

Markel Marine Insurance



Tradesman Commercial ApplicationMultiple use combined

Greetings,

Thank you for contacting Markel to secure a quote on the commercial use of your boat. We understand owners of commercial use boats are exposed to significant risks and liabilities; and we take that very seriously.

It is important for us to understand how the business is run and what actions/protective measures are taken to minimize or avoid losses. Accordingly, please provide the following documentation:

- This fully completed and signed application
- Anything additional you believe would be helpful

Once this information is received, we will begin underwriting your account.

Thank you,

Markel Personal Lines - Underwriting



Markel Marine Insurance



Tradesman Commercial Application

Multiple use combined

Thank you for your interest in Markel Mari Please be sure to read the policy warrantie			nswers to all ques	tions.			
Producer information:							
General agent code:	Producer code:	Desired effective date:					
Name:	-	1					
Address:							
Phone:		Contact email:					
Section 1. Business information							
Named insured (including DBA names):							
Tax ID/FEIN #:	Mooring location	zip code:	Year busines	s was establis	hed:		
Marina/location address:		•					
Marina/location address:							
Mailing address:							
Primary phone:		Secondary phone:					
Email:		Website:					
Section 2 Decimal information							
Section 2. Designee information First designee name:		Date of birth:					
Home address:		SSN:					
Second designee name:		Date of birth: SSN:					
Home address:		33IV:					
Section 3. Business detail Usages: □ Charter □ Guide □ Barebo Describe your business in detail:	at □ Bed and Breakfas	st 🗆 Commercial fish 🗅	Boat school C	ther/Owner			
Describe your operational experience:							
Please answer the following regarding your business: 1. Who is your current insurer: 2. Has anyone involved with the business ever been convicted of a felony?				☐ Yes	□ No		
3. Has the business been cancelled, non-renewed, or refused insurance coverage? ☐ Yes ☐ No Please describe any 'yes' responses for questions 2 and 3 above:					□ No		
Additional insured(s): Please provide name, address, and re	lationship.						
Please list and describe all prior business a	nd marine losses/claims	:					
Section 4. Safety							
Please explain your safety measures.							

Section 5. Boat usage							
Please answer the following regarding boat usage:							
 Is the business in compliance with all legal requirements? Is overnight usage of the units allowed? 	☐ Yes ☐ Yes	□ No □ No					
Is operation permitted from dusk to dawn?	☐ Yes	□ No					
Please describe any 'yes' responses for questions 2 through 3 above:							
 Are all units seaworthy and fit for their intended purpose? Are all units and components unmodified and stock? 		☐ Yes ☐ Yes	□ No □ No				
 Are all units and components unmodified and stock? If a pontoon, are all access gates attached and in good world. 	king order? <i>Photos required</i>	☐ Yes	□ No				
Is seating available for all guests that is permanently affixed		☐ Yes	□ No				
Please describe any 'no' responses above:							
Do you lay up the unit seasonally? If yes, please select: ☐ Ashore	□ Afloat □ Op a lift						
Please provide layup dates: From to to	LI Alloat LI OII a IIIt						
Lienholder(s)/Loss payee(s):							
Please provide name, address, and relationship.							
Section 6. Charter usage							
Do you employ a crew?		☐ Yes	□ No				
If yes, how many crew (including a hired captain) are on board?							
Is food or liquor provided to passengers?		☐ Yes	□ No				
If yes, please describe how alcohol is provided and if there is a charge.							
Describe any shoreside activities.							
Section 7. Bareboat charter usage							
How old must a person be to charter a vessel?	How old must a person be to operate?						
Do you require all known participants to sign the contract?		☐ Yes	□ No				
Describe how you screen and validate the experience of each participant (attach applicable forms).							
Section 8. Navigation							
Describe the waters where the units are used.							
If coastal: □ 1 mile □ 5 miles □ 25 miles □ 50 miles □ 100 miles							
Section 9. Operator information							
Complete addendum for added captains.							
Full name:	Date of birth:						
Driver's license #:	License state:	Year USCG lice	ensed:				
Does the business owner or a captain operate the vessel more than		□ Yes	□ No				
Describe and provide the month/year for all motor vehicle violations and accidents in the past three years:							
,							
Describe and provide the month/year for all marine losses that have occurred personally, or for any vessel when its operator was in							
control.							
Does the operator take any medication or substance that could impa	air physical or cognitive ability?						
If yes, please describe.	☐ Yes	□ No					

