

## ACORD 282 (2016/05) - Watercraft Section

ACORD 282, Watercraft Section, is used when insurance is desired for watercraft. The underwriting process for any personal lines policy begins with the submission of a completed application. The following will provide assistance in completing ACORD 282, Watercraft Section.

This form can be used either as a attachment to the ACORD 88, Personal Insurance Application, Applicant Information Section, for a stand-alone watercraft policy, or as a supplement to ACORD 80, Homeowners Application or ACORD 89, Residential Section if physical damage on watercraft is being written under the Homeowners policy. Check with the company to determine whether physical damage can be written on the Homeowners policy.

If coverage will be provided under a yacht policy, do not use this form. Use ACORD 210, Yacht Section.

### Form Page 1

Section Name	Field Name	Description
IDENTIFICATION SECTION	Agency Customer ID	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
BOAT HULL	Boat Hull No.	Enter number: The producer assigned number for the watercraft.
IDENTIFICATION SECTION	Date	Enter date: The date on which the form is completed. (MM/DD/YYYY)
IDENTIFICATION SECTION	Agency	Enter text: The full name of the producer / agency.
IDENTIFICATION SECTION	Policy Number	Enter identifier: The identifier assigned by the insurer to the policy, or submission, being referenced exactly as it appears on the policy, including prefix and suffix symbols. If required for self-insurance, the self-insured license or contract number.
IDENTIFICATION SECTION	Effective Date	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence. (MM/DD/YYYY)
IDENTIFICATION SECTION	Carrier	Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name.
IDENTIFICATION SECTION	NAIC Code	Enter code: The identification code assigned to the insurer by the National Association of Insurance Commissioners (NAIC).
IDENTIFICATION SECTION	Named Insured(s)	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
BOAT HULL	Power - Inboard	Check the box (if applicable): Indicates the watercraft is propelled by an inboard motor.
BOAT HULL	Outboard	Check the box (if applicable): Indicates the watercraft is propelled by an outboard motor.
BOAT HULL	Inboard / Outdrive	Check the box (if applicable): Indicates the watercraft is propelled by an inboard / outdrive motor.
BOAT HULL	Waterjet	Check the box (if applicable): Indicates the watercraft is propelled by a water jet.

<b>BOAT HULL</b>	<b>Sail</b>	Check the box (if applicable): Indicates the watercraft is propelled by a sail.
<b>BOAT HULL</b>	<b>Other</b>	Check the box (if applicable): Indicates the watercraft is propelled by a method other than those listed.
<b>BOAT HULL</b>	<b>Other Description</b>	Enter text: The method of propulsion of the watercraft.
<b>BOAT HULL</b>	<b>Type of Hull - Cabin Cruiser</b>	Check the box (if applicable): Indicates the watercraft type is a cabin cruiser.
<b>BOAT HULL</b>	<b>Open Cockpit</b>	Check the box (if applicable): Indicates the watercraft type is an open cockpit.
<b>BOAT HULL</b>	<b>Sailboat</b>	Check the box (if applicable): Indicates the watercraft type is a sailboat.
<b>BOAT HULL</b>	<b>Pontoon</b>	Check the box (if applicable): Indicates the watercraft type is a pontoon boat.
<b>BOAT HULL</b>	<b>Bass</b>	Check the box (if applicable): Indicates the watercraft type is a bass boat.
<b>BOAT HULL</b>	<b>Personal WC</b>	Check the box (if applicable): Indicates the watercraft type is a personal watercraft.
<b>BOAT HULL</b>	<b>Ski</b>	Check the box (if applicable): Indicates the watercraft type is a ski boat.
<b>BOAT HULL</b>	<b>Other</b>	Check the box (if applicable): Indicates the watercraft type is other than those listed.
<b>BOAT HULL</b>	<b>Other Description</b>	Enter text: The description of the watercraft type.
<b>BOAT HULL</b>	<b>Hull Material - Fiberglass</b>	Check the box (if applicable): Indicates the hull is constructed with fiberglass.
<b>BOAT HULL</b>	<b>Metal</b>	Check the box (if applicable): Indicates the hull is constructed with metal.
<b>BOAT HULL</b>	<b>Wood</b>	Check the box (if applicable): Indicates the hull is constructed with wood.
<b>BOAT HULL</b>	<b>Hull Design - Flat Bottom</b>	Check the box (if applicable): Indicates the hull design is flat bottom.
<b>BOAT HULL</b>	<b>Round Bottom</b>	Check the box (if applicable): Indicates the hull design is round bottom.
<b>BOAT HULL</b>	<b>Vee Bottom</b>	Check the box (if applicable): Indicates the hull design is vee bottom.
<b>BOAT HULL</b>	<b>Catamaran</b>	Check the box (if applicable): Indicates the hull design is catamaran bottom.
<b>BOAT HULL</b>	<b>Other</b>	Check the box (if applicable): Indicates the hull design is other than those listed.
<b>BOAT HULL</b>	<b>Other Description</b>	Enter text: The description of the hull design.
<b>BOAT HULL</b>	<b>Fuel Tank - Fiberglass</b>	Check the box (if applicable): Indicates the fuel tank is fiberglass.
<b>BOAT HULL</b>	<b>Metal</b>	Check the box (if applicable): Indicates the fuel tank is metal.
<b>BOAT HULL</b>	<b>Spar Material - Aluminum</b>	Check the box (if applicable): Indicates the type of spar material used (i.e., masts, riggings, etc.) is aluminum.
<b>BOAT HULL</b>	<b>Wood</b>	Check the box (if applicable): Indicates the type of spar material used (i.e., masts, riggings, etc.) is wood.

BOAT HULL	<b>Carbon Fiber</b>	Check the box (if applicable): Indicates the type of spar material used (i.e., masts, riggings, etc.) is carbon fiber.
BOAT HULL	<b>Other</b>	Check the box (if applicable): Indicates the type of spar material used (i.e., masts, riggings, etc.) is other than those listed.
BOAT HULL	<b>Other Description</b>	Enter text: The description of the spar material used (i.e., masts, riggings, etc.).
BOAT HULL	<b>Year</b>	Enter year: The model year of the watercraft.
BOAT HULL	<b>Manufacturer</b>	Enter text: The manufacturer of the watercraft.
BOAT HULL	<b>Model</b>	Enter text: The manufacturer's model name for the watercraft.
BOAT HULL	<b>Length</b>	Enter number: The length of the watercraft expressed in feet.
BOAT HULL	<b>Max Speed</b>	Enter number: The maximum speed attainable by the watercraft. State if the speed in in miles per hour or knots per hour.
BOAT HULL	<b>Date Purchased</b>	Enter date: The date the watercraft was purchased.
BOAT HULL	<b>Cost New</b>	Enter amount: The cost of the watercraft when it was purchased new, in whole dollar amounts.
BOAT HULL	<b>Present Value</b>	Enter amount: The watercraft's present value, stated or agreed, in whole dollar amounts.
BOAT HULL	<b>Name of Boat</b>	Enter text: The name in which the watercraft is registered.
BOAT HULL	<b>Name of Beneficial Owner</b>	Enter text: The additional interest's full name. As used here, this is the beneficial owner.
BOAT HULL	<b>Registration Number</b>	Enter identifier: The unique identifier for the watercraft assigned by the registering authority.
BOAT HULL	<b>Country of Registration</b>	Enter code: The country code in which the boat is registered.
BOAT HULL	<b>Hull Identification Number</b>	Enter identifier: The 12 character Hull Identification Number of the watercraft. It is typically located on the transom of the watercraft.
BOAT HULL	<b>Waters Navigated - Atlantic (checkbox)</b>	Check the box (if applicable): Indicates the waters navigated is the Atlantic ocean.
BOAT HULL	<b>Great Lakes (checkbox)</b>	Check the box (if applicable): Indicates the waters navigated are the Great Lakes.
BOAT HULL	<b>Inland Waterways (checkbox)</b>	Check the box (if applicable): Indicates the waters navigated are inland waterways. Inland Waterways are all inland bodies of water including lakes and intercoastal waterways, excluding rivers and the Great Lakes.
BOAT HULL	<b>Pacific (checkbox)</b>	Check the box (if applicable): Indicates the waters navigated is the Pacific ocean.
BOAT HULL	<b>Rivers (checkbox)</b>	Check the box (if applicable): Indicates the waters navigated are rivers.
BOAT HULL	<b>Gulf of Mexico (checkbox)</b>	Check the box (if applicable): Indicates the waters navigated is the Gulf of Mexico.
BOAT HULL	<b>Other (checkbox)</b>	Check the box (if applicable): Indicates the waters navigated are other than those listed.

