



Admiralty Insurance Agency, Inc.

10 Mt. Vernon St. #253

Winchester, MA 01890

Phone: 781-721-5500 Fax: 781-721-5509

"THE ADMIRALTY ADVANTAGE"

Experience: We have been there! Our management team has been in the boating arena, in both commercial and recreational, for over forty years.

Stability: Our management team are veterans to the marine industry. The insurance markets, with which we work, have a long-standing commitment to provide superior marine insurance products and services.

Response: Admiralty has the bandwidth to make it happen for you. We know what you need and how to get it. We are available both the old fashioned way as well as via email or our interactive web site. If you are buying a boat or renewing an existing policy welcome aboard. Download, print, complete and submit our "Quote Request" form via fax or mail and let us go to work for you. You may also complete our "Quote Request" form online and submit it to us through the website...for Power, Sail, Mega Yacht or Personal Watercraft.... it's that easy!

Privacy: The following information is gathered in order to provide the requested insurance coverage. We do not sell any information about you that we received from this website. We will use the information to contact and provide you with information about Admiralty Insurance Agency and its products. Some of the information you provide is not needed by all companies but is collected for expediency. We will present all the information you provide to the insurance company for them to offer a competitive quote. The application becomes the basis for and part of the insuring agreement so the information you provide must be accurate. Some questions may not apply but to save undue delay should be answered.



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Surveys: Please note that any boat over 10 years old must have a full out of water survey in order of us to offer a quote.

Please complete and mail or fax these pages to:

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QUOTE REQUEST FORM - BOATS & YACHTS PROGRAM

Please complete and mail or fax these pages to:

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10 Mt. Vernon St. #253

Winchester, MA 01890

Fax: 781-721-5509

Boats over 10 years old must have a full out-of-the-water survey in order to consider for a quote.

ABOUT THE OWNER:

Name of Registered Owners: _____

Mailing Address: _____

City: _____ State: _____

Zip: _____

Phone: _____

Alternate Phone: _____



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Fax Number: _____

Email Address: _____

COVERAGE REQUEST:

Vessel Purchase Price: _____

Deductible: 1% 2% other

(Lower rate applies for higher deductible)

Liability: \$100,000 \$300,000 \$500,000
 \$1 million \$ other

ABOUT YOUR BOAT AND MACHINERY:

Year Built: _____

Length Overall: _____

Manufacturer: _____

Type or Model: _____

Hull Material: Fiberglass Aluminum Steel



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Engine Make: _____

Horsepower: _____

Type: Inboard Outboard I/O

Fuel: Gas Diesel

Auto Fire Extinguishing System: Yes No

Other Equipment: VHF Compass Depthfinder
 Fume Detector GPS Loran Radar

TENDER AND OUTBOARD TO PRIMARY BOAT:

Tender Year: _____

Tender Length: _____

Tender Manufacturer: _____

Cost of Tender: _____

Outboard Year: _____

Outboard Manufacturer: _____



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Outboard Horsepower: _____

Cost of Outboard: _____

TRAILER:

Year of Trailer: _____

Manufacturer of Trailer: _____

Current Market Value: _____

ABOUT THE OPERATOR (S):

Operator No. 1

Operator Name: _____

Date of Birth: _____

Your Years as an Operator: _____

Your Years as Owner: _____

Have you completed a Safe Boating Course such as offered by the Coast
Guard Auxiliary or US Power Squadron? Yes No



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Have there been any boating or marine liability, losses, claims or accidents in the past five years? Yes No

If yes, provide date details of loss and amount paid:

Date of Loss: _____ Amount Paid: _____

Operator No. 2

Operator Name: _____

Date of Birth: _____

Your Years as an Operator: _____

Your Years as Owner: _____

Have you completed a Safe Boating Course such as offered by the Coast Guard Auxiliary or US Power Squadron? Yes No

Have there been any boating or marine liability, losses, claims or accidents in the past five years? Yes No

If yes, provide date details of loss and amount paid:

Date of Loss: _____ Amount Paid: _____



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PRIOR VESSELS OWNED:

Prior Vessel Owned No. 1:

Make: _____

Model: _____

Length: _____

Prior Vessel Owned No. 2:

Make: _____

Model: _____

Length: _____

USE OF THE BOAT:

Is boat used for private pleasure use only? Yes No

Do you use a paid captain or crew? Yes No

If yes, how many? _____

Is the boat ever chartered, rented or used commercially?