Please list experi	ence for the thre	ee most recent ve	essels owner	d or oper	rated.						
Vessel year	Bui	ilder	Length	From ((mo/yr)	To (mo/yr) (Owned		Operated	
							□ Y	'es □ No		I Yes □ No	
							□ Y	'es □ No		I Yes □ No	
							□ Y	'es □ No		☐ Yes ☐ No	
Describe training	and safety cour	ses taken:									
Has the operator sustained any injuries that required a doctor visit, hospitalization, or professional care in the past five years? ☐ Yes ☐ No If yes, please describe.											
Does the operator have any known health problems? ☐ Yes ☐No If yes, please describe.											
Does the operator	or have health in	surance?							☐ Yes	□No	
Unit schedule	е										
Photos of por	ntoons are re	equired, shov	ving the (conditi	on of th	e unit and	l that all	gates a	re fully r	oaneled.	
-		☐ Bareboat ☐									
For charter use, i	number of passe	engers:									
Sail: Mono hull Multi hull		Fishing: ☐ Bass ☐ Center co ☐ Sportfish ☐ Drift boat			wer: Cruiser Jet boat Housebo Trawler	at 🗆	PWC Runabou Airboat Yacht	t 🗆	Pontoon	(photos required) cial boat	
Unit make:		Year:	Length:		Model:			Serial/Hu	II ID:		
Unit material: ☐ Fiberglass ☐ Wood ☐ Steel/metal ☐ Glass over			s over w	ood 🗆 O	od Other Unit market value:						
Number of engine	es: E	ngine make:		Year:		Horsepower: Eng			ngine serial:		
Trailer year:	Trailer	make:			Trailer ser	ial:		Trailer ma	arket value	::	
Is unit ever kept on a mooring ball? If 'yes', please explain:											
Coverage											
Named windstorm deductible: In areas where a wind deductible applies, the hull value must be greater than the stated deductible, or 5% of the unit value, whichever is greater.											
Minimum written premiums Owner/Operator & Captained charter, Bed & breakfast, Bareboat charter &											
		perator & r-Guide	Captaine		er, Bea & t school	breaktast,		eboat cha mmercial			
	\$5	00		(\$750			\$1,000]	
Hull coverage											
Uni	t deductible	□ 2% □ 3% □ 4%	☐ 5% ☐ 10% ☐ 20% ☐ No hull		<i>'</i>	Emergen		□ \$ ¹ □ \$ ²	750 1,000 1,500	□ \$2,500 □ \$5,000 □ No emergency towing coverage	
Settlement											
Liability coverage Watercraft liability □ \$25,000 □ \$500,000 Personal effects □ \$1,000 □ \$10,000											
waterc	raft liability	□ \$25,000 □ \$50,000 □ \$100,000 □ \$300,000	□ \$500,1 □ \$1,000 □ No lial	0,000		Perso	пагеттес	□ \$2 □ \$!	2,500 5,000 7,500	□ \$15,000 □ \$15,000 □ \$20,000 □ \$25,000	