<b>BOAT HULL</b>	<b>Other Description</b>	Enter text: The waters where the watercraft is predominantly used.
<b>BOAT HULL</b>	<b>Territory</b>	Enter code: This is typically the navigation territory. However, use company manuals to determine territory.
<b>BOAT HULL</b>	<b>Date of Last Survey</b>	Enter date: The date the last survey was completed.
<b>BOAT HULL</b>	<b>LOC #</b>	Enter number: The producer assigned number of the location. As used here, this is the primary berth / storage location.
<b>BOAT HULL</b>	<b>Primary Berth / Storage Location</b>	Enter text: The address line one of the physical location.
<b>BOAT HULL</b>	<b>Summer</b>	Check the box (if applicable): Indicates the primary storage location is used in the summer.
<b>BOAT HULL</b>	<b>Winter</b>	Check the box (if applicable): Indicates the primary storage location is used in the winter.
<b>BOAT HULL</b>	<b>City</b>	Enter text: The city name of the physical location.
<b>BOAT HULL</b>	<b>State</b>	Enter code: The state or province code of the physical location.
<b>BOAT HULL</b>	<b>Zip</b>	Enter code: The postal code of the physical location.
<b>BOAT HULL</b>	<b>Country</b>	Enter code: The country code of the physical location.
<b>BOAT HULL</b>	<b>LOC #</b>	Enter number: The producer assigned number of the location. As used here, this is the secondary berth / storage location.
<b>BOAT HULL</b>	<b>Secondary Berth / Storage Location</b>	Enter text: The address line one of the physical location.
<b>BOAT HULL</b>	<b>Summer</b>	Check the box (if applicable): Indicates the secondary storage location is used in the summer.
<b>BOAT HULL</b>	<b>Winter</b>	Check the box (if applicable): Indicates the secondary storage location is used in the winter.
<b>BOAT HULL</b>	<b>City</b>	Enter text: The city name of the physical location.
<b>BOAT HULL</b>	<b>State</b>	Enter code: The state or province code of the physical location.
<b>BOAT HULL</b>	<b>Zip</b>	Enter code: The postal code of the physical location.
<b>BOAT HULL</b>	<b>Country</b>	Enter code: The country code of the physical location.
<b>BOAT HULL</b>	<b>Lay-Up Period - Dry (checkbox)</b>	Check the box (if applicable): Indicates the unit is stored dry during the lay up period.
<b>BOAT HULL</b>	<b>Afloat (checkbox)</b>	Check the box (if applicable): Indicates the unit is stored afloat during the lay up period.
<b>BOAT HULL</b>	<b>Start Date</b>	Enter date: The start date of the period during which the watercraft is not in use. (MM/DD/YYYY)
<b>BOAT HULL</b>	<b>End Date</b>	Enter date: The end date of the period during which the watercraft is not in use. (MM/DD/YYYY)

<b>ENGINE / MOTOR</b>	<b>Motor #</b>	Enter number: The producer assigned number for the engine / motor.
<b>ENGINE / MOTOR</b>	<b>Year</b>	Enter year: The model year of the engine / motor.
<b>ENGINE / MOTOR</b>	<b>Manufacturer</b>	Enter text: The manufacturer of the engine / motor.
<b>ENGINE / MOTOR</b>	<b>Model</b>	Enter text: The manufacturer's model name for the engine / motor.
<b>ENGINE / MOTOR</b>	<b>Serial Number</b>	Enter identifier: The serial number of the engine / motor.
<b>ENGINE / MOTOR</b>	<b>Horsepower</b>	Enter number: The horsepower of the engine. There is a method for determining the maximum safe horsepower for a specific boat based on length and width. If the company employs this formula, it may be helpful to make note of the width in remarks.
<b>ENGINE / MOTOR</b>	<b>Fuel - Gasoline</b>	Check the box (if applicable): Indicates the engine / motor runs on gasoline.
<b>ENGINE / MOTOR</b>	<b>Diesel</b>	Check the box (if applicable): Indicates the engine / motor runs on diesel fuel.
<b>ENGINE / MOTOR</b>	<b>Battery</b>	Check the box (if applicable): Indicates the engine / motor is runs on battery power.
<b>ENGINE / MOTOR</b>		Check the box (if applicable): Indicates the engine / motor runs on other power.
<b>ENGINE / MOTOR</b>		Enter text: The description of the other fuel power.
<b>ENGINE / MOTOR</b>	<b>Date Purchased</b>	Enter date: The date the engine / motor was purchased.
<b>ENGINE / MOTOR</b>	<b>Cost New</b>	Enter amount: The cost of the engine / motor when it was purchased new, in whole dollar amounts. (For Outboard Motors Only)
<b>ENGINE / MOTOR</b>	<b>Present Value</b>	Enter amount: The engine / motor's present value, stated or agreed, in whole dollar amounts. (For Outboard Motors Only)
<b>ENGINE / MOTOR</b>	<b>Motor #</b>	Enter number: The producer assigned number for the engine / motor.
<b>ENGINE / MOTOR</b>	<b>Year</b>	Enter year: The model year of the engine / motor.
<b>ENGINE / MOTOR</b>	<b>Manufacturer</b>	Enter text: The manufacturer of the engine / motor.
<b>ENGINE / MOTOR</b>	<b>Model</b>	Enter text: The manufacturer's model name for the engine / motor.
<b>ENGINE / MOTOR</b>	<b>Serial Number</b>	Enter identifier: The serial number of the engine / motor.
<b>ENGINE / MOTOR</b>	<b>Horsepower</b>	Enter number: The horsepower of the engine. There is a method for determining the maximum safe horsepower for a specific boat based on length and width. If the company employs this formula, it may be helpful to make note of the width in remarks.
<b>ENGINE / MOTOR</b>	<b>Fuel - Gasoline</b>	Check the box (if applicable): Indicates the engine / motor runs on gasoline.
<b>ENGINE / MOTOR</b>	<b>Diesel</b>	Check the box (if applicable): Indicates the engine / motor runs on diesel fuel.
<b>ENGINE / MOTOR</b>	<b>Battery</b>	Check the box (if applicable): Indicates the engine / motor is runs on battery power.

<b>ENGINE / MOTOR</b>		Check the box (if applicable): Indicates the engine / motor runs on other power.
<b>ENGINE / MOTOR</b>		Enter text: The description of the other fuel power.
<b>ENGINE / MOTOR</b>	<b>Date Purchased</b>	Enter date: The date the engine / motor was purchased.
<b>ENGINE / MOTOR</b>	<b>Cost New</b>	Enter amount: The cost of the engine / motor when it was purchased new, in whole dollar amounts. (For Outboard Motors Only)
<b>ENGINE / MOTOR</b>	<b>Present Value</b>	Enter amount: The engine / motor's present value, stated or agreed, in whole dollar amounts. (For Outboard Motors Only)
<b>TRAILER</b>	<b>#</b>	Enter number: The producer assigned number for the trailer.
<b>TRAILER</b>	<b>Year</b>	Enter year: The model year of the trailer.
<b>TRAILER</b>	<b>Manufacturer</b>	Enter text: The manufacturer of the trailer.
<b>TRAILER</b>	<b>Model</b>	Enter text: The manufacturer's model name for the trailer.
<b>TRAILER</b>	<b>Serial Number</b>	Enter identifier: The serial number of the trailer.
<b>TRAILER</b>	<b># Axles</b>	Enter number: The number of axles on the trailer.
<b>TRAILER</b>	<b>Capacity</b>	Enter number: The capacity / volume of the watercraft trailer in pounds.
<b>TRAILER</b>	<b>Date Purchased</b>	Enter date: The date the trailer was purchased.
<b>TRAILER</b>	<b>Cost</b>	Enter amount: The cost of the boat trailer when it was purchased, in whole dollar amounts.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Hull - Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Hull - Limit</b>	Enter limit: The limit for boat (hull) coverage. This may include collision liability.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>ACV (checkbox)</b>	Check the box (if applicable): Indicates the loss settlement basis is the actual cash value of the item.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>RC (checkbox)</b>	Check the box (if applicable): Indicates the loss settlement basis is the replacement cost of the item.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>AA (checkbox)</b>	Check the box (if applicable): Indicates the loss settlement basis for the item is the agreed amount.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Hull - Deductible</b>	Enter deductible: The deductible for boat (hull) coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Hull - Form Number</b>	Enter identifier: The number used by the insurer for this form.

<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Hull - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Hull - Premium</b>	Enter amount: The premium for boat (hull) coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Outboard Motor - Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Outboard Motor - Limit</b>	Enter limit: The limit for outboard motor coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Outboard Motor - Deductible</b>	Enter deductible: The deductible for outboard motor coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Outboard Motor - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Outboard Motor - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Outboard Motor - Premium</b>	Enter amount: The premium for outboard motor coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Outboard Motor - Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Outboard Motor - Limit</b>	Enter limit: The limit for outboard motor coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Outboard Motor - Deductible</b>	Enter deductible: The deductible for outboard motor coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Outboard Motor - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Outboard Motor - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Outboard Motor - Premium</b>	Enter amount: The premium for outboard motor coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Portable Accessories - Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Portable Accessories - Limit</b>	Enter limit: The limit for portable accessories (equipment not permanently attached to the boat) coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Portable Accessories - Form Number</b>	Enter identifier: The number used by the insurer for this form.

<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Portable Accessories - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Portable Accessories - Premium</b>	Enter amount: The premium for portable accessories (equipment not permanently attached to the boat) coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Trailer - Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Trailer - Limit</b>	Enter limit: The limit for trailer coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Trailer - Deductible</b>	Enter deductible: The deductible for trailer coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Trailer - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Trailer - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Trailer - Premium</b>	Enter amount: The premium for trailer coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Personal Effects - Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Personal Effects - Limit</b>	Enter limit: The limit for personal effects coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Personal Effects - Deductible</b>	Enter deductible: The deductible for personal effects coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Personal Effects - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Personal Effects - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Personal Effects - Premium</b>	Enter amount: The premium for personal effects coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Towing - Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Towing - Limit</b>	Enter limit: The limit for towing coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Towing - Deductible</b>	Enter deductible: The deductible for towing coverage.



<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Towing - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Towing - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Towing - Premium</b>	Enter amount: The premium for towing coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Hurricane Haul-Out - Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Hurricane Haul-Out - Limit</b>	Enter limit: The limit for hurricane haul out coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Hurricane Haul-Out - Deductible</b>	Enter deductible: The deductible for hurricane haul out coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Hurricane Haul-Out - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Hurricane Haul-Out - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Hurricane Haul-Out - Premium</b>	Enter amount: The premium for hurricane haul out coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Liability - Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Liability - Limit CSL / BI ea pers</b>	Enter limit: The bodily injury each person liability limit for watercraft coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Liability - Limit CSL / BI ea Acc</b>	Enter limit: The limit amount for bodily injury each accident or combined single limit liability (may be called protection and indemnity).
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Liability CSL / BI - Deductible</b>	Enter deductible: The deductible for bodily injury liability or combined single limit liability boat (hull) coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Liability CSL / BI - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Liability CSL / BI - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Liability CSL / BI - Premium</b>	Enter amount: The premium for bodily injury liability or combined single limit liability boat (hull) coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Liability - Limit PD ea Acc</b>	Enter limit: The property damage each accident limit for watercraft coverage.

<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Liability PD - Deductible</b>	Enter deductible: The deductible for property damage coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Liability PD - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Liability PD - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Liability PD - Premium</b>	Enter amount: The premium for property damage coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Medical Payments - Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Medical Payments - Limit</b>	Enter limit: The limit for medical payments for bodily injury to occupants of the boat coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Medical Payments - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Medical Payments - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Medical Payments - Premium</b>	Enter amount: The premium for medical payments coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Uninsured Boaters Liability - Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Uninsured Boaters Liability CSL / BI - Limit ea Pers</b>	Enter limit: The bodily injury each person limit for uninsured boaters coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Uninsured Boaters Liability CSL / BI - Limit ea acc</b>	Enter limit: The bodily injury each accident limit or combined single limit for uninsured boaters coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Uninsured Boaters Liability CSL / BI - Deductible</b>	Enter deductible: The deductible for bodily injury liability or combined single limit liability uninsured boaters coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Uninsured Boaters Liability CSL / BI - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Uninsured Boaters Liability CSL / BI - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Uninsured Boaters Liability CSL / BI - Premium</b>	Enter amount: The premium for bodily injury liability or combined single limit liability uninsured boaters coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Uninsured Boaters Liability PD - Limit</b>	Enter limit: The limit for uninsured boaters property damage coverage.

<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Uninsured Boaters Liability PD - Deductible</b>	Enter deductible: The deductible for uninsured boaters property damage coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Uninsured Boaters Liability PD - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Uninsured Boaters Liability PD - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Uninsured Boaters Liability PD - Premium</b>	Enter amount: The premium for uninsured boaters property damage coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Underinsured Boaters Liability - Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Underinsured Boaters Liability CSL / BI - Limit ea pers</b>	Enter limit: The each person limit for underinsured boaters bodily injury coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Underinsured Boaters Liability CSL / BI - Limit ea acc</b>	Enter limit: The each accident bodily injury liability limit or combined single limit for underinsured boaters coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Underinsured Boaters Liability CSL / BI - Deductible</b>	Enter deductible: The deductible for bodily injury liability or combined single limit liability underinsured boaters coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Underinsured Boaters Liability CSL / BI - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Underinsured Boaters Liability CSL / BI - Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Underinsured Boaters CSL / BI Liability - Premium</b>	Enter amount: The premium for bodily injury liability or combined single limit liability underinsured boaters coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Underinsured Boaters Liability PD - Limit</b>	Enter limit: The limit for underinsured boaters property damage coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Underinsured Boaters Liability PD - Deductible</b>	Enter deductible: The deductible for underinsured boaters property damage coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Underinsured Boaters Liability PD - Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Underinsured Boaters Liability PD - Form Date</b>	Enter date: The edition date of the form.

<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Underinsured Boaters Liability PD - Premium</b>	Enter amount: The premium for underinsured boaters property damage coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Code</b>	Enter code: The code for the coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Coverage</b>	Enter text: The description of the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Limit</b>	Enter limit: The limit for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Applies To</b>	Enter code: The code identifying what the limit applies to (i.e. per occurrence).
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Limit</b>	Enter limit: The limit for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Applies To</b>	Enter code: The code identifying what the limit applies to (i.e. per occurrence).
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Deductible</b>	Enter deductible: The deductible for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Premium</b>	Enter amount: The premium for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Code</b>	Enter code: The code for the coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Coverage</b>	Enter text: The description of the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Limit</b>	Enter limit: The limit for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Applies To</b>	Enter code: The code identifying what the limit applies to (i.e. per occurrence).

<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Limit</b>	Enter limit: The limit for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Applies To</b>	Enter code: The code identifying what the limit applies to (i.e. per occurrence).
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Deductible</b>	Enter deductible: The deductible for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Premium</b>	Enter amount: The premium for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Code</b>	Enter code: The code for the coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Coverage</b>	Enter text: The description of the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Limit</b>	Enter limit: The limit for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Applies To</b>	Enter code: The code identifying what the limit applies to (i.e. per occurrence).
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Limit</b>	Enter limit: The limit for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Applies To</b>	Enter code: The code identifying what the limit applies to (i.e. per occurrence).
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Deductible</b>	Enter deductible: The deductible for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Premium</b>	Enter amount: The premium for the coverage or adjustment.

<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Code</b>	Enter code: The code for the coverage.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Coverage</b>	Enter text: The description of the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Unit #</b>	Enter number: The producer assigned number for the unit being covered.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Limit</b>	Enter limit: The limit for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Applies To</b>	Enter code: The code identifying what the limit applies to (i.e. per occurrence).
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Limit</b>	Enter limit: The limit for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Applies To</b>	Enter code: The code identifying what the limit applies to (i.e. per occurrence).
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Deductible</b>	Enter deductible: The deductible for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Form Number</b>	Enter identifier: The number used by the insurer for this form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Form Date</b>	Enter date: The edition date of the form.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Premium</b>	Enter amount: The premium for the coverage or adjustment.
<b>COVERAGES / LIMITS OF LIABILITY</b>	<b>Total</b>	Enter amount: The total premium amount for the watercraft.

**Form Page 2**

<b>Section Name</b>	<b>Field Name</b>	<b>Description</b>
<b>IDENTIFICATION SECTION</b>	<b>Agency Customer ID</b>	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
<b>RATING / UNDERWRITING</b>	<b>Boat Hull No.</b>	Enter number: The producer assigned number for the watercraft.

<b>RATING / UNDERWRITING</b>	<b>Bilge Pumps</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicate if the watercraft has a bilge pump. A bilge pump is a manually operated or automatically activated device used for pumping water from the inner part of the ship's hull. Using the same principle as the manual pump, the automatic pump is activated by the rise of water within the hull. Specify the manufacturer and the model (e.g., Dynaflo Pump 304) in the space provided.
<b>RATING / UNDERWRITING</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>RATING / UNDERWRITING</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>RATING / UNDERWRITING</b>	<b>Fume Detector</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if there is a fume detector on the watercraft. A fume detector is a device used for detecting the presence of fuel vapors below deck. Specify the manufacturer and model (e.g., Sniffer 203) in the space provided.
<b>RATING / UNDERWRITING</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>RATING / UNDERWRITING</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>RATING / UNDERWRITING</b>	<b>Depth Sounder</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if there is a depth sounder on the watercraft. A depth sounder is an electronic device for determining the depth of the water beneath the boat. Indicate the manufacturer and model (e.g., Moran 6" - 150/SV-300) in the space provided.
<b>RATING / UNDERWRITING</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>RATING / UNDERWRITING</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>RATING / UNDERWRITING</b>	<b>Radar</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if the watercraft has a radar system. A radar system is a device for detecting distant objects and determining their position. Specify the manufacturer and model in the space provided.
<b>RATING / UNDERWRITING</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>RATING / UNDERWRITING</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>RATING / UNDERWRITING</b>	<b>Radio Direction Finder</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if the watercraft has a radio direction finder used as a navigational aid employing a radio signal. Enter the manufacturer and model (e.g., Loran, GSP) in the space provided.
<b>RATING / UNDERWRITING</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>RATING / UNDERWRITING</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>RATING / UNDERWRITING</b>	<b>CO2/ Chemical System</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if there is a carbon dioxide (CO2) / chemical system on the watercraft. A CO2 or chemical system is a built-in fire extinguishing device. Indicate if it is manual or automatic and identify the spaces protected. Include the manufacturer and model in the space provided.
<b>RATING / UNDERWRITING</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>RATING / UNDERWRITING</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.

<b>RATING / UNDERWRITING</b>	<b>Automatic</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if the CO2 / chemical system is triggered automatically.
<b>RATING / UNDERWRITING</b>	<b>Spaces Protected</b>	Enter text: The description of the spaces protected by the CO2 / chemical system in the boat.
<b>RATING / UNDERWRITING</b>	<b>Cooking Stove</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if there is a cooking stove in the watercraft. Indicate the manufacturer, model, fuel type and the number of stoves in the space provided.
<b>RATING / UNDERWRITING</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>RATING / UNDERWRITING</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>RATING / UNDERWRITING</b>	<b>Fuel Type</b>	Enter text: The description of the type of fuel used for cooking.
<b>RATING / UNDERWRITING</b>	<b># of Stoves</b>	Enter number: The number of cooking stoves.,
<b>RATING / UNDERWRITING</b>	<b>Fire Extinguishers</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if there is a fire extinguisher on the watercraft. Indicate the number of fire extinguishers, the type, size, and the date last weighed, if available in the space provided.
<b>RATING / UNDERWRITING</b>	<b>Type</b>	Enter text: The description of the type of fire extinguisher,
<b>RATING / UNDERWRITING</b>	<b>Size</b>	Enter text: The size of the fire extinguisher.
<b>RATING / UNDERWRITING</b>	<b>Date Last Weighed</b>	Enter date: The date the fire extinguishers were last weighed.
<b>RATING / UNDERWRITING</b>	<b># of Extinguishers</b>	Enter number: The number of fire extinguishers.
<b>RATING / UNDERWRITING</b>	<b>Ship to Shore Radio</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if the watercraft has a ship to shore radio. Indicate the type of radio in the space provided.  Examples include:  * SSB-Single Side Band * VHF-FM-Very High Frequency - Frequency Modulation * CB -Citizens Band * Cellular Phones * Marine Radio
<b>RATING / UNDERWRITING</b>	<b>Description</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.). As used here, equipment is a ship to shore radio.
<b>RATING / UNDERWRITING</b>	<b>Anti-Theft Devices</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if the watercraft has an anti-theft device. Special locks, burglar alarms or engine cut-out devices may be employed by the applicant. Marina security may be noted as well in the space provided.
<b>RATING / UNDERWRITING</b>	<b>Description</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.). As used here, equipment is an anti-theft device.



