



# Protection & Indemnity

Application Form

All questions must be answered - we will not quote on submissions that are incomplete.

Documentation that must accompany this submission form:

1. Vessel's Certificate of Operation
2. Safety Management System (SMS) or similar document

## Insured Details:

**Insured Name (include Subsidiaries)**

\_\_\_\_\_

**Contact Name**

**Website (if applicable)**

First Name

Last Name

\_\_\_\_\_

**Business Address**

**ABN Number**

Street Address

City

State

Post Code

**Names of any Interested Parties**

# Policy Details:

Current Protection & Indemnity Insurer

Current Hull & Machinery Insurer

# Vessel Details:

Name of vessel

Year vessel was built

What is the vessel type (please select)

- Sailing Vessel
- Landing Barge
- Tug
- Water Taxi
- Fishing Vessel

- Powered Vessel
- Dumb Barge
- Dredge
- Jet Boat
- Other

What is make /design of the vessel?

Length of vessel

Beam (Breadth) of vessel

Draft of vessel

What material is the hull built with? (please select)

- Aluminium
- Fibreglass
- Steel
- High Density Polyethylene
- Other

- Composite
- Rubber
- Timber
- Other

Gross Registered Tonnage (GRT) of vessel

GRT calculator available [HERE](#)

## AMSA Class/Category

### How is your vessel stored when not in use? (please select)

- Marina Berth
- Private Pontoon / Private Jetty
- Trailer
- Swing Mooring
- Anchor
- Other

### Address (Name of Marina / State / Suburb / Post Code)

### What type of engine(s) does the vessel have? (please select)

- Inboard
- Outboard
- Sterndrive

### What is the maximum design speed of your vessel

### What would be the expected Maximum Speed you would normally operate your vessel

### Engine 1 - Engine manufacturer

### Engine 1 - Year of manufacturer

### Engine 1 - Maximum Horsepower

### Engine 1 - Engine hours

### Engine 2 - If Applicable

### Engine 2 - Engine manufacture

### Engine 2 - Engine hours

### Engine 2 - Maximum Horsepower

### Engine 2 - Year of manufacturer

## Operational Details - Passenger Vessels:

**Is the vessel used for day charters, overnight charters or both? (please select)**

- ☐ Day Charters
- ☐ Overnight Charters
- ☐ Day & Overnight Charters

**Provide details of all activities that the vessel will be used for.**

**How many passengers is Vessel registered to have onboard**

**How many crew are required to be onboard**

**Does Vessel's operations involve swimming, snorkelling, diving, beaching of the vessel or any other activity which entails passengers disembarking or boarding the Vessel as part of the ticketed excursion**

- ☐ YES
- ☐ NO

**If so, please provide details of ALL off vessel activities including any watersports offered:**

**If your vessel is a Sailing Vessel, please confirm that activities such as allowing passengers to climb the mast, raise sails are strictly forbidden.**

- ☐ YES
- ☐ NO

If your Vessel is a Sailing Vessel equipped with Boom Netting or similar, please describe the Operational Procedures in which passengers are allowed to participate and when they are not allowed to participate.

Select type of deck finish: (please select)

Timber

Steel

Aluminium

Fiberglass

Composite Materials

Other

Select type of flooring below decks: (please select)

Marine Carpet

Vinyl Flooring

Laminate Flooring

Teak and Holly Flooring

Rubber Flooring

Cork Flooring

Epoxy Coating

Tiles

Other

# Operational Details - Fishing Vessels:

Only complete this section if your Vessel is a registered Commercial Fishing Vessel under 3A, 3B, 3C, 3D, 3E AMSA classification.

<b>Select Type of Fishing (please select)</b>	<b>Do you pay your crew a wage or part of the catch?</b>
<input type="checkbox"/> Trawlers	<input type="checkbox"/> YES
<input type="checkbox"/> Purse Seiners	<input type="checkbox"/> NO
<input type="checkbox"/> Line Fishing	
<input type="checkbox"/> Longliners	
<input type="checkbox"/> Gillnetters	
<input type="checkbox"/> Trap Setters	
<input type="checkbox"/> Factory Ships (Fish Processors)	
<input type="checkbox"/> Charter Fishing Boats	
<input type="checkbox"/> Other	

**Number of crew to operate the vessel**

# Operational Details - Workboats:

Only complete this section if your Vessel is commercially used for operations involving Construction, Dredging, Piling, Towing, Salvage.

**What type of work does the vessel perform**

<b>Does the vessel provide towage services?</b>	<b>Does the vessel operate across Australian state lines?</b>
<input type="checkbox"/> YES	<input type="checkbox"/> YES
<input type="checkbox"/> NO	<input type="checkbox"/> NO

**Does the vessel provide services to the Australian Defence Force**

☐ YES

☐ NO

## **Privacy Policy**

At Quay Marine Insurance, we are committed to protecting your privacy in accordance with the Privacy Act 1988 (Cth) and the Australian Privacy Principles Australian Privacy Laws (including but limited to the Australian Privacy Principles and the Privacy Act 1988 (Cth)).

This Privacy Policy describes our current policies and practices in relation to the collection, handling, use and disclosure of personal information. It also deals with how you can complain about a breach of the privacy laws and how you can access the personal information we hold on behalf of your client and how to have that information corrected.

### **How do we collect your personal information?**

We collect your personal information directly from you unless it is unreasonable or impracticable to do so. When collecting personal information from you, we may collect in ways including:

- when you complete an application or order for an insurance policy;
- when you request changes to your insurance policy;
- when you make a claim or when we investigate a claim under your insurance policy;
- through your access and use of our website;
- during conversations between you or your broker and us or our representatives;

### **We may also collect personal information from third parties including:**

- people who are involved in insurance decisions and claims such as investigators, actuaries, professional advisors, medical practitioners, hospitals and other health care providers and third party claims managers;
- our related bodies corporate;
- publicly available sources;
- brokers, reinsurers, cedants and cover holders or other underwriting organisations;

### **What if you don't provide some information to us?**

If you do not provide us with the personal information described above, some or all of the following may happen:

- we may not be able to provide the requested products or services to you, either to the same standard or at all;
- we may not be able to process or consider your claim;
- we may not be able to provide you with information about products and services that you may want, including information about discounts;
- we may be unable to communicate with you or on your behalf regarding a claim;

### **Your consent**

By asking us to assist with your insurance needs, request for a product or service, you consent to the collection and use of the information you have provided to us for the purposes described above.

### **How can you check, update or change the information we are holding?**

Upon receipt of your written request and enough information to allow us to identify the information, we will disclose to you the personal information we hold about you. We will also correct, amend or delete any personal information that we agree is inaccurate, irrelevant, out of date or incomplete.

If you wish to access or correct your personal information, please contact us at [info@quaymarineinsurance.com.au](mailto:info@quaymarineinsurance.com.au)

We do not charge for receiving a request for access to personal information or for complying with a correction request. Where the information requested is not a straightforward issue and will involve a considerable amount of time then a charge will need to be confirmed for responding to the request for the information.

In some limited cases, we may need to refuse access to your information or refuse a request for correction. We will advise you as soon as possible after your client's request if this is the case and the reasons for our refusal.

### **What happens if you want to complain?**

If you have concerns about whether we have complied with the Privacy Act or this Privacy Policy when collecting or handling your personal information, please write to us at [info@quaymarineinsurance.com.au](mailto:info@quaymarineinsurance.com.au)

Your complaint will be considered by us through our internal complaints resolution process, and we will try to respond with a decision within 45 days of you making the complaint.

To view the full **Quay Marine Insurance Privacy Policy**, please visit our website <https://www.quaymarineinsurance.com.au/>

**Your Duty of Disclosure:**

Before You enter into an insurance contract, You have a duty under the Insurance Contracts Act 1984 (ICA) s.21 and the Marine Insurance Act 1909 (MIA) s.24, 25 and 26 (whichever is applicable) to tell Us, pursuant to the ICA: anything that You know, or could reasonably be expected to know, which may be relevant to Our decision to insure You and on what terms, or pursuant to the MIA: every material circumstance which is known to You or which ought to be known to You which would influence Us in calculating the Premium or determining whether to accept the risk.

You have this duty until We agree to insure You. You have the same duty before You renew, extend, vary or reinstate an insurance contract.

You do not need to tell Us anything that:

- reduces the risk We insure You for; or
- is common knowledge; or
- We know or should know as an insurer; or
- We waive Your duty to tell Us about

If You do not tell Us something:

Where the Insurance Contract Acts applies, if You do not tell Us anything You are required to, We may cancel Your contract or reduce the amount We will pay You if You make a claim, or both.

If Your failure to tell Us is fraudulent, We may refuse to pay a claim and treat the contract as if it never existed.

Where the Marine Insurance Act 1909 applies, if You fail to comply with Your duty of disclosure, We may avoid the contract from its beginning.

Who must tell Us?

Everyone who is insured under the Policy is required to comply with the duty of disclosure, including Your broker or agent.

**Claims In the last 5 years, have you made any insurance claims, or notified an insurer about the potential for a future claim, or been involved in any incident that could have given rise to a claim under this insurance offering?**

YES

NO

**Are you currently or have you previously been declared bankrupt or been involved in a company or business which became insolvent or subject to any form of insolvency administration?**

YES

NO

**In the last 5 years, have you been convicted of any criminal offence, suffered and losses which would have been covered under the proposed insurance policy(s), had any insurance declined or cancelled, application rejected, renewal refused, claim rejected, special conditions imposed or deductibles imposed by an insurer?**

YES

NO

**If yes to any of the above questions, please provide details:**

**Nature of Interest**

**Signed By - Print Name**

**Date**

**Signed**



