

MARINE CRAFT INSURANCE RISK EVALUATION

Please provide an answer to each question with comments.
Where question does not apply to vessel write N/A.
If additional information necessary please attach separate sheet.

OWNER: _____ POLICY/QUOTATION NUMBER: _____
 ADDRESS: _____ SLIPPING DATE: ____/____/____
 TELEPHONE NO: _____ INSPECTED AT: _____
 EMAIL ADDRESS: _____ VESSEL NAME: _____
 HIN/REGISTRATION/SAIL NO.: _____ AFLOAT SLIPPED
 BUILDER: _____ DESIGN: _____ RIG: _____
 DATE LAUNCHED: _____ LOA: _____
 CONSTRUCTION MATERIAL - HULL: _____ DECK: _____ KEEL: _____

NOTE: BOATS OVER 30FT MUST BE SURVEYED BY A QUALIFIED MARINE SURVEYOR

HULL CONSTRUCTION/CONDITION

	ACCEPT	NON ACCEPT	COMMENTS/DETAILS/DESCRIPTION
Keel			
Keelbolts			
Surface U/W			
Surface A/W			
Deck			
Cockpit			
Coach-house			
Frames			
Stringers			
Bulkheads			
Cabin/Interior			
Marine Toilet			
Seacocks			
Skin Fittings			
Cockpit Drains			
Propeller			
Propeller Shaft			
Propeller Skeg			

HULL CONSTRUCTION/CONDITION (cont'd)

	ACCEPT	NON ACCEPT	COMMENTS/DETAILS/DESCRIPTION
Stern gland			
Rudder			
Rudder Mounts			
Rudder Stock/Gland			
Steering Linkages			
Auxiliary Steering			
Chain Plates			
Stemhead Fitting			

Recommendations: _____

MOTOR INSTALLATION/CONDITION

PETROL: DIESEL: INBOARD: OUTBOARD: STERN DRIVE: JET:
 BRAND: _____ MODEL No.: _____ SERIAL No.: 11871120967 H.P.: _____ AGE: _____

	ACCEPT	NON ACCEPT	COMMENTS/DETAILS/DESCRIPTION
Installation			
Controls			
Exhaust			
Fuel Lines/Fittings			
Fuel Tanks			
Filler			
Venting			
Connection & Lines			
Electrical Harness			
Electrical Fitting			
Stove			
Gas Bottles			Inc. Gas Compliance Plate No.: _____
Connections & Lines			
Position			
Venting			
Gas Detector			
Batteries			
Mounting			
Bilge Pump - Manual			
- Electrical			

Recommendations: _____

MAST, SPARS, RIGGING AND SAILS

MAST MATERIAL: ALUMINIUM TIMBER CARBON OTHER: _____

	ACCEPT	NON ACCEPT	COMMENTS/DETAILS/DESCRIPTION
Mast/s	<input type="checkbox"/>	<input type="checkbox"/>	TYPE: MASTHEAD: <input type="checkbox"/> FRACTIONAL: <input type="checkbox"/> HOW OLD: _____ WHEN LAST SERVICED: _____

Mast Step	<input type="checkbox"/>	<input type="checkbox"/>	
Boom/s	<input type="checkbox"/>	<input type="checkbox"/>	
Spin. Pole/Jockey Pole	<input type="checkbox"/>	<input type="checkbox"/>	
Rigging	<input type="checkbox"/>	<input type="checkbox"/>	ROD <input style="width: 40px;" type="text"/> WIRE <input style="width: 40px;" type="text"/> AGE <input style="width: 40px;" type="text"/>
Spreaders	<input type="checkbox"/>	<input type="checkbox"/>	No. of <input style="width: 40px;" type="text"/> INLINE <input style="width: 40px;" type="text"/> SWEPT BACK <input style="width: 40px;" type="text"/>
Base Attachments	<input type="checkbox"/>	<input type="checkbox"/>	
Chain Plates	<input type="checkbox"/>	<input type="checkbox"/>	
Hydraulics	<input type="checkbox"/>	<input type="checkbox"/>	

Sail Inventory: _____

Sail Age: _____

Sail Conditions: _____

Date Mast &/or Rigging last serviced & by whom: _____

SAFETY EQUIPMENT

	ACCEPT	NON ACCEPT	COMMENTS/DETAILS/DESCRIPTION
Anchor & Warp	<input type="checkbox"/>	<input type="checkbox"/>	
Flares	<input type="checkbox"/>	<input type="checkbox"/>	
Fire Extinguisher	<input type="checkbox"/>	<input type="checkbox"/>	
Spot Light	<input type="checkbox"/>	<input type="checkbox"/>	
Lifejackets	<input type="checkbox"/>	<input type="checkbox"/>	
Navigation Lights	<input type="checkbox"/>	<input type="checkbox"/>	
Life Raft	<input type="checkbox"/>	<input type="checkbox"/>	
Pulpits	<input type="checkbox"/>	<input type="checkbox"/>	
Pushpits	<input type="checkbox"/>	<input type="checkbox"/>	
Staunchions/Lifelines	<input type="checkbox"/>	<input type="checkbox"/>	

Recommendations: _____

GENERAL REMARKS AND RECOMMENDATIONS

RESTRICTED WATERS

OPEN WATERS

Disclaimer

"This survey has been carried out for the client and the report is intended for their use only.

This inspection was carried out to the best of our knowledge and ability and the report is issued without prejudice to the interests of any party. Neither ... (thecompany) or (the individual) shall be held liable by you for any error of judgement or omission of facts."

Condition survey disclaimer:

"The report represents our interpretation of the findings of our superficial visual inspection onboard the vessel carried out afloat on the stated dates only. Information gained from the managers and from the crew has also been used but we cannot vouch for its accuracy. No machinery was opened unless stated. Internal tank inspections were carried out but only in the tanks stated. The survey and report were conducted in accordance with our standard terms and conditions. The information contained herein is given in good faith without prejudice and without guarantee."

Liability Clause:

"The Company shall be under no liability whatsoever to the Client for any loss, damage, delay or expenses of whatsoever nature whether direct or indirect (including but not limited to loss of profit) and howsoever arising in the course of performance of the services to be provided.

UNLESS same is proved to have resulted solely from the negligence, gross negligence or willful default of the Company or their employees or agents, or subcontractors employed by them in connection with the ship, in which case (save where loss, damage, delay or expense has resulted from the Company's personal act or omission committed with the intent to cause same or recklessly and with knowledge that such loss, damage, delay or expense would probably result) the Company's liability for each incident or series of incidents giving rise to a claim or claims shall never exceed a total of (say ten?) times the fee payable hereunder."

Name: _____ Signature:  Date: ____/____/____

Trading Name: _____

Email Address: _____ Contact Number: _____

















APPROVED BY
COSPAS-SARSAT

ETSI 300 066
IEC 60945

AS/NZS 4280.1



OPERATING
48 hours minimum at
-20°C to +55°C
(-4°F to +131°F)

STORAGE
-30°C to +70°C
(-22°F to +158°F)

COMPASS
1000 ft

+
REPLACE
after use
or by:
FEB

+
LIS02
2025









