

Movie Boat Application

Contact Information

Name of Company / Organization: _____

Entity Type: _____

Street Address: _____

City: _____

State & Zip: _____

Contact Person: _____

Phone: _____

Fax: _____

Email: _____

Qualification Questions

Is coverage required outside of the U.S. and Canada? Yes No

Does the following apply to any vessels used in the production: Yes No

Vessel used within 50 miles of attachment? Yes No

Vessel used out of water? Yes No

Other vessels to be towed? Yes No

Is there water-skiing? Yes No

Are there any stunts? Yes No

Any prior production with any losses of any kind? Yes No

Production Details

Type of Production _____

Title of Production _____

Budget (Gross Production Cost) _____

Brief Description/Synopsis of Shoot _____

Cities & States of Shooting Locations _____

Coverage Dates of the Production _____

Movie Boat Application

Coverage Options (Complete for each Vessel)

Vessel Details

Name:	_____	Registration #	_____
Year:	_____	Length:	_____
Market Value:	_____		
Type:	_____	Builder:	_____

Vessel Use

Dates of Use: _____

Use	# Vessel Crew	#Production Crew	# Days
Operating			
Dockside			

Place of Attachment: _____

Locations Used: _____

Navigation area to be Used: _____

Vessel Owner

Name of Company / Organization: _____

Street Address: _____

City, State & Zip: _____

Contact Person: _____

Phone: _____

Fax: _____

Owner Named as: Additional Insured / Loss Payee

Coverages

Hull & Machinery	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Protection & Indemnity	<input type="checkbox"/> 1,000,000	<input type="checkbox"/> 10,000,000
Wharfinger's Liability	<input type="checkbox"/> 1,000,000	<input type="checkbox"/> 10,000,000
Towers Liability	<input type="checkbox"/> 1,000,000	<input type="checkbox"/> 10,000,000
Charterer's Liability	<input type="checkbox"/> 1,000,000	<input type="checkbox"/> 10,000,000

Signature: _____	Date: _____
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