



## SMALLCRAFT PROPOSAL FORM

Name of Proposer: .....

I.D. Number: .....

Occupation: .....

Postal Address: .....Code: .....

Contact Details:

Home: ..... Business: ..... Fax: .....

Cell: ..... e-mail: .....

Are you the sole owner of the vessel?: Yes / No

If NO, give details: .....

All sums insured must represent the New Replacement Value otherwise Average will apply.

A. Particulars Of Hull				Boat's Name		
Type/Class	Length	Year Built	Material of Hull	Built By	Registration	Sum Insured
						R

B. Particulars of Motors					
	Manufacturer	H.P.	Year	Serial No. (s)	Sum Insured
Inboard					R
Outboard 1					R
Outboard 2					R
<u>SUB TOTAL</u>					R

C. Particulars of Trailer		
Built By	Registration No.	Sum Insured
		R

D. Particulars of Personal Effects & Fishing Equipment e.g. Wet Suits, Life Jackets excl. Scuba Diving Equipment		
Description	Age	Sum Insured
1.		R
2.		R
3.		R
4.		R
	SUB TOTAL	R

E. Particulars of Special Electronic Equipment e.g. Radio, Fishfinder, GPS		
Description	Age	Sum Insured
1.		R
2.		R
3.		R
4.		R
	SUB TOTAL	R

**Total Sum Insured (i.e. total of sections A+B+C+D+E) R.....**

Please supply a copy of your purchase invoice for hull and motors.

**ADDITIONAL INFORMATION REQUIRED**

1. Date Purchased: ..... 2. From whom: .....

3. Price paid: .....

4. Is craft and/or motor subject to hire purchase, and if so, with whom?

.....

5. Date Insurance required from:

.....

6. Will the craft be used for your private pleasure purposes only? YES NO

If no, what will the craft be used for?

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7. Please give details of experience as owner/crew, of craft of this type:

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8. What boating accidents/or casualties and/or claims have you had?

.....

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9. Have you had insurance on any vessel:

a) Declined? ..... or b) Cancelled? .....

10. Do you require SASRIA cover: YES NO

11. Surf Launched: YES NO

12. Where is your boat kept when not in use?

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**DEBIT ORDER FACILITY**

Premiums can be paid on electronically via your bank account Account.

If you prefer to pay via debit order please give provide the following information:

Name of Bank		Branch	
Type of Account		Account No	
Branch Code			
Name of Account Holder		Signature	

**DECLARATION OF THE PROPOSER:**

I hereby declare that the above particulars and answers are true and complete in every respect, and that no material fact has been suppressed or withheld.

I undertake to exercise all ordinary and reasonable precautions for the safety of the property, and I further declare that if such statements and particulars are in the writing of any person other than myself, such person shall be deemed to have been my agent for the purpose.

I agree that this declaration and the answers given above shall be the basis of the contract between me and Horizon Underwriting Managers (Pty) Ltd, and I further agree to accept a policy subject to the usual conditions prescribed by Horizon Underwriting Managers (Pty) Ltd and endorsed on their policy, and to pay the premium thereunder when called upon to do so.

Signing this form does not bind the proposer to effect this insurance, but it is agreed that this form shall be the basis of the contract should a policy be issued.

Date: .....

Signature of Proposer: .....

**Horizon Underwriting Managers (Pty) Ltd reserves the right to decline this Insurance**