

General Navigation Experience

Main Operator Name:

DOB:

Years of Boating Experience:

Prior vessels Owned:

Size:

Prior Vessels Operated:

Size:

Please list all Boating Education:

Ever navigated south of 40 degrees as Skipper or Crew member:

Yes___

No___

If yes, please explain:

Ever navigated the waters of Florida, Bahamas or The Caribbean:

Yes___

No___

If yes, Please explain:

Any other operators onboard:

Yes___

No___

If yes, please provide Names, Age and general boating experience of each additional operator

Additional Note: Please provide any further information that maybe relevant to underwriting, attach additional pages if needed.

Disclaimer:

Pacific Marine reserves the right to approve or decline the risk based on the above information. Once approved, this form must be dated and signed by the client when binding. Any omission or misrepresentation will render future coverage Null and Void.