

BOATING RESUME

*This Boating Resume is an addendum to, and forms a part of the Insurance Application.
One Complete Boating Resume Must Be Submitted for each NAMED OPERATOR*

General

1. Operator Name: _____
Street Address: _____
City: _____ State: _____ Zip: _____
2. Drivers License Number: _____ State: _____
3. Date of Birth: _____
4. Occupation: _____

Boating Experience

5. Total years of operating experience: _____
6. Total years of ownership experience: _____

7.a. **Prior Boats you have OWNED:**

Year	Length	Manufacturer	Model	Hull Type (Cat or V-Hull)	Dates Owned	
					From	To
				<input type="checkbox"/> Cat <input type="checkbox"/> V-Hull		
				<input type="checkbox"/> Cat <input type="checkbox"/> V-Hull		
				<input type="checkbox"/> Cat <input type="checkbox"/> V-Hull		

7.b. **Prior Boats you have OPERATED:**

Year	Length	Manufacturer	Model	Hull Type (Cat or V-Hull)	Dates Operated		Total Hours
					From	To	
				<input type="checkbox"/> Cat <input type="checkbox"/> V-Hull			
				<input type="checkbox"/> Cat <input type="checkbox"/> V-Hull			
				<input type="checkbox"/> Cat <input type="checkbox"/> V-Hull			

8. List the waters or areas you have navigated: (Atlantic, Great Lakes, Pacific, Mexico, etc.):

9. List any Licences, Boating Courses or Classes for which you can produce a certificate:

10. List all marine losses, whether a claim or not, including loss amount in dollars and other details:

I HEREBY AFFIRM THAT ALL INFORMATION INCLUDED HEREIN HAS BEEN PROVIDED BY THE UNDERSIGNED AND IS A TRUE AND CORRECT STATEMENT OF FACT.

Signature of applicant: _____ Date: _____

THIS IS A NAMED OPERATOR POLICY. OPERATORS NOT APPROVED BY US IN ADVANCE ARE NOT COVERED