

BOAT OWNER INFORMATION

Name:				Date of Birth:	
Primary Address:					
City:		State:	ZIP:		Marital Status:
Phone:		Email:			Home Owner:
Do you have additional owners? <i>(If yes, provide name and address of each owner on separate page)</i>				YES	NO
Is your primary residence in the continental US? <i>(If no, contact the program manager for other options)</i>				YES	NO
Do you have a Loss Payee (boat loan)? <i>(If yes, list Loss Payee name and address)</i>				YES	NO
Type of Insured:		Individual	Corporation	LLC	Trust
				If corporately owned, is corporation sole purpose for holding boat?	
If not a new purchase, is boat listed for sale?				YES	NO
Was the boat purchased as salvage?		YES	NO	Does the boat have prior or existing damage?	
Any owner or operator with a driving violation in the last 3 years?		YES	NO	Any owner or operator have a conviction of Felony?	
Any owner or operator convicted of a BUI, DUI, OUI or DWI in the last 3 years?		YES	NO	Has owner's insurance ever been declined, non-renewed, or canceled?	
Have you had any marine insurance losses in the last 5 years? <i>(If yes, list claim details, year, and amount paid)</i>				YES	NO
Claim Details <i>(if applicable)</i>					

BOAT & EQUIPMENT INFORMATION *(no wooden boat)*

One-Design Class:			Hull ID #:		
Purchase Date:		Manufacture Date:		Purchase Price	
				Length:	
Hull Material:			Carbon Fiber Mast:		
			YES		
Do you own this boat?			YES		
NO			If NO, explain:		
Do you want to insure a trailer?		YES		NO	
				Trailer Make/Model/Year:	
Do you want to insure a dolly? <i>(If yes, insert value in chart below)</i>				YES	NO
Do you employ paid crew?		YES		NO	
				If YES, how many?	
Does the boat have lithium batteries?				YES	NO

ONE DESIGN ANNUAL INSURANCE APPLICATION

Email Completed Form To: OneDesignSailing@bbrown.com

INSURANCE INFORMATION

Coverage	Limits of Insurance	Deductible
Boat & Equipment Value – Agreed Value (Includes sails, rig, covers)	\$	Non racing: the greater of 2% or \$250min Racing: the greater of 5% or \$500 min
Liability Limit (Options: \$300K, \$500K, \$1M; \$2M only available w/ worldwide nav.)	\$	N/A
Trailer Value – Actual Cash Value	\$	\$100.00
Dolly Value – Actual Cash Value	\$	\$100.00
Medical Payment Coverage	\$5,000	N/A
Uninsured Boater Coverage	\$100,000	N/A
Deductible Options:	2% primary/5% while racing	5% primary/5% while racing
Additional Equipment on Shore (value): \$	Worldwide Trailer Coverage: YES NO	

BOAT USAGE

Which of the following describes where you will use your boat in the next 12 months? (select 1 Option) <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>NATIONAL <i>Includes continental US, Canada and Mexico not to exceed 10 miles from land (not including USVI, Puerto Rico, Hawaii)</i></p> </div> <div style="width: 45%; text-align: right;"> <p>WORLDWIDE</p> </div> </div>					
Summer Boat Location (6/30 to 11/1) City:		State:		ZIP:	
How is the boat secured/stored in the summer?					
MOORING	DOCK	INDOOR STORAGE	DOLLY ASHORE	TRAILER ASHORE	OTHER
Winter Boat Location (11/2 to 6/29) City:		State:		ZIP:	
How is the boat secured/stored in the winter?					
MOORING	DOCK	INDOOR STORAGE	DOLLY ASHORE	TRAILER ASHORE	OTHER
Do you plan on chartering your boat (for a fee) to another person within the next 12 months? (If yes, where) Chartering Area:				YES	NO
Do you plan on chartering the same class boat, for your own use, within the next 12 months? Chartering Area:				YES	NO

APPLICANT STATEMENT

<p>I have read the above application and I declare that to the best of knowledge and belief, all of the statements and information are true; and that these statements and information are offered as an inducement for the Company to issue the policy for which I am applying. It is agreed the information furnished herein shall be the basis of the contract for the policy issued. I acknowledge the One Design Policy is a 12-month contract and the premium is fully earned.</p>	
Signature:	Date: