



WATERCRAFT SUPPLEMENTAL (Complete in addition to ACORD Application)

Proposed First Named Insured & Other Named Insured(s):

| | | | | | |
|------------------|--------|------|--------|-------|----------|
| Location Address | Street | City | County | State | ZIP Code |
|------------------|--------|------|--------|-------|----------|

BUSINESS INFORMATION

- Number of years' experience: _____
- Do you require guests to sign a liability waiver? *If yes, attach a copy.* Yes No
- Is any training/instruction provided for operation and watercraft safety? Yes No
- Do you rent to any minors? Yes No
- Do you have a brochure or web page? Yes No
- Do you rent houseboats, watercraft in excess of 30 ft., jet skis or wet bikes, or offer any waterskiing or similar water sports?
If yes, provide details: _____ Yes No
- Do you carry Hull & Protection & Indemnity coverage on any listed watercraft?
If yes, provide details: _____ Yes No
- If operations are seasonal, ashore: From: _____ To: _____
Where stored when not in use or ashore: _____

WATERCRAFT SECTION N/A

Boat Schedule (attach additional sheet if needed)

| Year | Make & Model | Length | HP | OB / IB / IO / Sail | # Passengers | Guided? | |
|------|--------------|--------|----|---------------------|--------------|--------------------------|--------------------------|
| | | | | | | Yes | No |
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
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| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |

- Bodies of water on which use takes place: Rivers Lakes Ocean Bays/Inlets
If rivers, indicate classes of boats: Class I Class II Class III Class IV Class V
- Are life vests (PFDs): Required? Yes No
Provided? Yes No

IMPORTANT NOTICE

DECLARATION

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE.

As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information concerning character, general reputation, and credit history. Upon your written request, additional information as to the nature and scope of the report, if one is made, will be provided.

SIGNATURES

| | | |
|---------------------------|-------|------|
| Applicant Signature | Title | Date |
| Producer Signature | | Date |
| Producer Name and Address | | |