

QUOTE REQUEST FORM
TELEPHONE - 410 827 3757
FAX - 410/827-3758
ATTN: PATRICIA BANNON
EMAIL - PAT@IMIS.PRO

OWNERSHIP:

Buyer/Owner(s) ▶

Street address ▶

City / State / ZIP ▶

Home phone ▶

Work phone ▶

E-Mail address ▶

OPERATOR(S):

Name(s)▶

Date of Birth ▶

Drivers License #:

SSN:

Occupation ▶

Years of boating experience ▶

Size(s) & Type(s) of Boat(s) operated ▶

Years of boat ownership (any boat)▶

Size(s) & Type(s) of Boat(s) owned ▶

License held (if any)▶

Current insurance company ▶

Expiration date ▶

Describe boating accidents or losses, last 5 years ▶ none

(repeat details for any other regular operator) ▼

BOAT

Name:

Model year ▶

Builder ▶

Model (or rig) ▶

Length overall ▶

Construction ▶

Flag ▶

Purchase Date ▶

Purchase Cost ▶

Total Investment ▶ \$

1% deductible.

ENGINE(S):

Number ▶ Year(s) ▶ Manufacturer(s) ▶ Total Horsepower ▶
Fuel ▶

EQUIPMENT:

Automatic extinguisher Fume detector Theft Alarm VHF radio
Depth finder Loran or GPS Radar EPIRB
Describe Ground Tackle ▶
Other safety gear ▶

TENDER:

Model year ▶ Builder ▶ Model or Length ▶
Motor year ▶ Manufacturer ▶ Horespower ▶

TRAILER:

Model year ▶ Builder ▶ Model ▶

USE:

Private pleasure Liveaboard Captain charter Bareboat charter Racing
Number of paid crew
Navigation area ▶
Regular Mooring Location ▶
Lay-up Period ▶

COVERAGE:

Hull & equipment value ▶ \$ Deductible ▶ \$
Liability limit ▶ \$
Tender value & motor value ▶ \$
Trailer value ▶ \$
Other specifications ▶

HOW DID YOU HEAR ABOUT INTERNATIONAL MARINE INSURANCE SERVICES? ▼

COMMENTS: