

Builder's Risk Application

Applicant's Name: _____

Mailing Address: _____

Experience building vessels: _____

Describe vessels previously built: _____

Describe type of work to be performed by applicant: _____

Describe vessel(s) to be built (construction, size, type): _____

Number and average values of vessels built per year: _____

Average construction period per vessel: _____

Are vessels built on customer's order OR on speculation

If sales to countries besides Canada advise where:

Percentage of sales to U.S. _____ % Canada _____ % Others _____ %

Location of yard: _____

Owned Rented

External Security:

(select ones which apply)

Locked compound: <input type="checkbox"/>	24 Hour watchman <input type="checkbox"/>	Central alarm <input type="checkbox"/>	Other <input type="checkbox"/> <i>(please describe)</i>
Fully fenced yard: <input type="checkbox"/>	Night watchman <input type="checkbox"/>	Monitoring alarm <input type="checkbox"/>	
	Guard dogs <input type="checkbox"/>	Local alarm <input type="checkbox"/>	

External Fire Protection:

(select ones which apply)

Nearest fire hydrant: _____ kms Nearest fire hall: _____ kms Voluntary fire hall: Paid:

*If vessels are constructed in a building attach a supplementary building application.

*If there is inventory accumulated please complete and attach **BOAT DEALER** application if storage coverages required after construction completed.



Are sub-contractors used: Yes No
Is proof required they have CGL insurance? Yes No

Describe work that is sub-contracted out: _____

Provide names of usual sub-contractors hired: _____

Previous Insurer: _____
Policy No. _____ Expiry date: _____
Ever cancelled by an Insurer ? Yes No
If yes, please advise why: _____

COVERAGES REQUESTED:

Insured value per vessel: \$ _____
Insured value per location at construction site: \$ _____
Insured value per location for inventory: \$ _____
Protection and Indemnity limit of liability per vessel: \$ _____

Date: _____

Broker Name and Address: _____

Agent's Signature: _____

Applicant's Signature: _____

By signing this application the applicant declares that all information contained herein is accurate and true to his/her knowledge and understands that non-disclosure or misrepresentation of a material fact may entitle Underwriters to void the insurance. By signing this application the applicant also grants permission for the Insurer, Broker, or their representatives to verify that the above information contained in this application is true.