

# EQUIPMENT SUPPLEMENT

## GENERAL INFORMATION

1. Named Insured:

Donora Dock, LLC, Donora Property, LLC

## EQUIPMENT

2. Provide equipment details:  
*(Please attach schedule as needed)*

Make / Model	Year	Value
See Attached		

3. Loss History for last 5 years for Equipment:  
*(Please attach as needed)*

4. Where is equipment stored when not in use?

5. What security or other protections are there at this location?

6. Do you have a written storm/hurricane plan to protect your equipment?  
*(If yes, please attach)*

Yes  No

I/we hereby declare that the above information and are 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**

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