<b>RATING / UNDERWRITING</b>	<b>Heating</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if the watercraft has a heating system.
<b>RATING / UNDERWRITING</b>	<b>Description</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.). As used here, equipment is a heating system.
<b>RATING / UNDERWRITING</b>	<b>Other Equipment Type</b>	Enter text: The description of the other equipment type on the watercraft.
<b>RATING / UNDERWRITING</b>	<b>Other</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates there is equipment other than those listed.
<b>RATING / UNDERWRITING</b>	<b>Other Description</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.).
<b>RATING / UNDERWRITING</b>	<b>Other Equipment Type</b>	Enter text: The description of the other equipment type on the watercraft.
<b>RATING / UNDERWRITING</b>	<b>Other</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates there is equipment other than those listed.
<b>RATING / UNDERWRITING</b>	<b>Other Description</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.).
<b>RATING / UNDERWRITING</b>	<b>Other Equipment Type</b>	Enter text: The description of the other equipment type on the watercraft.
<b>RATING / UNDERWRITING</b>	<b>Other</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates there is equipment other than those listed.
<b>RATING / UNDERWRITING</b>	<b>Other Description</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.).
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Equipment</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.).
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Year</b>	Enter year: The model year of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Serial Number</b>	Enter identifier: The serial number for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Limit</b>	Enter amount: The limit amount required for the equipment.

<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Equipment</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.).
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Year</b>	Enter year: The model year of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Serial Number</b>	Enter identifier: The serial number for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Limit</b>	Enter amount: The limit amount required for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Equipment</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.).
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Year</b>	Enter year: The model year of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Serial Number</b>	Enter identifier: The serial number for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Limit</b>	Enter amount: The limit amount required for the equipment.

<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Equipment</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.).
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Year</b>	Enter year: The model year of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Serial Number</b>	Enter identifier: The serial number for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Limit</b>	Enter amount: The limit amount required for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Equipment</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.).
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Year</b>	Enter year: The model year of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Serial Number</b>	Enter identifier: The serial number for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Limit</b>	Enter amount: The limit amount required for the equipment.

<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Equipment</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.).
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Year</b>	Enter year: The model year of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Serial Number</b>	Enter identifier: The serial number for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Limit</b>	Enter amount: The limit amount required for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Equipment</b>	Enter text: The description of the equipment (ex. lifeboat, tender, etc.).
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Year</b>	Enter year: The model year of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Manufacturer</b>	Enter text: The name of the manufacturer of the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Model</b>	Enter text: The manufacturer's model name for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Serial Number</b>	Enter identifier: The serial number for the equipment.
<b>PORTABLE ACCESSORIES AND LIFEBOATS / TENDERS</b>	<b>Limit</b>	Enter amount: The limit amount required for the equipment.

<b>HULL INFORMATION</b>	<b>1. Is the boat chartered to others?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Is the boat chartered to others?". If yes, describe the type of arrangements, destination, length of time and frequency. Indicate if it is a bare boat charter where no crew or supervision is furnished, a voyage charter, a time charter, etc. Include the purpose of the charter (sight-seeing, fishing) and whether alcohol is served.
<b>HULL INFORMATION</b>	<b>Destination</b>	Enter text: The description of the charter destination.
<b>HULL INFORMATION</b>	<b>Length</b>	Enter text: The length of time of the charter.
<b>HULL INFORMATION</b>	<b>Frequency</b>	Enter code: The frequency of charters.
<b>HULL INFORMATION</b>	<b>Bare Boat Charter (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the boat is chartered as a bare boat.
<b>HULL INFORMATION</b>	<b>Voyage Charter (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the boat is chartered on a voyage basis.
<b>HULL INFORMATION</b>	<b>Time Charter (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the boat is chartered on a period of time basis.
<b>HULL INFORMATION</b>	<b>Alcohol Served (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if alcohol is served on the charter.
<b>HULL INFORMATION</b>	<b>Arrangements</b>	Enter text: The description of the charter arrangements.
<b>HULL INFORMATION</b>	<b>Purpose</b>	Enter text: The description of the charter purpose.
<b>HULL INFORMATION</b>	<b>2. Is the boat used commercially or for business purposes?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Is the boat used commercially or for business purposes?". If yes, describe the commercial or business use of the vessel. Indicate if the vessel is used for demonstrations, promotions, fishing, sight-seeing trips, etc.
<b>HULL INFORMATION</b>	<b>Explanation</b>	Enter text: An explanation as to whether the boat is used for business purposes.
<b>HULL INFORMATION</b>	<b>3. Is the boat used for racing?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Is the boat used for racing?". If yes, indicate the frequency of such races during the year, the extent of the race and the waters navigated.
<b>HULL INFORMATION</b>	<b>Frequency</b>	Enter code: The frequency the boat is used for racing.
<b>HULL INFORMATION</b>	<b>Extent of Races</b>	Enter text: The description of the extent of the races.
<b>HULL INFORMATION</b>	<b>Waters Navigated</b>	Enter text: The description of the waters navigated during races.
<b>HULL INFORMATION</b>	<b>4. Is the boat used for waterskiing?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Is the boat used for waterskiing?". If yes, indicate how frequently the vessel is used for waterskiing.
<b>HULL INFORMATION</b>	<b>Frequency</b>	Enter code: The frequency the boat is used for waterskiing.

<b>HULL INFORMATION</b>	<b>5. Does the applicant employ a paid crew?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the applicant employ a paid crew?".
<b>HULL INFORMATION</b>	<b>Number of Full-Time Crew</b>	Enter number: The number of full time crew.
<b>HULL INFORMATION</b>	<b>Number of Part-Time Crew</b>	Enter number: The number of part time crew.
<b>HULL INFORMATION</b>	<b>6. Any sleeping facilities?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any sleeping facilities?".
<b>HULL INFORMATION</b>	<b>Number of Beds</b>	Enter number: The number of beds on the watercraft.
<b>HULL INFORMATION</b>	<b>7. Any existing damage to the boat?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any existing damage to the boat?".
<b>HULL INFORMATION</b>	<b>Explanation</b>	Enter text: An explanation of any existing damage to the boat.
<b>HULL INFORMATION</b>	<b>8. Is the boat used as a primary residence?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Is the boat used as a primary residence?".
<b>HULL INFORMATION</b>	<b>Number of Residents</b>	Enter number: The number of residents.
<b>HULL INFORMATION</b>	<b>Permanent Residence (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the boat is used as a permanent residence.
<b>HULL INFORMATION</b>	<b>9. Are there any additional owners not listed as the named insured? - Yes</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Are there any additional owners not listed as the named insured?".
<b>OPERATORS</b>	<b>#</b>	Enter number: The number assigned to the driver by the producer.
<b>OPERATORS</b>	<b>Name</b>	Enter text: The driver's first name (given name).
<b>OPERATORS</b>		Enter text: The driver's middle name or initial (other given name).
<b>OPERATORS</b>		Enter text: The driver's last name (surname).
<b>OPERATORS</b>	<b>Sex</b>	Enter code: The gender of the driver.
<b>OPERATORS</b>	<b>Marital Status / Civil Union (if applicable)</b>	Enter code: The marital status of the driver. Examples are: S - Single; M - Married; D - Divorced; P - Separated; W - Widowed, C - Domestic Partner (unmarried), V - Civil Union / Registered Domestic Partner, F- Fiancé / Fiancée, U - Unknown, O - Other
<b>OPERATORS</b>	<b>Date of Birth</b>	Enter date: The birth date of the driver. (MM/DD/YYYY)
<b>OPERATORS</b>	<b>Occupation</b>	Enter text: The occupation of the driver.
<b>OPERATORS</b>	<b>Auto Driver's License Number</b>	Enter identifier: The driver's license number.
<b>OPERATORS</b>	<b>Licensed State</b>	Enter code: The state in which the driver is licensed.

<b>OPERATORS</b>	<b>Social Security</b>	Enter identifier: The tax identifier (social security number) of the driver.
<b>OPERATORS</b>	<b>#</b>	Enter number: The number assigned to the driver by the producer.
<b>OPERATORS</b>	<b>Name</b>	Enter text: The driver's first name (given name).
<b>OPERATORS</b>		Enter text: The driver's middle name or initial (other given name).
<b>OPERATORS</b>		Enter text: The driver's last name (surname).
<b>OPERATORS</b>	<b>Sex</b>	Enter code: The gender of the driver.
<b>OPERATORS</b>	<b>Marital Status / Civil Union (if applicable)</b>	Enter code: The marital status of the driver. Examples are: S - Single; M - Married; D - Divorced; P - Separated; W - Widowed, C - Domestic Partner (unmarried), V - Civil Union / Registered Domestic Partner, F- Fiancé / Fiancée, U - Unknown, O - Other
<b>OPERATORS</b>	<b>Date of Birth</b>	Enter date: The birth date of the driver. (MM/DD/YYYY)
<b>OPERATORS</b>	<b>Occupation</b>	Enter text: The occupation of the driver.
<b>OPERATORS</b>	<b>Auto Driver's License Number</b>	Enter identifier: The driver's license number.
<b>OPERATORS</b>	<b>Licensed State</b>	Enter code: The state in which the driver is licensed.
<b>OPERATORS</b>	<b>Social Security</b>	Enter identifier: The tax identifier (social security number) of the driver.
<b>OPERATORS</b>	<b>#</b>	Enter number: The number assigned to the driver by the producer.
<b>OPERATORS</b>	<b>Name</b>	Enter text: The driver's first name (given name).
<b>OPERATORS</b>		Enter text: The driver's middle name or initial (other given name).
<b>OPERATORS</b>		Enter text: The driver's last name (surname).
<b>OPERATORS</b>	<b>Sex</b>	Enter code: The gender of the driver.
<b>OPERATORS</b>	<b>Marital Status / Civil Union (if applicable)</b>	Enter code: The marital status of the driver. Examples are: S - Single; M - Married; D - Divorced; P - Separated; W - Widowed, C - Domestic Partner (unmarried), V - Civil Union / Registered Domestic Partner, F- Fiancé / Fiancée, U - Unknown, O - Other
<b>OPERATORS</b>	<b>Date of Birth</b>	Enter date: The birth date of the driver. (MM/DD/YYYY)
<b>OPERATORS</b>	<b>Occupation</b>	Enter text: The occupation of the driver.
<b>OPERATORS</b>	<b>Auto Driver's License Number</b>	Enter identifier: The driver's license number.
<b>OPERATORS</b>	<b>Licensed State</b>	Enter code: The state in which the driver is licensed.
<b>OPERATORS</b>	<b>Social Security</b>	Enter identifier: The tax identifier (social security number) of the driver.

<b>OPERATORS</b>	<b>#</b>	Enter number: The number assigned to the driver by the producer.
<b>OPERATORS</b>	<b>Name</b>	Enter text: The driver's first name (given name).
<b>OPERATORS</b>		Enter text: The driver's middle name or initial (other given name).
<b>OPERATORS</b>		Enter text: The driver's last name (surname).
<b>OPERATORS</b>	<b>Sex</b>	Enter code: The gender of the driver.
<b>OPERATORS</b>	<b>Marital Status / Civil Union (if applicable)</b>	Enter code: The marital status of the driver. Examples are: S - Single; M - Married; D - Divorced; P - Separated; W - Widowed, C - Domestic Partner (unmarried), V - Civil Union / Registered Domestic Partner, F- Fiancé / Fiancée, U - Unknown, O - Other
<b>OPERATORS</b>	<b>Date of Birth</b>	Enter date: The birth date of the driver. (MM/DD/YYYY)
<b>OPERATORS</b>	<b>Occupation</b>	Enter text: The occupation of the driver.
<b>OPERATORS</b>	<b>Auto Driver's License Number</b>	Enter identifier: The driver's license number.
<b>OPERATORS</b>	<b>Licensed State</b>	Enter code: The state in which the driver is licensed.
<b>OPERATORS</b>	<b>Social Security</b>	Enter identifier: The tax identifier (social security number) of the driver.
<b>OPERATORS</b>	<b>#</b>	Enter number: The number assigned to the driver by the producer.
<b>OPERATORS</b>	<b>Name</b>	Enter text: The driver's first name (given name).
<b>OPERATORS</b>		Enter text: The driver's middle name or initial (other given name).
<b>OPERATORS</b>		Enter text: The driver's last name (surname).
<b>OPERATORS</b>	<b>Sex</b>	Enter code: The gender of the driver.
<b>OPERATORS</b>	<b>Marital Status / Civil Union (if applicable)</b>	Enter code: The marital status of the driver. Examples are: S - Single; M - Married; D - Divorced; P - Separated; W - Widowed, C - Domestic Partner (unmarried), V - Civil Union / Registered Domestic Partner, F- Fiancé / Fiancée, U - Unknown, O - Other
<b>OPERATORS</b>	<b>Date of Birth</b>	Enter date: The birth date of the driver. (MM/DD/YYYY)
<b>OPERATORS</b>	<b>Occupation</b>	Enter text: The occupation of the driver.
<b>OPERATORS</b>	<b>Auto Driver's License Number</b>	Enter identifier: The driver's license number.
<b>OPERATORS</b>	<b>Licensed State</b>	Enter code: The state in which the driver is licensed.
<b>OPERATORS</b>	<b>Social Security</b>	Enter identifier: The tax identifier (social security number) of the driver.