Watersport liability (available for owner use only)	□ \$25,000 □ \$50,000 □ \$100,000 □ \$300,000	☐ \$500,000 ☐ \$1,000,000 ☐ No watersport liability	Uninsured boater (not available for commercial fish)	□ \$25,000 □ \$50,000 □ \$100,000 □ \$300,000	☐ \$500,000 ☐ \$1,000,000 ☐ No uninsured boater coverage				
Medical Payments	□ \$1,000 □ \$2,500 □ \$5,000 □ \$10,000	☐ \$15,000 ☐ \$20,000 ☐ \$25,000 ☐ No medical payments	Pollution liability	□ \$25,000 □ \$300,000 □ \$997,100 □ No pollution	n liability				
Premise liability? ☐ Yes or Slip and mooring liability? ☐ Yes									
Addendum application and photos required - Coverage limit matches liability limit. Coverage not available for commercial fish Additional usage coverage									
Captained charter Crew liability # crew	□ \$25,000 □ \$50,000 □ \$100,000	□ \$300,000 □ \$1,000,000	Charter/Guide Fishing equipment	□ \$1,000 □ \$2,000 □ \$3,000 □ \$4,000	□ \$5,000 □ \$7,500 □ \$10,000				
Fishing equipment	□ \$1,000 □ \$2,000 □ \$3,000 □ \$4,000	□ \$5,000 □ \$7,500 □ \$10,000	Business interruption Preferred charter	□ \$2,500	□ \$5,000 No				
Business interruption	□ \$2,500	□ \$5,000	Shoreside liability extension	□ Yes □ I					
Liveaboard	☐ Yes ☐ No	L \$0,000	Shoreside liability extension		NO				
Preferred charter	□ Yes □ No								
Shoreside liability extension	□ Yes □ No								
Guest passenger liquor liability	□ Yes □ No								
Bareboat Captained charter	☐ Yes – No. of ☐ No	passengers	Boat school Captained charter	☐ Yes – No. o	of passengers				
Bed and breakfast Liveaboard	□ Yes □ No		Owner/Operator Liveaboard	□ Yes □ I	No				
Business interruption	□ \$2,500 □ \$5,	000	Cargo	□ Yes □ I	No				
Captained charter	☐ Yes – No. of passengers		Business interruption	□ \$2,500 □ \$	\$5,000				
Captaineu chartei			Crew liability	□ \$25,000 □ \$50,000 □ \$100,000 □ \$300,000 □ \$500,000 □ \$1,000,000)				
Notice									
For BAREBOAT CHARTER r									
By signing this application, you warrant: • A charterer shall not be:									
Less than 18 years of age;Permitted to use the insured vessel for any purpose other than pleasure;									
 Permitted to race the insured vessel; or Permitted to sub-charter or assign the Charter Agreement to another party. 									
Appropriate measures shall be undertaken to validate that the charterer has sufficient experience to command, operate, and navigate the insured vessel									
via written resume and verbal interview. • Any charterer shall hold a valid driver's license. A photocopy of the driver's license(s) must be retained for a period of two years.									
 Prior to any bareboat charter, all operators shall be provided: Instruction covering the operational characteristics of the insured vessel; Appropriate personal floatation devices for each person aboard, as required by the Coast Guard or other legal entity with controlling 									
authority; and O Appropriate safety equipment, as required by the Coast Guard or other legal entity with controlling authority.									

For BED AND BREAKFAST risks

By signing this application, you warrant:

- A bed and breakfast guest may not start the engines or navigate the insured vessel.
- At all times, working smoke and carbon monoxide detectors will be onboard and functional in all state rooms, and as recommended by the American Boat & Yacht Council

For ALL risks

OR

PA

By signing this application, you warrant:

- . The insured unit is currently seaworthy and that it shall be maintained in a seaworthy condition during the entire policy period
- The insured unit is to be used only for the declared usage, as stated on the declarations page
- You possess all required federal, state, and local permits and licenses for the declared usage
- The maximum number of passengers aboard the unit shall not exceed the lesser of:
 - The limit for passengers or weight by the manufacturer;
 - The limit for passengers or weight by the Coast Guard, or other legal entity with controlling authority; or
 - o The limit for passengers as shown on the declarations page.
- No captain or crew is under the influence of alcohol in excess of the legal amount, or under the influence of marijuana in any amount
- The insured unit will not be transported overland, outside of the continental United States
- While being towed overland on a trailer, the combined weight of the insured unit trailer and any equipment may not exceed the towing capacity, as provided by the manufacturer of the towing vehicle
- If the insured unit is being transported by contract of common carrier, the contract or common carrier must be licensed and must provide a certificate of insurance covering the insured unit

Applicant statement and signature

This notice is given in compliance with the Federal Fair Credit Reporting Act (Public Law 91-508) and the Consumer Credit Reform Act of 1996. I understand that as part of the Company's underwriting procedure, a routine inquiry may be made which will provide applicable information concerning character, general reputation, personal characteristics, mode of living, and driving record. Upon written request, additional information as to the scope of the report, if one is made, will be provided.

To offer an accurate quote in connection with this application for insurance, we will review the business designee's credit report or obtain or use a credit-based insurance score based on the information contained in that credit report. We may use a third party in connection with the development of the business designee's insurance score. Future reports may be used to update or renew insurance.

Fraud warning: It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits. Your state may have specific warnings against filing false claim information.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Providing false, incomplete or misleading information to an insurance company for the purpose of defrauding the company may be considered insurance fraud which can be subject to prosecution. In addition, insurance provided by this policy shall be null and void if you, at any time, including renewal(s), either intentionally conceal or misrepresent any fact, regardless of materiality, or if you misrepresent or conceal any material fact regardless of intent. Any and all charges in any fact(s) or circumstance(s) material to our acceptance of this risk arising during the term of this policy and/or any renewal(s) must be disclosed to us as soon as possible, and any failure to make such disclosure during the term of the policy shall also render this policy null and

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of a claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

Applicant signature:	Date:
Producer signature:	Date: