

# QBE AQUA Cover™

MARINE HULL INSURANCE

- for Pleasure Craft

## FLEXIWRITE Proposal

Before setting sail,  
let QBE AQUA Cover  
**take you under** its wing.



QBE

ASIA PACIFIC

PACIFIC ISLANDS

- for Pleasure Craft

## FLEXIWRITE PROPOSAL

### Contents

- A. NOTICE TO THE PROPOSED INSURED
- B. DETAILS OF THE PROPOSED INSURED
- C. DETAILS OF VESSEL
- D. CLAIMS DETAILS
- E. INSURANCE COVER
- F. IMPORTANT INFORMATION
- G. DECLARATION

### A. NOTICE TO PROPOSED INSURED

#### 1. Disclosure of Relevant Facts

##### Your Duty of Disclosure

Before you enter into a contract of general insurance with us, you have a duty to disclose to us every matter that you know, or could reasonably be expected to know, is relevant to our decision whether to accept the risk of insurance and, if so, on what terms. This includes facts which are not subject to questions in this proposal.

You have the same duty to disclose those matters to us before you renew, extend, vary or reinstate a contract of general insurance.

#### 2. Non Disclosure / Misstatement

If you fail to comply with your duty of disclosure, QBE may be entitled to avoid the contract altogether, and so decline to pay any claim.

#### 3. Inadequate space to answer

If there is inadequate space to answer our questions or you need to disclose something to us because of your duty of disclosure, please attach a separate piece of paper to this proposal giving full details of additional information.

#### 4. Important

- Please answer ALL questions fully. If there is insufficient space please provide details on your letterhead.
- Where provided, tick (✓) appropriate box to indicate answer.
- The applicant will be referred to in this proposal as “You” or “Your”.

#### 5. Markets

Please use the checklist below to indicate the operation in the QBE Pacific Islands region to which you will be submitting your proposal.

Market	Business Name	Please tick
Fiji	QBE Insurance (Fiji) Limited	<input type="checkbox"/>
Papua New Guinea	QBE Insurance (PNG) Limited	<input type="checkbox"/>
Solomon Islands	QBE Insurance (International) Limited	<input type="checkbox"/>
Vanuatu	QBE Insurance (Vanuatu) Limited	<input type="checkbox"/>

Note: For any other markets please contact the local QBE office.

#### 6. Jurisdiction

The content and use of this form or any agreement entered into pursuant to this form or any dealing in relation to or arising from this form are governed by:

- a) the laws of the country at the QBE office which issues the policy/ies arising from this proposal; unless
  - b) the policy/ies refer to the laws of a different country applying, in which case, the laws of that country,
- and in relation to those matters, the parties submit to the jurisdiction of the courts of that country.

For those policies governed by the laws of the Republic of Vanuatu, the validity, interpretation and effect and the rights and obligations of the parties to such policies shall be governed exclusively by English Law as applicable within Vanuatu immediately before 30 July 1980 and shall be justiciable before the Supreme Court of Vanuatu.

#### 7. Note

Values, Sums Insured, Limits and Deductibles further marked as \* are in the currency of the country in which a policy will be issued, upon the approval of this proposal.



## B. DETAILS OF THE PROPOSED INSURED

1. Name(s) in full:

  

Phone No:

Fax No:

Mobile No:

Email:

2. Postal Address:

  
  

3. Name and address of other interested persons (e.g. mortgagees or lessors)

  

4. Type of interest (eg. mortgagee, bill of sale holder)

  

5. Period of insurance: From

 /  / 

to

 /  /

### C. DETAILS OF THE VESSEL

Name of vessel:		
Registration no:		
Tonnage (G.R.T.):		
Length:		
Beam:		
Draught:		
Type of vessel:		
Age of vessel:		
Material of hull:		
Builders:		
Are the builders professionals <input type="checkbox"/> or amateurs <input type="checkbox"/>		
Where was the vessel built?:		
Please provide details of the motors/engine(s):	Type:	Serial number(s):
Date of manufacture:		
Maximum design speed:		
Type of fuel:		
Quantities stored:		
Above or below deck:		
Number and type of fire extinguishers:		

### D. CLAIMS DETAILS

**1. Have you (in the past 5 years)**

Please (✓)

1.1. made any claim(s) on an insurer for loss or damage?

Yes  No

If "YES", please give full details


1.2. had any insurance declined or cancelled, proposal rejected, renewal refused, claim rejected or special conditions or excess imposed – by an insurer?

Yes  No

If "YES", please give full details




1.3. suffered any loss or damage which would have been covered by the proposed insurance policy? Yes  No

If "YES", please give full details

  

**2. Have you or any partner(s), shareholder(s) or director(s) of the business**

2.1. ever been declared bankrupt? Yes  No

If "YES", please give full details

  

2.2. ever been involved in a company or business which became insolvent or subject to any form of insolvency administration (e.g. liquidation or receivership)? Yes  No

If "YES", please give full details

  

2.3. been convicted of any criminal offence within the past 5 years (other than minor traffic convictions)? Yes  No

If "YES", please give full details

  

2.4. been liable for any civil offence or pecuniary penalty? Yes  No

If "YES", please give full details

  

**E. INSURANCE COVER**

1. Value of hull and fittings: \*

2. Machinery outboard motor(s): \*

3. Dinghy: \*

4. Boat trailer: \*



5. Electronic equipment/navigational aids \*

6. Total: \*

NB: a) Hull includes safety equipment

b) Machinery includes pumps, generators, auxiliary engines, outboard motors, etc.

