

Pleasurecraft Application Form



Broker's name _____ Policy Number

DUTY OF DISCLOSURE

You must tell us all information you know (or could reasonably be expected to know) which would influence the judgement of a prudent insurer whether or not to accept your application, and if it is accepted, on what terms and at what cost.

Examples of information you may need to disclose include:

- Anything that increases the risk of an insurance claim,
- Any criminal record,
- If another insurer has cancelled or refused to renew insurance, or has imposed special terms,
- Any insurance claim you have made in the past.

Examples of information you do not need to disclose include:

- Anything that reduces the risk of an insurance claim,
- Anything we say you do not need to tell us about,
- Anything that is common knowledge,
- Anything you have already told us, or that we should be expected to know in the ordinary course of our business.

These examples are a guide only. If you are not sure whether you need to disclose a particular piece of information, please ask.

WHEN IN DOUBT – DISCLOSE. ALL INFORMATION WILL BE TREATED CONFIDENTIALLY.

DETAILS OF APPLICANT(S) New Client Existing Client

FULL NAME OF INSURED

First name: _____ Surname: _____

RESIDENTIAL ADDRESS

Street: _____

Suburb: _____ Town/City: _____ Post Code: _____

Property name (if applicable): _____

POSTAL ADDRESS

Number/Street: _____ PO Box: _____

Suburb: _____ Town/City: _____ Post Code: _____

Property name (if applicable): _____

CONTACTS

Private phone: _____ Business phone: _____

Mobile phone: _____ Email: _____

INTERESTED PARTIES

Other interested parties, if any, and nature of interest e.g. legal owner, mortgage, debenture holder, etc.

Name: _____

Address: _____

Period of insurance from: _____ to: _____ at 12 midnight

DETAILS OF CRAFT

Name of Craft: _____ Date purchased: _____

Type of Craft: _____ Price paid: _____

Built by: _____ Serial No: _____

Craft length: _____ Craft beam: _____ Year built: _____ Maximum speed: _____

Craft construction: GRP GRP (Sandwich) GRP (over wood) Wood Steel Aluminium
 Other State type: _____

If self built – Materials price paid: _____ Estimate labour costs: _____

ENGINE

Engine make: _____ Number of engines: _____ HP: _____

Engine type: Petrol Diesel Outboard Inboard Stern leg Shaft drive
 Other State type: _____

Year manufactured: _____ Serial No(s): _____

PRECISE LOCATION OF INSURED CRAFT WHEN NOT IN USE

LOCATION 1

Mooring type/storage location: _____ Mooring number: _____

LOCATION 2

Mooring type/storage location: _____ Mooring number: _____

SECURITY

FIRE EXTINGUISHER(S)

Type: _____ Number of: _____

Describe type of trailer anti-theft locking device: _____

Describe security alarm system: _____

LIST OF PROPERTY TO BE INSURED

		AMOUNT INSURED
Hull, Fixtures, Fittings, Machinery, Electronics, Mast, Spars, Sails, Rigging and Outboards (including crafts gear, consumable ship's stores and tools)		\$
Boat trailer make:	Registration:	\$
Fishing equipment		\$
Diving equipment		\$
Waterskiing equipment		\$
TOTAL OF ALL CATEGORIES – TOTAL SUM INSURED		\$

EXPLANATIONS

- The maximum amount you will be insured for is to be allocated to the categories shown, based on their current market value.
- Where an amount insured is not shown, cover will not apply to that category.
- The amounts shown for each category are the insurer's maximum liability.
- Machinery includes inboard and outboard motors, gearboxes etc.
- Consumable ship's stores includes fuel, food, liquor etc.

USE OF THE BOAT

Will the boat be used for other than private purposes (skipped charter, bare boat charter, etc)?

Yes No

If 'Yes', give details: _____

RACING NOTE: RACING COVER IS AVAILABLE SOLELY ON YACHTS AND TRAILER-SAILERS

The policy conditions exclude cover for loss to sails, masts, spars or rigging while racing unless optional additional racing cover is taken.

1. Will the boat be used for racing?

Yes No

2. If 'Yes', do you require the Racing Risk extension? (optional additional benefit)

Yes No

FISHING AND DIVE GEAR

The policy conditions exclude cover for loss to Fishing and Dive Gear unless the optional additional Fishing and Dive Gear cover is taken.

Do you require the Fishing and Dive Gear extension?

Yes No

USER EXPERIENCE

Who is the main user of the craft? _____

Give details of their boating experience: _____

Give details of any accident with any craft the main user has had in the past three years, whether insured or not: _____

GENERAL QUESTIONS

1. Has any insurance company ever refused your application for insurance; or refused renewal of your policy; or cancelled your policy; or required an increase in premium or imposed special circumstances?

Yes No

2. Has any insurance company ever refused your claim in respect of any insurance?

Yes No

3. (a) Has any customer, during the last five years, made a claim in respect of the types of insurance being sought?

Yes No

(b) Is any applicant aware of any circumstances that may result in a claim under this policy?

Yes No

4. Has any applicant (or any director or manager of any applicant) been declared bankrupt or been served with bankruptcy proceedings or been placed in receivership?

Yes No

5. Have you or any family member who will operate the craft:

Yes No

(a) ever been imprisoned for any criminal offence, or

Yes No

(b) had any conviction for a criminal offence within the last 7 years, or

Yes No

(c) any prosecution pending for any criminal offence?

Yes No

6. Are there any other policies held by the applicant covering the same insurance now applied for?

Yes No

7. Is there any further information which could influence our decision whether to accept this Application or the terms of that acceptance?

Yes No

If you have answered 'Yes' to any part of questions 1–7, please give full details below.

ADDITIONAL INFORMATION

AGREEMENT

I agree that:

- 1. MATERIAL FACTS** (a) All information given to NZI (whether verbal or written) is true and correct;
(b) All material facts have been disclosed. (See "Your Duty of Disclosure");
- 2. TERMS OF POLICY** The terms of NZI's policy are accepted;
- 3. USE OF INFORMATION** (a) My personal information collected by NZI may be:
 - (i) used by NZI to advise me of its other services;
 - (ii) disclosed to other members of the insurance industry and Insurance Claims Register Ltd., and to parties who have a financial interest in the subject matter of the policy;
 (b) My personal information held by other members of the insurance industry and Insurance Claims Register Ltd., may be disclosed to NZI.
- 4. AGENCY** Anyone who assists me to complete this Application Form is acting as my agent only.

Please note:

- We gather information about you (including your claims history) to consider your application for insurance. If you refuse to provide it, we may decline your application.
- This information is held by us and you may access it. It may be passed onto other insurers you deal with, and any financially interested party.
- Your claims history is passed on to, and held by Insurance Claims Register Ltd. This enables other insurers you deal with to access it, and prevents fraudulent claims.

ON BEHALF OF ALL APPLICANTS

Signature: _____ Date: _____

Title/position: _____

OFFICE USE ONLY UNDERWRITING INFORMATION

Annual Premium		Period Premium	
Less Discount 1		Less Discount 1	
Less Discount 2		Less Discount 2	
Policy Extension 1		Policy Extension 1	
Policy Extension 2		Policy Extension 2	
Company Total Premium		Company Total Premium	
Fire Service Levy		Fire Service Levy	
Goods & Services Tax		Goods & Services Tax	
Total Amount Due	\$	Total Amount Due	\$

FOR OFFICE USE ONLY

Client No: _____ Pay plan: _____ 1st Period: _____

Served by: _____ 1st Inst date: _____ 1st Amount: _____

Office: _____ Receipt no: _____