



Please download this form to your desktop BEFORE completing it.

SECTION 1: MARINA OPERATOR/BOAT DEALER APPLICATION

Applicant Name:		Years in Business (if less than 3 yrs, please attach resume)
Mailing Address (including City, State, Zip):		
Total Projected Gross Receipts for Terms: \$		Proposed Effective/Expiration Date:
List of Insured Locations:		
1.		
2.		
3.		
4.		

SECTION 2: MARINA OPERATORS:

MARINA OPERATORS LIMITS:	
\$	General Aggregate
\$	Products - Completed Operations Aggregate
\$	Personal And Advertising Injury
\$	Each Occurrence
\$	Fire Damage Legal Liability
\$	Medical Expense
\$	Marina Operators P&I

DEDUCTIBLE: \$ _____

MARINA EXPOSURE:	ANNUAL SALES
Dock/Slip Rental	\$
Storage	\$
Fueling	\$
Hauling/Launching	\$
Repair	\$
Rental Boats	\$
Boat Sales	\$
Boat Brokerage Commissions	\$
Retail Store	\$
Restaurant	\$
Liquor Receipts (If Applicable)	\$
Other Receipts (Please Describe):	\$



SECTION 3: MARINA OPERATOR DETAILS:

Premises Protection (check if applies):

Central Station Alarm	#1 _____	#2 _____	#3 _____	#4 _____
Completely fenced & lighted	#1 _____	#2 _____	#3 _____	#4 _____
Watchman service	#1 _____	#2 _____	#3 _____	#4 _____
Owner/Manager lives on premises	#1 _____	#2 _____	#3 _____	#4 _____
Bubbler system (slip rental / wet storage)	#1 _____	#2 _____	#3 _____	#4 _____
Paid fire protection	#1 _____	#2 _____	#3 _____	#4 _____
Miles from fire station	#1 _____	#2 _____	#3 _____	#4 _____
Public fire hydrants # & distance	#1 _____	#2 _____	#3 _____	#4 _____
Other security measures	#1 _____	#2 _____	#3 _____	#4 _____

Dock and Slip Rental

Number of slips and mooring buoys available at each location:	#1 _____	#2 _____	#3 _____	#4 _____
Of the above, how many slips are covered?	#1 _____	#2 _____	#3 _____	#4 _____
Average value of vessels in slips/moored	#1 \$ _____	#2 \$ _____	#3 \$ _____	#4 \$ _____
Maximum value of vessels in slips/moored	#1 \$ _____	#2 \$ _____	#3 \$ _____	#4 \$ _____

Storage

Maximum number of vessels stored in one year:	#1 _____	#2 _____	#3 _____	#4 _____
Maximum number stored in summer months:	#1 _____	#2 _____	#3 _____	#4 _____
Maximum number stored in winter months:	#1 _____	#2 _____	#3 _____	#4 _____
Average value of vessels in stored:	#1 \$ _____	#2 \$ _____	#3 \$ _____	#4 _____
Maximum value of vessels in stored:	#1 \$ _____	#2 \$ _____	#3 \$ _____	#4 _____
Total Number of boats stored:	#1 _____	#2 _____	#3 _____	#4 _____
Total Number of boats stored in racks?	#1 _____	#2 _____	#3 _____	#4 _____



Maximum number of vessels stored in racks at any one time:

#1 _____ #2 _____ #3 _____ #4 _____

Number of boats stored afloat during freezing months?

#1 _____ #2 _____ #3 _____ #4 _____

Describe method to prevent freezing:

Winterizing and Make Ready maintenance a part of the Storage Agreement? Yes _____ No _____

If 'Yes' please submit a copy of the Storage Agreement

Describe building(s) construction for land storage:

Fueling and Miscellaneous Servicing:

Who performs actual fueling, employee or boat owner?

Automatic or Emergency fuel shut off switch? Yes _____ No _____

Fuel tanks: Underground tanks: _____ Age: _____ Above ground tanks: _____ Age: _____

Describe fuel tank maintenance and testing: _____

MARINA OPERATORS DETAILS (CONTINUED):

Hauling and Launching:

Describe hauling and launching facility and equipment:

Repair Operations:

Type of Work Performed:

Are vessel owners allowed to work on their own vessels? Yes _____ No _____

Highest value of any one vessel: \$ _____

Maximum values at any one time: \$ _____

Average values at any one time: \$ _____



Describe any non-private pleasure vessel work done and amount of gross receipts:

