

PWC PERSONAL JET WATERCRAFT APPLICATION

QUOTE only BIND (Please attach quote) Requested Effective Date: _____ Reference # _____

REGISTERED OWNER APPLICANT * (Company names also require our supplementary "Company Name Audit Form") *****

Name of **Owner #1**: _____ % use _____ DOB: _____ (mm/dd/yyyy) Age: _____
 Name of **Owner #2**: _____ % use _____ DOB: _____ (mm/dd/yyyy) Age: _____
 Mailing Address: _____ City: _____ Prov.: _____ Postal Code: _____
 Are the registered owners the main operators? YES NO

If No, Details of main operator (e.g. Full name, Relationship to owner, Age/DOB, PWC jet experience, Auto record):

EXPERIENCE, HISTORY and USE

Has Insurance ever been cancelled or declined or refused? YES NO
 If Yes, please explain:

 Is Vessel used for Recreational Private Pleasure use only? *(Please Note: Only private recreational use qualifies)* YES NO
 Navigational limits Required (Province/Region/ or Waters where boat will be used?):

 Lienholder/Loss Payee name and address (if applicable):

 Is this Boat Leased? *(Please Note: Leased watercraft do not qualify)* YES NO
 Are there any modifications, power or otherwise? YES NO
 If Yes, please explain:

CLAIMS / LOSS HISTORY

Any Boating Losses or Claims in last 3 years? YES NO
 If Yes, please advise Dates/Payout/Description:

Auto Driving Record details in 3 years (Please list all moving traffic violations and At Fault accidents per operator):

PWC - PERSONAL JET WATERCRAFT DETAILS

Year: _____ Length(ft): _____ Brand/Manufacturer: _____ Model: _____
 Max Speed (mph): _____ Horsepower: _____ HIN/Serial #: _____
 Purchase Date: _____ Purchase Price: CAN\$ _____ Current Market Value: CAN\$ _____

TRAILER

Year: _____ Brand/Make: _____ Serial #: _____ Trailer Value: CAN\$ _____

P&I LIABILITY

Liability Limit required: 1 Million (default) 2 Million 500,000 250,000 (min.)

Page 2 required to be answered to quote or bind.

NOTICE TO APPLICANT: Keeping this coverage affordable requires making some sensible policy limitations.

- This policy excludes the following: Theft, unless it occurred following illegal and forcible entry or exit to a locked building in which the insured property is located. There must be visible marks at the point of forced entry or exit.
- This Theft coverage restriction does not apply where the personal watercraft is: Onboard or tied to your yacht, on top of the dock whilst locked and chained to that dock, or on a boat lift system attached to a dock or land.
- The total premium is 50% minimum earned and retained in the event of a cancellation.

Does the Applicant accept and understand the NOTICE TO APPLICANT terms and conditions above?

Yes, I Accept above NO, I'd like to upgrade optional coverage below where possible

Optional Coverage Upgrade: Theft Precaution Waiver Endorsement - TPW Endorsement (Additional Surcharge applies)

- If you are opting for the Theft Precaution Waiver Endorsement - TPW Endorsement (April 1, 2022). You acknowledge that the PWC watercraft you are applying for additional coverage, is equipped with a factory anti-theft electronic key/touch pad and is a 2015 or newer model. Otherwise the basic coverage and requirements above will still apply.
- TPW Endorsement removes the requirement for theft precautions mentioned above to be implemented.
- The total premium is 50% minimum earned and retained in the event of a cancellation.

Does the Applicant request the optional TPW coverage? Yes, I Request optional TPW coverage if qualifies NO

Additional Comments/ requests:

DECLARATION / CONSENT

PLEASE READ BEFORE SIGNING: A claim will become invalid and the Insured's right of recovery is forfeited where (a) an Applicant for this contract gives false particulars to the prejudice of the insurer or knowingly misrepresents or fails to disclose any fact in any part of this application required to be stated therein; or (b) the insured fails to inform material changes to these facts during the term of the contract; (c) the insured contravenes a term of the contract or commits a fraud; or (d) the insured willfully makes a false statement in respect of a claim. The Applicants have reviewed all parts and attachments of this application and acknowledge that all information is true and correct and understand that this application for insurance is based on the truth and completeness of this information.

The personal information provided in this document and in the future including, but not limited to, credit information and claims history may be collected, used and disclosed by the insured's representative or insurance company, subject to local legislation, for the purpose of communicating with the insured or their representative, assessing the application for insurance and underwriting any such policies, evaluating claims, detecting and preventing fraud, and analyzing business results. I confirm that all individuals whose personal information is contained in this document have authorized that I agree to the above on their behalf.

NOTE: Insurance is not in effect until Premier has issued a binder or policy documents.

PRINT NAME OF APPLICANT(S):

SIGNATURE OF APPLICANT(S):

DATE:

BROKERAGE NAME / BRANCH:

BROKER PHONE/FAX:

BROKER EMAIL:

SIGNATURE OF BROKER:

NOTE: Insurance is not in effect until Premier has issued a binder number. The company in its sole judgment may elect to accept or reject any application.

Premier Marine Insurance Managers Group (WEST) Inc. is one of Canada's largest Managing Underwriting Agents. The underwriting insurance carrier varies by line of business and region - please refer to specific quote for declaration of the underwriting insurance company(s).

**** Email application and attachments to - newbizmarine@premiergroup.ca ****

Western Region - T 604.669.5211 F 604.669.2667

Ontario & Atlantic Canada - T 519.850.1610 F 519.850.1614