



***Yacht and Pleasure
Craft Insurance
Proposal Form***

Important Notes

Please ensure that block capitals are used in all sections of the proposal form.

Commencement of this policy will be confirmed by a policy certificate. Payment of premium does not mean that the cover is in force.

If you have any queries when completing this form please call us on **2343 0000** or email us on **boats@elmoinsurance.com**

1. Policyholder's details

Name and surname
/Company name

ID number/
passport number

Address

Company
registration number

VAT registration
number (if applicable)

Telephone number

Date of birth

Mobile number

Occupation

E-mail address

2. Choose your cover

Own Damage and Third Party Liability

Third Party Liability Only

3. Craft details

Name of craft

Registration
number

Make and model

Year of build

Type of craft

Material of craft

Overall length

Beam

Year purchased

Price purchased

Was the craft professionally built or amateur built?

Note: If the craft is amateur built or older than 15 years, please attach a condition/value report.

4. Tender details

Registration
number (if any)

Year of build

Manufacturer

Beam

Overall length

5. Engine details

	Make	Year of make	HP	Serial number	Fuel
Outboard 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Outboard 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inboard 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inboard 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Outboard to tender	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please state the maximum speed of the craft with these engines knots

6. Navigation limits

Maltese territorial waters Other Please specify

7. Berth

Where and when will the craft be moored when in-commission?

Marina From / / To / /

Mooring From / / To / /

Ashore when not in use Yes No Where will the craft be laid-up?

8. Sums to be insured

Hull & equipment including inboard engine(s) (if any)

Outboard engine(s)

Special equipment:

Dinghy/tender to parent craft

Outboard engine to dinghy/tender

Trailer

Personal effects: (single article limit € 250)

Medical expenses

Total Sum Insured

Limit of Liability

9. Drivers

Give details of other drivers who will operate the craft.

Name and surname	Date of birth	Number of years holding license
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

10. General questions

Will the craft be used solely for private and pleasure purposes?

Yes No

How many years of experience have you as an owner/crew of a craft?

Do you have a boat license?

Yes No

What are your qualifications for boat handling?

Are you the sole owner of the craft?

Yes No

Have you or any person you will permit to use the craft:

a) ever been convicted or are currently convicted of any offense?

Yes No

b) suffered any accident or loss in the last 5 years with any craft used or owned?

Yes No

c) had any insurance on any craft cancelled or refused?

Yes No

Did the craft ever sustain any damages?

Yes No

Has the craft ever been converted in any way?

Yes No

Please provide further details in respect of the above questions.

If any Bank or equivalent has an interest in the craft, please state name and address.

What type of fire extinguisher(s) is/are fitted on the craft?

Any other information which you would like to add.

11. Data Protection Notice

Elmo Insurance Ltd is the data controller in relation to personal data held about you or any other person whom you insure with us. By making a request for insurance with Elmo Insurance Ltd, you acknowledge that you and all persons whom you propose to insure with us accept this Data Protection Statement. You should therefore show this notice to anyone whom you propose to insure with us.

It may be necessary for us to collect sensitive personal data (such as medical conditions or injuries) relating to you or any other person insured or to be insured under the policy or who may claim under the policy. You should get their explicit consent before sharing their personal data with us. By making a request for insurance with Elmo Insurance Ltd, or making a claim under this policy, you acknowledge that you and all such persons are giving their explicit consent to such information being processed in the manner and for the purposes outlined here.

Under the terms of your policy, you should give us notice about any accident which may give rise to a claim under the policy. When you give us notice about any such accident you acknowledge that you and all persons who may claim under this policy accept this Data Protection Statement. You should therefore likewise show this notice to anyone claiming under this policy.

We will use this information to manage and administer your insurance policy, to assess creditworthiness and for underwriting, claim handling and fraud prevention purposes. In order to provide you with products and services this information will be held in the data system of Elmo Insurance

Ltd. We may also collect information from other sources and check the information that you provide us. We may pass this information to other insurers either directly or through persons acting on their behalf such as the Malta Insurance Association, Insurance Intermediaries, or Private Investigators, Medical Consultants, the Commissioner of Police, the Malta Insurance Fraud Platform, and where we are entitled to do so under the Insurance Business Act or the Data Protection Act. Furthermore, in case you default in the payment of your premium or other dues under the policy, we may pass this information to the Malta Association of Credit Management or Credit Info or any Credit Referencing Agency, so that such information will be recorded in the system and made available to participants.

You are entitled to know what personal data is held about you in our systems and where applicable request the rectification or erasure of such data. If you wish to receive such information, you should write to us. We may pass some or all of the information that relates or is ancillary to the claims history of persons who may claim under your policy to the Malta Insurance Fraud Platform. The aim of the Malta Insurance Fraud Platform is to prevent, detect, suppress and/or prosecute insurance fraud. Elmo Insurance Ltd jointly with other motor insurers is the data controller in relation to the Malta Insurance Fraud Platform. The platform is administered on our behalf by the Malta Insurance Association. Under the Data Protection Act, you are entitled to know what information about claims you have made is held on the Malta Insurance Platform and where applicable, request the rectification or erasure of the same. If you wish to receive this information, please write to the Malta Insurance Association at its registered address.

12. Declaration

I declare that:

i) The above statements made by me, or on my behalf, are true and complete and I agree that this application form and declaration shall be the basis of the contract between me and Elmo Insurance Ltd

ii) I declare that I have read the Data Protection Notice

iii) I wish cover to commence on (the date cannot be before the proposal is accepted by Elmo Insurance Ltd.)

13. Policyholder's signature

Name and surname in block letters

Signature

Date



Elmo Insurance Ltd. Abate Rigord Street, Ta' Xbiex, Malta. XBX 1111
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BRANCH OFFICES

B'KARA BRANCH

Naxxar Road
B'Kara BKR 9044
☎ 2343 0322

COSPICUA BRANCH

48 Bormla Gate
Cospicua BML 2062
☎ 2343 0301

PAOLA BRANCH

Paola Square
Paola PLA 1261
☎ 2343 0306

QORMI BRANCH

St. Bartholomeo Street
Qormi QRM 2187
☎ 2343 0311

RABAT BRANCH

23A Saqqajja Square
Rabat RBT 1192
☎ 2343 0332

ST. PAUL'S BAY

612 Mosta Road
St. Paul's Bay SPB 3112
☎ 2343 0310

ZEBBUG BRANCH

Mdina Road
Zebbug ZBG 9017
☎ 2343 0326/7

VALLETTA BRANCH

Cassar & Cooper
54 South Street
Valletta VLT 1103
☎ 2343 0316