<b>Section Name</b>	<b>Field Name</b>	<b>Description</b>
<b>IDENTIFICATION SECTION</b>	<b>Agency Customer ID</b>	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
<b>OPERATORS EXPERIENCE</b>	<b>#</b>	Enter number: The producer assigned number for the driver.
<b>OPERATORS EXPERIENCE</b>	<b>Prior Boat Make</b>	Enter text: The name of the manufacturer of the prior watercraft.
<b>OPERATORS EXPERIENCE</b>	<b>Model</b>	Enter text: The manufacturer's model name for the prior watercraft.
<b>OPERATORS EXPERIENCE</b>	<b>Number of Years Owned</b>	Enter number: The number of years the prior watercraft was owned.
<b>OPERATORS EXPERIENCE</b>	<b>USCGA Courses (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the operator has completed any United States Coast Guard Auxiliary (USCGA) courses.
<b>OPERATORS EXPERIENCE</b>	<b>Power Squadron Courses (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the operator has completed any Power Squadron courses.
<b>OPERATORS EXPERIENCE</b>	<b>Other Education</b>	Enter text: Describe any operator completed courses offered by the United States Coast Guard Auxiliary, the Power Squadron or other recognized training.
<b>OPERATORS EXPERIENCE</b>	<b>#</b>	Enter number: The producer assigned number for the driver.
<b>OPERATORS EXPERIENCE</b>	<b>Prior Boat Make</b>	Enter text: The name of the manufacturer of the prior watercraft.
<b>OPERATORS EXPERIENCE</b>	<b>Model</b>	Enter text: The manufacturer's model name for the prior watercraft.
<b>OPERATORS EXPERIENCE</b>	<b>Number of Years Owned</b>	Enter number: The number of years the prior watercraft was owned.
<b>OPERATORS EXPERIENCE</b>	<b>USCGA Courses (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the operator has completed any United States Coast Guard Auxiliary (USCGA) courses.
<b>OPERATORS EXPERIENCE</b>	<b>Power Squadron Courses (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the operator has completed any Power Squadron courses.
<b>OPERATORS EXPERIENCE</b>	<b>Other Education</b>	Enter text: Describe any operator completed courses offered by the United States Coast Guard Auxiliary, the Power Squadron or other recognized training.
<b>OPERATORS EXPERIENCE</b>	<b>#</b>	Enter number: The producer assigned number for the driver.
<b>OPERATORS EXPERIENCE</b>	<b>Prior Boat Make</b>	Enter text: The name of the manufacturer of the prior watercraft.
<b>OPERATORS EXPERIENCE</b>	<b>Model</b>	Enter text: The manufacturer's model name for the prior watercraft.
<b>OPERATORS EXPERIENCE</b>	<b>Number of Years Owned</b>	Enter number: The number of years the prior watercraft was owned.
<b>OPERATORS EXPERIENCE</b>	<b>USCGA Courses (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the operator has completed any United States Coast Guard Auxiliary (USCGA) courses.
<b>OPERATORS EXPERIENCE</b>	<b>Power Squadron Courses (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the operator has completed any Power Squadron courses.

<b>OPERATORS EXPERIENCE</b>	<b>Other Education</b>	Enter text: Describe any operator completed courses offered by the United States Coast Guard Auxiliary, the Power Squadron or other recognized training.
<b>OPERATORS EXPERIENCE</b>	<b>#</b>	Enter number: The producer assigned number for the driver.
<b>OPERATORS EXPERIENCE</b>	<b>Prior Boat Make</b>	Enter text: The name of the manufacturer of the prior watercraft.
<b>OPERATORS EXPERIENCE</b>	<b>Model</b>	Enter text: The manufacturer's model name for the prior watercraft.
<b>OPERATORS EXPERIENCE</b>	<b>Number of Years Owned</b>	Enter number: The number of years the prior watercraft was owned.
<b>OPERATORS EXPERIENCE</b>	<b>USCGA Courses (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the operator has completed any United States Coast Guard Auxiliary (USCGA) courses.
<b>OPERATORS EXPERIENCE</b>	<b>Power Squadron Courses (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the operator has completed any Power Squadron courses.
<b>OPERATORS EXPERIENCE</b>	<b>Other Education</b>	Enter text: Describe any operator completed courses offered by the United States Coast Guard Auxiliary, the Power Squadron or other recognized training.
<b>OPERATORS EXPERIENCE</b>	<b>#</b>	Enter number: The producer assigned number for the driver.
<b>OPERATORS EXPERIENCE</b>	<b>Prior Boat Make</b>	Enter text: The name of the manufacturer of the prior watercraft.
<b>OPERATORS EXPERIENCE</b>	<b>Model</b>	Enter text: The manufacturer's model name for the prior watercraft.
<b>OPERATORS EXPERIENCE</b>	<b>Number of Years Owned</b>	Enter number: The number of years the prior watercraft was owned.
<b>OPERATORS EXPERIENCE</b>	<b>USCGA Courses (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the operator has completed any United States Coast Guard Auxiliary (USCGA) courses.
<b>OPERATORS EXPERIENCE</b>	<b>Power Squadron Courses (Y/N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the operator has completed any Power Squadron courses.
<b>OPERATORS EXPERIENCE</b>	<b>Other Education</b>	Enter text: Describe any operator completed courses offered by the United States Coast Guard Auxiliary, the Power Squadron or other recognized training.
<b>GENERAL INFORMATION</b>	<b>1. Any operator have a physical impairment that would affect the ability to drive?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any driver have a physical impairment that would affect the ability to drive?". As used here, not applicable in MT and WI.
<b>GENERAL INFORMATION</b>	<b>#</b>	Enter number: The number assigned to the driver by the producer.
<b>GENERAL INFORMATION</b>	<b>Description of Special Equipment</b>	Enter text: The description of any special equipment.

<b>GENERAL INFORMATION</b>	<b>2. Any operator undergoing a course of treatment for a physical / mental impairment that would affect the ability to drive?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any driver undergoing a course of medical treatment for a physical or mental impairment that would affect the ability to drive?". As used here, not applicable in MT, OR and WI.
<b>GENERAL INFORMATION</b>	<b>#</b>	Enter number: The number assigned to the driver by the producer.
<b>GENERAL INFORMATION</b>	<b>Explanation</b>	Enter text: The description of any course of medical treatment for a driver with a physical or mental impairment.
<b>GENERAL INFORMATION</b>	<b>3. Any drivers license suspended / revoked during the last three (3) years?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any drivers license been suspended / revoked during the last mandated number of years?". If yes, indicate the driver number and provide the circumstances surrounding the suspension / revocation in the space provided.
<b>OPERATORS EXPERIENCE</b>	<b>#</b>	Enter number: The number assigned to the driver by the producer.
<b>OPERATORS EXPERIENCE</b>	<b>Suspension Period - Start Date</b>	Enter date: The date the driver's license suspension became effective.
<b>OPERATORS EXPERIENCE</b>	<b>End Date</b>	Enter date: The date the driver's license suspension is scheduled to end.
<b>OPERATORS EXPERIENCE</b>	<b>Explanation</b>	Enter text: The reason the driver's license was suspended or revoked.
<b>OPERATORS EXPERIENCE</b>	<b>Reinstatement Date</b>	Enter date: The date a suspended or revoked driver's license was reinstated.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Within Last_Years?</b>	Enter number: The number of years reviewed, in accordance with the company's and state's requirements.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any operator had an accident / conviction during the last specified number of years?". If yes, describe accidents / convictions for both driving and boating records.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Drv #</b>	Enter number: The producer's driver number for the driver involved in the accident or conviction.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Date of Accident / Conviction</b>	Enter date: The date of the accident or conviction. (MM/DD/YYYY)
<b>ACCIDENTS / CONVICTIONS</b>	<b>Description of Accident or Conviction</b>	Enter text: The description of the accident or conviction. ACORD 101, Additional Remarks Schedule, may be attached if more space is required.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Place of Accident / Conviction</b>	Enter text: The place of the accident or conviction.
<b>ACCIDENTS / CONVICTIONS</b>	<b>BI or Death Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the accident or conviction resulted in bodily injury or death.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Amount of Property Damage</b>	Enter amount: The amount of property damage resulting from the accident or conviction.

