



## CHARTERS LIABILITY INSURANCE APPLICATION

1. Name: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. Principal Business: \_\_\_\_\_
4. Gross Sales/Revenue (Prior, Current & Projected): \_\_\_\_\_
5. Management Chartering Experience: \_\_\_\_\_

### Chartering Information

1. Types & Origins of Cargo:
2. Relationship of Applicant to Cargo (Producer, Grower, Manufacturer, Distributor, Buyer, Seller, Broker, Forwarder, Etc.):
3. Description of all contemplated voyages including ports and including number per year:
4. Types of Charter (i.e. voyage, time space, bareboat demise, etc.) and anticipated duration of voyage charters:
5. Types of chartered vessels (i.e., Dry Cargo, Container, Tanker, Parcel, Bulk Carrier, Supply Boat, Utility Boat, Crew Boat, Tug & Barge, etc.)
6. Chartered Vessel Ownership, Age, Size (GRT/DWT), U.S.C.G. Classification Data:
7. Describe loading, Stowage, Trimming and discharge methods and who is responsible for each:

8. Who issues and signs bills of lading?
  
9. In the case of Supply Boats, Utility Boats, Tugs and Barges, Etc., give details of hold harmless/indemnity and naming and waiving agreements and in the latter circumstances the minimum protection and indemnity, collision and towers liability insurance limits required and whether the "to other than owners" limitation is deleted form the owner's policies.
  
10. Will liability insurance be required for other/third-party cargo?      If so, explain when and how often and in connection with which charters.
  
11. Attach list of charters showing vessel name, age tonnage; cargo and voyage over the past three years:
  
12. List all charterer's liability claims (whether insured or otherwise)made against the applicant over the past five years:
  
  
13. Limit of Liability required:    \$ \_\_\_\_\_
14. Deductible                            \$ \_\_\_\_\_
15. Attachment Date:

I understand that the above information, which is correct and complete to the best of my knowledge, is to be the basis of insurance but does not obligate me to accept the insurance nor these underwriters to assume risk.

\_\_\_\_\_  
Signature of Broker/Agent                      Signature of Applicant                      Date