



APPLICATION FOR INSURANCE – PART TWO

Complete one page for each ship to be entered

Name of Ship:

Registered Owner:

Type of ship:

Address:

Flag:

Port of Registry:

IMO Number:

Call Sign:

Gross Tonnage:

DWT at time of build:

Additional Info required for:

Current DWT (if different)
with date changed

Passenger Ship: No. of Passengers

Class:

Container Ship: No. of TEU

Year Built:

RoRo: No of Vehicles / Units

Hull Value:

RoRo: No of Passengers / Drivers

Name of any Co-Assured:

Interest in ship:

Name of any Co-Assured:

Interest in ship:

Name of Mortgagee:

Anticipated Cargo Trades:

Anticipated Trading Area:

If a mortgagee is listed please attach copies of any applicable notice of assignment and / or loss payable clause.

Crew Details

No. of Officers

Nationalities:

No. of Crew:

Nationalities:

Are crew / officers employed by a manning agent:

Important

Please supply copies of all crew contracts for review / approval by Insurers.