

# HarborGuard

FLEET OVERVIEW	
Name Insured:	
Address:	
Effective Date:	
Charter Fleet Contact:	
Charter Fleet Contact Email:	
Website:	
Phone:	
Number of vessels:	
Number of dinghies:	
Total Insured Vessel Value:	
Fleet Location(s):	
Operation Overview: (Sailing School, Bareboat, Captain, Guide, etc.)	
Average % of repeat customers:	
Average # of passengers per charter:	
Average # of Charters per year:	
Additional Notes:	

DOCUMENTS REQUIRED	ATTACHED?
1) Loss History: (previous 3 years or signed statement of no losses)	
2) Copy of the contract with Charterers	
3) Copy of the Charter Waiver	
4) Vetting of Charterers (written description of procedures taken)	
5) A copy of the Storm Plan	
6) Maintenance Notes (procedures taken to care for the vessels)	
Other: (example - signed MGL application)	
Other:	
Other:	

FLEET DETAILS REQUIRED (1 - 7 below please fill in on page 2)
1) Vessel Schedule
2) Dinghy Schedule
3) Trailer Schedule
4) Vessel owner schedule
5) Additional Insured Schedule
6) Loss Payee Schedule
7) Marina Schedule

Vessel Count	Vessel Name	Vessel Value	Vessel Hull ID#	Vessel Manufacturer	Vessel Make/Model	Type Sail/Power/Cat/Etc.	Vessel Length	Vessel Year	Dinghy Year/Make	Dinghy Value	Trailer Year/Make	Trailer Value	Marina Name/Address	Loss Payee Lender Name/Address/Contact
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														
11														
12														
13														
14														
15														
16														
17														
18														
19														
20														
21														
22														
23														
24														
25														
26														
27														
28														
29														
30														