SECTION 4: BOAT DEALERS

BOAT DEALER LIMITS:	
\$	Any One Watercraft While At A Scheduled Location
\$	Any One Watercraft Accepted As Trade-In While At Locations Other Than Those Scheduled For Not Exceeding 15 Days
\$	Any One Watercraft During Land And Water Transit Within 75 Miles Of A Scheduled Location
\$	Any One Watercraft While On Exhibit At Watercraft Shows
\$	Any One Accident Or Occurrence With Respect To Accessories And Supplies In Inventory At The Scheduled Locations
\$	Any One Accident Or Occurrence For All Coverage Provided By This Policy, Except As Provided In The Protection And Indemnity Clause
\$	Any One Accident Or Occurrence, Including Legal And Investigative Expenses, With Respect To Claims Covered By The Protection And Indemnity Clause

DEDUCTIBLE: \$ Per occurrence except;
 \$ In the event of losses resulting from windstorm or hail

BOAT DEALER EXPOSURE:	
Average Monthly Inventory (All Boats/Motors Trailers And Marine Supplies)	\$
Maximum Monthly Inventory	\$
Average Value of Inventory in Water at any one time	\$
Maximum Value of Inventory in Water at any one time	\$
Anticipated Total Values of Boat Delivered by Land or Water	\$
Maximum Values of All Boats at Any One Boat Show	\$
Maximum Value of Marine Accessories	\$
Maximum Value in Water at any one time	\$



SECTION 5: BOAT DEALERS DETAILS:

Manufacturers and Type of Watercraft:

Power: _____

PWC (Jet Skis, Wave Runners, etc): _____

Sail: _____

Motors: _____

Trailers: _____

Boats delivered by land or water:

Maximum distance, land: _____

Maximum distance, water: _____

Boat shows:

Number annually: _____

Maximum number of boats any one show: _____

Transported by: Common carrier _____ Owned vehicles _____ both _____
Maximum distance _____ miles

Demonstrations:

Number per month: _____

Maximum speed any one boat: _____ MPH

Where are demonstrations performed: _____

Miles from shore: _____ Distance from dealership: _____

Does USCG license operator? Yes _____ No _____

Is operator properly trained on vessel to be demonstrated? Yes _____ No _____

Are all vessels to be demonstrated properly outfitted as per manufacturer's specifications and in compliance with USCG regulations?
Yes _____ No _____



SECTION 6: Dock/Piers/Wharves Schedule

Dock #	Value	Age	Floating/Fixed	Covered Y/N	Construction	# of Slips
1	\$					
2	\$					
3	\$					
4	\$					
5	\$					

**Use separate page for additional docks.*

Who constructed and/or manufactured docks? _____

List exposures within on ¼ mile in all directions: _____

How was the insured value of these docks determined? _____

How high do the pilings project above the docks at normal high tide? _____

If no pilings, describe moorage system (cables, anchors and mooring winches). _____

List cost to replace docks, as currently constructed: \$ _____

ISO Fire Protection Class applicable to this location: _____

Distance to nearest fire department: _____ Miles

Describe maintenance program: _____

When were the pilings and/or floats last inspected, replaced, repaired, etc? _____

Describe what was done to the pilings and/or floats and who performed the work? _____

Describe any structural alterations/construction/demolition during the policy year. _____

Describe fuel system on docks if applicable: _____

Describe electrical system on docks if applicable: _____

Describe any natural barriers, breakwaters or construction features to prevent wave action damage to docks (Attach any photos or drawings): _____



Describe any engineering designs to help control wind damage: _____

_____. Designed wind rating: _____ mph

Are Docks snow braced or otherwise designed to withstand the weight of ice/snow? (Describe): _____

Please attach a photo or scale drawing of entire dock system.

Please attach rental agreement for slips. Coverage will be based on slip owners maintaining liability insurance coverage on their vessels.

SECTION 7: LOSS EXPERIENCE

List all Boat Dealer and/or Marina Operator's claims (insured or not) during past 5 years on all operations.

(ATTACH FULL LOSS EXPERIENCE DETAILS)

YEAR	PREMIUM	PAID LOSSES	OPEN / SETTLED	TOTAL
Applicant Signature		Date	Agent or Broker	Date

Additional Options

Flood Coverage Quote

Earthquake or Earth Movement Quote

ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES.

Loss or damage, if any, under this policy shall be paid to:

TCF Inventory Finance Inc. Schaumburg Corporate Center
 1475 East Woodfield Road, Suite 1100
 Schaumburg, IL 60173

Submit the completed form to Carey Urbancich at Carey.Urbancich@aleragroup.com