



Have you ever had any marine license refused, withdrawn or cancelled, or been involved in any proceedings where license suspension or revocation has been an issue, **whether such license(s) are currently held or not?**

Yes No NO

(If Yes please provide full details):

Experience/Details of Previous Work Aboard Yachts

Yacht Details:	Make:	Model:	Length:			
Yacht Name:						
Position Held:						
Area Navigated:						
Time Aboard Vessel:	From:	Month:	Year:	To:	Month:	Year:

Yacht Details:	Make:	Model:	Length:			
Yacht Name:						
Position Held:						
Area Navigated:						
Time Aboard Vessel:	From:	Month:	Year:	To:	Month:	Year:

Yacht Details:	Make:	Model:	Length:			
Yacht Name:						
Position Held:						
Area Navigated:						
Time Aboard Vessel:	From:	Month:	Year:	To:	Month:	Year:

Yacht Details:	Make:	Model:	Length:			
Yacht Name:						
Position Held:	CAPTAIN					
Area Navigated:						
Time Aboard Vessel:	From:	Month:	Year:	To:	Month:	Year:





--	--	--	--	--

Loss Record

With respect to each and every vessel listed above, please provide complete answers to each area of inquiry below. If your answer to any of the statements below is none, please state none for each category below.

Damage to the Vessel during your service: Details
(please include vessel name, date of incident, incident location, cause and nature of damage, your role and responsibilities and cost of repairs if known)

Damage to other property (docks, other vessels, environmental resources including pollution and environmental damage): Details
(please include vessel name, name of the third party / entity, date of incident, incident location, cause and nature of damage, cost of repairs and / or any judgments, fines and or penalties imposed, and any case and /or claim details related to each event)

Injury and or death to people (crew, guests, others): Details
(please include vessel name, details regarding person(s) injured and relationship to your vessel (crew, guest, third parties), date of incident, incident location, cause and nature of injury / death, cost of settlement and / or any judgments, fines and or penalties imposed.





Declaration

Have you ever been charged with or convicted of any criminal offence, felony or misdemeanour and / or any other offence which might affect our assessment of the risk?

Yes No NO

(If Yes please provide full details):

Has any application or renewal for a yacht insurance policy been rejected, declined or cancelled where you have been proposed or identified as Captain of that yacht or any other vessel?

Yes No NO

(If Yes please provide full details):

To the best of my knowledge and belief the information provided in connection with this resume, whether in my own hand or not, is true and I have not withheld any material facts*. I understand that non-disclosure or misrepresentation of a material fact* may entitle underwriters to void the insurance.

***A material fact is one likely to influence acceptance or assessment of this proposal by underwriters and/or the terms of insurance offered and/or agreed.; if you are in any doubt as to whether a fact is material or not you must disclose it.**

This resume and the information provided in connection therewith contain statements upon which underwriters will rely in deciding to accept this insurance and/or the terms upon which terms of this insurance may be offered and/or agreed..

Signed:	Full Name	Date:
---------	-----------	-------

References as Captain or Crewmember





Spheric Assurance Company, Ltd.