<b>ACCIDENTS / CONVICTIONS</b>	<b>Drv #</b>	Enter number: The producer's driver number for the driver involved in the accident or conviction.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Date of Accident / Conviction</b>	Enter date: The date of the accident or conviction. (MM/DD/YYYY)
<b>ACCIDENTS / CONVICTIONS</b>	<b>Description of Accident or Conviction</b>	Enter text: The description of the accident or conviction. ACORD 101, Additional Remarks Schedule, may be attached if more space is required.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Place of Accident / Conviction</b>	Enter text: The place of the accident or conviction.
<b>ACCIDENTS / CONVICTIONS</b>	<b>BI or Death Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the accident or conviction resulted in bodily injury or death.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Amount of Property Damage</b>	Enter amount: The amount of property damage resulting from the accident or conviction.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Drv #</b>	Enter number: The producer's driver number for the driver involved in the accident or conviction.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Date of Accident / Conviction</b>	Enter date: The date of the accident or conviction. (MM/DD/YYYY)
<b>ACCIDENTS / CONVICTIONS</b>	<b>Description of Accident or Conviction</b>	Enter text: The description of the accident or conviction. ACORD 101, Additional Remarks Schedule, may be attached if more space is required.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Place of Accident / Conviction</b>	Enter text: The place of the accident or conviction.
<b>ACCIDENTS / CONVICTIONS</b>	<b>BI or Death Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the accident or conviction resulted in bodily injury or death.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Amount of Property Damage</b>	Enter amount: The amount of property damage resulting from the accident or conviction.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Drv #</b>	Enter number: The producer's driver number for the driver involved in the accident or conviction.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Date of Accident / Conviction</b>	Enter date: The date of the accident or conviction. (MM/DD/YYYY)
<b>ACCIDENTS / CONVICTIONS</b>	<b>Description of Accident or Conviction</b>	Enter text: The description of the accident or conviction. ACORD 101, Additional Remarks Schedule, may be attached if more space is required.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Place of Accident / Conviction</b>	Enter text: The place of the accident or conviction.
<b>ACCIDENTS / CONVICTIONS</b>	<b>BI or Death Y / N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the accident or conviction resulted in bodily injury or death.
<b>ACCIDENTS / CONVICTIONS</b>	<b>Amount of Property Damage</b>	Enter amount: The amount of property damage resulting from the accident or conviction.
<b>REMARKS / ATTACHMENTS</b>	<b>State Supplement(s)</b>	Check the box (if applicable): Indicates a state supplement is attached.
<b>REMARKS / ATTACHMENTS</b>	<b>Photograph</b>	Check the box (if applicable): Indicates a photograph is attached.

<b>REMARKS / ATTACHMENTS</b>	<b>Survey</b>	Check the box (if applicable): Indicates a survey is attached.
<b>REMARKS / ATTACHMENTS</b>	<b>Coast Guard Certificate</b>	Check the box (if applicable): Indicates a coast guard certificate is attached.
<b>REMARKS / ATTACHMENTS</b>	<b>Inspection</b>	Check the box (if applicable): Indicates an inspection is attached.
<b>REMARKS / ATTACHMENTS</b>	<b>Appraisal</b>	Check the box (if applicable): Indicates an appraisal is attached.
<b>REMARKS / ATTACHMENTS</b>	<b>Motor Vehicle Report</b>	Check the box (if applicable): Indicates a motor vehicle report is attached.
<b>REMARKS / ATTACHMENTS</b>	<b>Other</b>	Check the box (if applicable): Indicates there is an attachment other than those listed.
<b>REMARKS / ATTACHMENTS</b>	<b>Other Description</b>	Enter text: The description of the attachment.
<b>REMARKS / ATTACHMENTS</b>	<b>Other</b>	Check the box (if applicable): Indicates there is an attachment other than those listed.
<b>REMARKS / ATTACHMENTS</b>	<b>Other Description</b>	Enter text: The description of the attachment.
<b>REMARKS / ATTACHMENTS</b>	<b>Other</b>	Check the box (if applicable): Indicates there is an attachment other than those listed.
<b>REMARKS / ATTACHMENTS</b>	<b>Other Description</b>	Enter text: The description of the attachment.
<b>REMARKS / ATTACHMENTS</b>	<b>Remarks / Attachments</b>	Enter text: The remarks associated with the watercraft line of business.
<b>BINDER</b>	<b>Effective Date</b>	Enter date: The date on which the terms and conditions of the binder commenced. This date normally coincides with the effective date of the policy or of an endorsement to the policy.
<b>BINDER</b>	<b>Time</b>	Enter time: The time of day on the effective date in which the terms and conditions of the binder will commence.
<b>BINDER</b>	<b>Expiration Date</b>	Enter date: The date on which the terms and conditions of the policy will or have expired. Certain state laws limit the terms of a binder, so this date may not coincide with the policy expiration date.
<b>BINDER</b>	<b>12:01 AM</b>	Check the box (if applicable): Indicates the binder expires at 12:01 AM on the expiration date.
<b>BINDER</b>	<b>Noon</b>	Check the box (if applicable): Indicates the binder expires at 12:00 noon on the expiration date.
<b>BINDER</b>	<b>Coverage is not bound</b>	Check the box (if applicable): Indicates the coverage has not been bound.

**Form Page 4**

<b>Section Name</b>	<b>Field Name</b>	<b>Description</b>
<b>IDENTIFICATION SECTION</b>	<b>Agency Customer ID</b>	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
<b>FRAUD STATEMENTS / SIGNATURE</b>	<b>Producer's Signature</b>	Sign here: Accommodates the signature of the authorized representative (e.g., producer, agent, broker, etc.) of the company(ies) listed on the document. This is required in most states.

<b>FRAUD STATEMENTS / SIGNATURE</b>	<b>Producer's Name (Please Print)</b>	Enter text: The name of the authorized representative of the producer, agency and/or broker that signed the form.
<b>FRAUD STATEMENTS / SIGNATURE</b>	<b>State Producer License No (Required in FL)</b>	Enter identifier: The State License Number of the producer.
<b>FRAUD STATEMENTS / SIGNATURE</b>	<b>Applicant's Signature</b>	Sign here: Accommodates the signature of the applicant or named insured.
<b>FRAUD STATEMENTS / SIGNATURE</b>	<b>Date</b>	Enter date: The date the form was signed by the applicant or named insured. (MM/DD/YYYY)
<b>FRAUD STATEMENTS / SIGNATURE</b>	<b>National Producer Number</b>	Enter identifier: The National Producer Number (NPN) as defined in the National Insurance Producer Registry (NIPR). Note: The NPN is not the same as the producer state license number.