Yes No



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Is the boat ever used for racing? Yes No

Is the boat used for water-skiing? Yes No

Is the boat ever used for any scuba diving activities?

Yes No

Is the boat used as a primary residence? Yes No

Do you transport your boat overland? Yes No

If yes, how many miles? _____

NAVIGATION AND LOCATION:

Describe the navigation limits that specifically meet your needs:

Location of the boat when in commission including zip code:

Marina Name, if any: _____

City: _____ State: _____



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Zip: _____

Location of the boat when laid up and out of commission including zip code:

Marina Name, if any: _____

City: _____ State: _____

Zip: _____

Ashore: Yes No

CURRENT INSURANCE INFORMATION:

Company: _____

Renewal Date: _____

Any Insurance Cancelled, Declined or Non-Renewed:

Yes No

If so, detail reason: _____

Does the boat have any deficiencies or unrepaired damage?

Yes No

If so, detail reason: _____



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Is the boat owned in whole or in part by anyone other than you (excluding a lienholder)? Yes No

If so, detail reason: _____

Is the boat ever stored in a public parking area such as an apartment house parking lot? Yes No

If so, detail reason: _____

Was there a lapse in insurance coverage for more than 30 days just before answering this question? Yes No

If so, detail reason: _____

Have you or any regular operator ever been convicted of or pleaded no contest to a felony? Yes No

If so, detail reason: _____

Has any operator:

Been charge with operating a boat or motor vehicle under the influence of drugs or alcohol Yes No

Been charged with reckless or careless driving Yes No

Had more than 2 moving violations within the last 36 months

Yes No



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Any special comments, questions or instructions, be sure to let us know.

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QUOTE REQUEST FORM - JET SKI PROGRAM

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ABOUT THE OWNER:

Name of Registered Owners: _____

Residential Address: _____

City: _____ State: _____

Zip: _____

Phone: _____

Alternate Phone: _____

Fax Number: _____



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Email Address: _____

Liability: \$10,000 \$25,000 \$50,000
 \$100,000 \$ 300,000 \$ other

ABOUT THE PERSONAL WATERCRAFT:

Model Year: _____

Model Length: _____

Manufacturer: _____

Model: _____

Engine CC's: _____

Purchase Date: _____

Purchase Price: _____

Current Value: _____

Designed Passenger Capability:

1 2 3 4



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Storage Location: _____

(If left blank we will assume that the storage location is the same as your residence as listed above)

TRAILER:

Year of Trailer: _____

Manufacturer of Trailer: _____

Current Market Value: _____

ABOUT THE OPERATOR (S):

(All operators must be at least 16 years old with a valid u. S. Drivers licenses)

Operator No. 1

Name: _____

Date of Birth: _____

Years as Operator of PWC: _____

Operator No. 2

Name: _____



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Date of Birth: _____

Years as Operator of PWC: _____

Operator No. 3

Name: _____

Date of Birth: _____

Years as Operator of PWC: _____

Operator No. 4

Name: _____

Date of Birth: _____

Years as Operator of PWC: _____

NAVIGATION:

Describe the navigation area that specifically meets your needs:



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LIENHOLDER:

Lienholder Name: _____

Street Address: _____

City: _____ State: _____

Zip: _____

CURRENT INSURANCE INFORMATION:

Company: _____

Renewal Date: _____

Any Insurance Cancelled, Declined or Non-Renewed?

Yes No

If so, detail reason: _____

Will subject watercraft be rented or used for any commercial purpose?

Yes No

If so, detail reason: _____



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Will the subject watercraft be operated by a captain or a crew who receives money or other benefits from you?

Yes No

If so, detail reason: _____

Does the watercraft have any deficiencies or unrepaired damage?

Yes No

If so, detail reason: _____

Is the watercraft owned in whole or in part by anyone other than the titled owner as listed above? (excluding a lienholder)?

Yes No

If so, detail reason: _____

Is the watercraft ever stored in a public parking area such as an apartment house parking lot? Yes No

If so, detail reason: _____

Have there been any claims, accidents or losses to boats or from marine liability within the last three years? Yes No

If so, detail reason: _____

Was there a lapse in insurance coverage for more than 30 days just before answering this question? Yes No

If so, detail reason: _____



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Have you or any regular operator ever been convicted of or pleaded no contest to a felony? Yes No

If so, detail reason: _____

Has any operator:

Been charge with operating a boat or motor vehicle under the influence of drugs or alcohol Yes No

Been charged with reckless or careless driving Yes No

Had more than 2 moving violations within the last 36 months

Yes No

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