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MARINA OPERATORS' LIABILITY APPLICATION

1. **ASSURED:** _____
2. **ADDRESS:** _____

3. **LIMIT REQUIRED:** _____
4. **ADDRESS OF LOCATION:** _____
5. **MOORING AND SLIP RENTAL:**
 - A. No. of slips _____ No. rented _____ No. covered _____
 - B. No. of docks _____ No. of slips at each dock _____
 - C. Type of moorings and No. _____ No. rented _____
 - D. Average value of boat at slips and moorings _____
 - E. Maximum value at any one time _____
6. **STORAGE OPERATIONS:** (lay up and out of commission)
 - A. What was the maximum number of boats stored ashore at any one time during the past year _____ Estimated total value _____
 - B. What is the estimated average value of individual boats stored ashore during the past year _____ Afloat _____
 - C. How many of the slips available were rented during the last year for lay up storage afloat _____
 - D. What is estimated value of vessels stored indoors during past year _____
7. **REPAIRS:**
 - A. Number of boats repaired in year (last 12 months) _____
 - B. Maximum value of any boat repaired _____

C. Average value US\$ _____

8. **HAULING AND LAUNCHING:** (Describe methods and equipment)

(a) Location _____ (d) Rated Capacity _____

(b) Design _____ (e) Size _____

(c) Power _____ (f) Moveable or Stationary _____

9. **Number of boats hauled out last 12 months for:**

(a) Repairs _____ (b) Storage _____

(c) Other _____

10. **Boating season** from _____ to _____

11 **Depth of water** at all locations _____ Tide rise in feet _____

12. **FIRE PROTECTION:** Public, paid or volunteer: _____

Distance from Marina: _____ No. of Public Fire Hydrants _____

Distance from Marine: _____ No. of Fire Extinguishers _____

13. **Is watchman employed**, explain: _____

Floodlighted at night _____

14. **Is storage area fenced in:** _____

Describe fencing _____

15. **Any fueling operation:** _____ Nature (gas/diesel) _____

16. **How long has marina been in operation under present management** _____

17. **Names and past experience of key personnel.** _____

18. **Gross receipts for operations during past 12 months** (if new operation, give estimate):

A. Mooring/Slip Rental US\$ _____

B. Storage US\$ _____

C. Repairs US\$ _____

D. Fueling and Miscellaneous (including provision, sales and transient services) US\$ _____

19. List all claims for past 5 years from operations - include date, cause, amount paid or estimated:

20. Present insurance carrier and policy number: _____

21. Effective date desired: _____

22. OTHER ACTIVITY OF ASSURED:

A. Boat Dealers Yes _____ No _____

B. Restaurateur, Inn Keeper or Motel Operator Yes _____ No _____

C. Swimming Pool Yes _____ No _____

23. Additional CGL Exposures: _____

24. Applicant's Signature _____ Date: _____

25. Agent's Name: _____

Address: _____

Additional Comments:
