



Yancy Insurance & Financial Services

AGENT: Yancy Insurance & Financial Services
 2019 E Lamar Blvd, Suite 100
 Arlington, TX 76006
 817-277-6100 Phone
 817-261-7514 Fax

APPLICATION FOR YACHT INSURANCE

Applicant Information				
Name				
Address				
City		State		Zip
Home Phone		Work Phone		
Occupation		Effective Date		Expiration Date
If insured is not owner of the vessel, please indicate name and address of owner.				
Operator Information (All anticipated operators must be listed)				
Name		Date of Birth	Drivers License #	State
				Years of Boating Experience
Driving Record (past 3 years)		Prior Carrier:	Premium:	Exp. Date
Description of Prior Owned Vessels				
Loss History for past 5 years in detail (if none, state none)				
Has any policy or coverage been declined, cancelled or non-renewed? If "Yes", please explain.				
Boat Information				
Year:	Make:	Model:	Length:	"Name":
Reg.# / Hull ID#	Boat Type: <input type="checkbox"/> Inboard <input type="checkbox"/> Outboard <input type="checkbox"/> I/O <input type="checkbox"/> Sailboat <input type="checkbox"/> Houseboat <input type="checkbox"/> Other_____			
Boat Construction: <input type="checkbox"/> Fiberglass <input type="checkbox"/> Wood <input type="checkbox"/> Metal	Purchase Date	Purchase Price		
Motor Information				
Year	Make	HP	Serial Number	Please complete if Maximum Speed is 45 mph or higher
				Outdrives – Make/Type
				Serial Numbers
Fuel: <input type="checkbox"/> Gas <input type="checkbox"/> Diesel	Maximum Speed:	Drive Lock / Anti-theft device <input type="checkbox"/> Yes <input type="checkbox"/> No		
Equipment	<input type="checkbox"/> CB <input type="checkbox"/> Radar <input type="checkbox"/> Ship-Shore Radio <input type="checkbox"/> Auto CO2 or Halon System	Date Certified		
<input type="checkbox"/> Single Side Band <input type="checkbox"/> VHF <input type="checkbox"/> Loran <input type="checkbox"/> Satellite Navigation <input type="checkbox"/> Depth Sounder				
Additional Equipment				
Tender Information				Trailer Information
Year	Make	Length	Serial #	Year
Engine	Yr	HP	Serial #	Make
Serial #				
Lienholder Information				
Lienholder Name			Address	
Account #	City	State	Zip	



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Navigational Limits

- Inland waters of the state(s) of _____
- Inland and coastal waters of the state(s) of _____
- Inland and coastal waters of Florida only.
- Inland and coastal waters of Florida and the Bahamas.
- Inland and coastal waters from Brownsville, TX to Key West, FL.
- Inland and coastal waters from Norfolk, Virginia to Fernandina Beach, Florida.
- Other _____

Intended Moorings			Lay-up / Storage		
(Include Marina Name, Address, Zip Code)			(Include Marina Name, Address, Zip Code)		
Name			Name		
Address			Address		
City	State	Zip	City	State	Zip

Vessel Usage – Private Pleasure Only

Insurance				
Property Insurance: Yacht	\$		Deductible	\$
Tender	\$		Trailer	\$
Liability Insurance Limits	\$		Uninsured or Underinsured Boater	\$
Medical Payments	\$		Water Skiing Liability	\$
Excess Liability Limits (Not part of the Primary Limit)	\$		Personal Effects	\$

FRAUD WARNING – Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

DISCLOSURE OF MATERIAL FACTS – Every proposer or insured when seeking new insurance or renewing an existing policy must disclose any information which might influence the company in deciding whether or not to accept the risk, what the terms should be, or what premiums to charge. Failure to do so may render the insurance voidable from inception and enable the company to repudiate liability.

Applicant's Signature _____

Date _____