/Burglary

- a) Date reported to Police:
- b) At which Police Station:
- c) Police Certificate/Reference No:
- d) Did loss result from "forcible entry"?
- e) If outboard motor stolen, was it locked to boat? YES/NO (if not give details)

Third Parties

- a) Was any other party involved in casualty? YES/NO
- b) Owner's name and type of Vessel:
- c) Owner's address:
- d) If insured, by whom?
- e) Brief details of damage to other Vessel:
- f) Name and address of person in charge of other Vessel at time of casualty, if not Owner:
- g) Witnesses: Names and addresses (including all crew, passengers and independent witnesses):
- h) Has any claim or intimation of claim been made upon you? Give details:
- i) Do you consider third parties were responsible for or contributed to casualty? Given details:

Declaration

I/We hereby declare the foregoing particulars to be true and correct and I/We undertake to provide any information requested and to render the Company every assistance in my/our power in dealing with the matter.

I/We intend to claim indemnity under my/our Policy in respect of this incident.

I/We agree that any instructions given by the Company for the repair or removal/disposal of the Vessel will be taken as being given on my/our behalf.

Signature of Proposer: **Date:**/...../.....

The issue by the Company of this form is not taken as an admission of liability.