7. Amount of Third Party Protection and Indemnity Liability required \*

8. Do you require Third Party Liability to or incurred by water skiers? Yes  No

9. Loss or damage in respect of trailer? Yes  No

NB: No Third Party Liability in respect of trailer.

10. Is your vessel over 6 metres in length and permanently moored? Yes  No

If "YES", please give full details

  

11. Will other people be permitted to navigate this vessel? Yes  No

If "YES", please supply their names, any qualifications they may have and experience in handling this type of craft

  

## F. IMPORTANT INFORMATION

1. What experience have you had in handling of this and/or other type of small vessel?

  
  


2. Will vessel be used solely for private pleasure purposes?

Yes  No

If "NO", please give full details of use:

a) Cruising limits?

b) Where is vessel normally moored?

c) Laid up ashore?

3. Will vessel tow water skiers?

Yes  No

4. Date of last hull survey:

 /  / 

(copy of survey report must be attached to the application)

5. Date vessel purchased:

 /  / 

6. Purchase price

\*

7. Nature and cost of repairs, replacements, alterations during last twelve months.

  
  

8. Present sound market value of vessel?

\*

## G. DECLARATION

I/we the undersigned authorised proposed insured person(s), after enquiry declare as follows:

1. I/we are authorised by each of the other applicants to make this proposal.
2. I/we have read and understood the Notice to the Proposed Insured on the front of this proposal form.
3. I/we have read this proposal and the accompanying documents and acknowledge the contents of same to be true and complete.
4. I/we understand that, up until a contract of insurance is entered into, I/we are under a continuing obligation to immediately inform QBE of any change in the particulars or statements contained in this proposal or in the accompanying documents.

If accepted by QBE the proposal form and declaration, and any other material which I/we have provided to QBE shall be incorporated into and form the basis of the contract of insurance.

Name and position:

Signed:

Date

 /  / 

## Asia Pacific Head Office

Level 7, 345 George Street  
Sydney N.S.W. 2000  
Australia

Tel: +612 9375 4444  
Fax: +612 9375 4070  
[www.qbe.com/asiapacific](http://www.qbe.com/asiapacific)

### Licensed insurers for the Pacific Islands region:

#### Fiji

QBE Insurance (Fiji) Limited  
QBE Centre  
Victoria Parade  
GPO Box 101  
Suva, Fiji

Tel: + (679) 331 5455  
Fax: + (679) 330 0285  
Info: [info.fiji@qbe.com](mailto:info.fiji@qbe.com)  
[www.qbe.com/asiapacific](http://www.qbe.com/asiapacific)

#### Solomon Islands

QBE Insurance (International) Limited  
Panatina Plaza  
Prince Philip Highway  
P.O. Box 764  
Honiara  
Solomon Islands

Tel: + (677) 38884  
Fax: + (677) 38887  
Info: [info.sol@qbe.com](mailto:info.sol@qbe.com)  
[www.qbe.com/asiapacific](http://www.qbe.com/asiapacific)

#### French Polynesia

QBE Insurance (International) Limited  
Immeuble Gallieni  
Front de Mer  
P.O. Box 283  
Papeete, Tahiti – French Polynesia

Tel: + (689) 50 66 00  
Fax: + (689) 50 66 01  
Info: [info.fp@qbe.com](mailto:info.fp@qbe.com)  
[www.qbe.com/asiapacific](http://www.qbe.com/asiapacific)

#### PNG

QBE Insurance (PNG) Limited  
QBE Building  
Musgrave Street  
P O Box 814, Port Moresby  
Papua New Guinea

Tel: + (675) 3212 144  
Fax: + (675) 3214 756  
Info: [info.png@qbe.com](mailto:info.png@qbe.com)  
[www.qbe.com/asiapacific](http://www.qbe.com/asiapacific)

#### Vanuatu

QBE Insurance (Vanuatu) Limited  
La Casa, D'Andrea Building  
Port Vila  
P.O. Box 186  
Vanuatu

Tel: + (678) 22299  
Fax: + (678) 23298  
Info: [info.van@qbe.com](mailto:info.van@qbe.com)  
[www.qbe.com/asiapacific](http://www.qbe.com/asiapacific)

#### New Caledonia

QBE Insurance (International) Limited  
5 Rue Anatole-France  
BP 449  
98845 Noumea-Cedex  
New Caledonia

Tel: + (687) 246300  
Fax: + (687) 287717  
Info: [qbe@qbe.nc](mailto:qbe@qbe.nc)  
[www.qbe.com/asiapacific](http://www.qbe.com/asiapacific)

For literature in use in the French Territories above,  
please contact the local QBE office in each of these countries.



**QBE**  
**ASIA PACIFIC**  
PACIFIC ISLANDS

A member of the QBE Insurance Group  
[www.qbe.com](http://www.qbe.com)