

# COMMERCIAL VESSEL SUPPLEMENT

## GENERAL INFORMATION

1. Name insured:	
2. Owners:	
3. Occupation(s):	
4. Telephone No.:	
5. Mortgagee:	
6. Mortgagee's Address:	

## HULL COVERAGE

	Name of Vessel	Year Built	Gross Ton.	Material of Hull	Type of Propulsion & H.P.	Type of Vessel	Length & Beam	Date of Last Drydocking	Desired Amount of Insurance
7.									

## PROTECTION & INDEMNITY COVERAGE

	Name of Vessel	Type of Cargo Carried	No. Crew (excl. Owner)	Max. No. of Passengers Cert. by U.S.C.G.	Liability of Vessels & Cargo in tow desired	Desired Amount of Insurance
8.						



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## GENERAL DESCRIPTION OF OPERATION

9. Experience of Employee's and Licenses:	
10. Towboats only: Type and number of vessels in tow and copy of towage contract.	
11. Non-propelled Vessels: Give details of tower and copy of towage contract.	
12. Are Towers released?	Yes <input type="checkbox"/> No <input type="checkbox"/> By whom?
13. Navigation Limits required:	
14. Is watchman service provided?	Yes <input type="checkbox"/> No <input type="checkbox"/>
15. Where can vessel(s) be inspected?	
16. Is Vessel(s) ever Laid-Up?	Location: Not applicable                      Dates:
17. Does this placing include all vessels operated by the insured or affiliated or subsidiary companies? (If not, explain)	Yes <input type="checkbox"/> No <input type="checkbox"/>
18. Provide copies of current policies if available?	

I/we hereby declare that the above information is true and I/we have not suppressed or misstated any material facts and I/we agree that this application shall be the basis of the contract with underwriters if issued.

### APPLICABLE IN FLORIDA

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_



### LIG Marine Managers

111 2<sup>nd</sup> Ave. NE, Suite 1101, St. Petersburg, FL 33701  
 (727) 578-2800  
[SUBMIT@LIGMarine.com](mailto:SUBMIT@LIGMarine.com)  
[www.LIGMarine.com](http://www.LIGMarine.com)