

Private Boat Proposal

Reference

1. Your details

Name(s) in full (joint if applicable)	First name/s	Surname
1. Mr/Mrs/Miss/Ms/Other		
2. Mr/Mrs/Miss/Ms/Other		
Residential address		
Postal address (if different from above)		
Email address	Occupation(s) 1.	2.
Date(s) of Birth of main proposer(s)	1. / /	2. / /
Telephone - Private ()	Business ()	Mobile ()
When do you need cover?	From start date	To at 4pm and renewable annually
How do you wish to pay?	Annually <input type="checkbox"/>	Instalment <input type="checkbox"/> (please complete a separate form if paying by instalment)

2. Boat details

Type of boat: Yacht Powerboat Launch Jetboat Other:

Year Built	Make, builder and model	Boat name and number	Purchase price	Purchase date
			\$	/ /
Length	metres	Draft	metres	Beam
				metres
		Maximum motored speed	knots	
Hull material				
Type of engine	Manufacturer and year	Horsepower	Engine serial number	Type of fuel
Main				
Inboard				
Outboard				
Auxiliary				
Trailer	Make	Year	Registration number	
Dinghy	Make	Year	Length	metres

3. Cover required

Item(s)	Sum Insured	Item(s)	Sum Insured
Hull, fixtures and fittings	\$	Boat trailers	\$
Sails, masts, spars, rigging	\$	Dinghy	\$
Machinery and inboard motors	\$	Clothing	\$
Outboard motors	\$	Fishing and sporting equipment	\$
Auxiliary motors	\$	Any other additional equipment/gear	\$

NB: A valuation is required where the total amount to be insured is over \$200,000 or when requested by Vero.

If your boat is a yacht, do you require cover while racing? Yes No (If yes, additional premium applies)

If the boat is under hire purchase, finance or lease, please give full details of the interested party:

4. Location of the boat

Is your boat: Trailered Moored Other If Other, please describe method of storage and location.

a) If trailered, where is it kept when not in use: Street Garage Driveway Front yard Back yard Other

b) If moored, advise the following:

Location of mooring

Type of mooring

Marina

Pile

Swing

Other

Date mooring last lifted

Does the mooring meet minimum port or local authority requirements for:

i) the size of the boat?

Yes

No

ii) its condition?

Yes

No

5. General details

Is the boat sound and seaworthy?

Yes

No

Do you belong to a boat club?

If yes, name of boat club

Yes

No

Please provide details of any relevant experience in handling boats, and any boating qualifications for yourself and anybody else operating the boat (please attach a copy of qualifications to qualify for a premium discount):

Please provide details of any theft prevention and security devices on the boat and trailer (if you have an approved security device you qualify for a premium discount):

Are fire extinguishers kept on board?

Yes

How many

No

Is the boat ever used for business or charter purposes?

Yes

No

If you have answered "Yes" please provide details

6. Questionnaire

1. Have you or your family members, de facto partner, business partners, directors, trustees and/or beneficial owners, managers or any other person or entity to be covered by the insurance:

a) In the last 10 years:

i. Suffered loss or damage exceeding \$1,000 to any property (whether insured or not)?

Yes

No

ii. Made an insurance claim?

Yes

No

iii. Been subject to lawsuit or a legal liability claim?

Yes

No

iv. Been bankrupt?

Yes

No

b) Ever:

i. Had any insurance declined, cancelled, avoided, renewal refused, terms imposed or claim declined?

Yes

No

ii. Engaged in any criminal activity or had any criminal convictions, acquittals or diversions, or have any criminal prosecutions pending?

Yes

No

The information sought by this question is subject to the rights set out in the Criminal Records (Clean Slate) Act 2004.

2. Is there any further information likely to affect this insurance?

Yes

No

If you have answered "Yes" to any of the above questions please provide full details and dates in the space provided below. If further space is required please complete on a separate sheet. (Details should also include name of Insurance Company(s) and Policy Number(s), where applicable).

3. Who was your Insurance Company for the last 12 months?

Policy No

7. Important Notices & Declaration

Your Duty of disclosure: Subject to the rights set out in the Criminal Records (Clean Slate) Act 2004 ("Clean Slate Act"), you are under a duty to disclose all material information to Vero Insurance New Zealand Limited ("Vero") whether the information is asked for or not. Material information is information that might influence our decision to insure you and if so on what terms and/or premium. All information given must be complete and correct. If you have any doubt as to whether a fact is material then it should be disclosed. The duty to disclose all material information occurs prior to the commencement of cover, if the contract is varied and prior to each renewal. Failure to disclose all material information may result in Vero avoiding your insurance policy. This means your policy would be deemed never to have existed and any claims would not be payable.

Privacy Act 1993: This proposal collects personal information in order to evaluate your insurance requirements for the purpose of deciding whether to issue insurance cover and if so on what terms. The information collected will be held by Vero, 48 Shortland Street, Auckland. Failure to provide any personal information requested may result in your application for insurance being declined. Individuals have a right to request access to and correction of their personal information subject to the Privacy Act 1993.

I/we declare that: **1.** Subject to any rights I/we have under the Clean Slate Act, the information given is in every respect correct and complete and all material information has been disclosed to Vero. **2.** This Proposal shall be the basis of the contract between me/us and Vero, and I am/we are willing to accept cover subject to Vero's policy terms, conditions, exclusions and any special terms they may require.

I/we authorise: **1.** Vero to give and obtain from other Insurance Companies, Insurance Brokers, the Insurance Claims Register Ltd or any other party any information relating to this or any other insurance held or previously held by me/us and any claim(s) made by me/us. **2.** Vero to use my/our personal information to advise me/us of Vero's products and/or services.

I/we undertake to inform Vero immediately of any material events or changes in circumstances which occur after the commencement of this policy or after any renewal.

Signed (Signatures of Proposers)

Dated