



Ocean Marine Division
 65 Broadway
 New York City, NY 10006

Marine Commercial Liability – Supplementary
 Information for Shiprepairer’s Legal Liability
 This is not a Binder

Note: This information supplements the following ACORD Applications, which must also be completed and included:

1. Acord Form 125: Commercial Insurance Application.
2. Acord Form 126: Commercial General Liability Section Application.

Application Information

Yes No

Name of Applicant _____

Location of the yard(s): _____

Total number of years in business (if less than five, please include number of years experience of principals in this industry): _____

Nature of repair/maintenance operations:

Boiler	
Engine	
Hull	
Electrical	
Welding	
Tank Cleaning (ex. gas freeing)	
Plumbing	
Gas freeing	
Painting	
Number of Gas Freeing operations annually	
Other	

Other description: _____

If applicant engages in “Gas Freeing” operations, is certification conducted by a Marine Chemist prior to “Hot Work”? Yes No

Does applicant operate yard vessels, drydocks, marine railways or graving docks? Yes No

If yes, give specifications:

Type, size, average and maximum value of vessels repaired: _____

Average and maximum number of vessels in yard at any one time: _____

Number of vessels repaired last 12 months and estimated next 12 months: _____

Application Information Continued

Yes **No**

Do you use temporary workers?	<input type="checkbox"/>	<input type="checkbox"/>
Percentage of total workers: _____		
If yes , are there hold harmless/indemnity agreements in place in your favor?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , are waivers of subrogation in place in your favor?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , are certificates of insurance obtained showing limits equal to or greater than yours?	<input type="checkbox"/>	<input type="checkbox"/>
Do you use leased workers?	<input type="checkbox"/>	<input type="checkbox"/>
Percentage of total workers: _____		
If yes , are there hold harmless/indemnity agreements in place in your favor?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , are waivers of subrogation in place in your favor?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , are certificates of insurance obtained showing limits equal to or greater than yours?	<input type="checkbox"/>	<input type="checkbox"/>
Do you use subcontractors?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , are there hold harmless/indemnity agreements in place in your favor?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , are waivers of subrogation in place in your favor?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , are certificates of insurance obtained showing limits equal to or greater than yours and naming you as an Additional Insured?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , what percentage of your work is subcontracted?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , what type of work is subcontracted and who supervises that work?	<input type="checkbox"/>	<input type="checkbox"/>

Approximate percentage of repair conducted outside yard: _____

Locations:

Does applicant engage in building, rebuilding or conversion of vessels?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , provide details include Vessel Construction Supplemental Information:		

Gross receipts (all operations):

Type of Work	Last 12 Months	% Marine	Next 12 Months	% Marine
Total:				

Application Information Continued

Yes

No

Please list the five principal entities for which work was performed in the past two years. Please include the entity, type of work performed, and gross receipts for each.

Do you enter into contracts with customers that contain hold harmless or indemnity agreements in the favor of the customer?

If yes, please list the customers and indicate the percentage of total receipts that the customer(s) represents:

Are you required to name any of your customers or other parties as Additional Insureds and waive subrogation?

If yes, please list them and their relationship to you:

If you own, charter, lease or operate watercraft, are they covered by a Protection & Indemnity policy?

If no, please provide details:

Describe yard and building fire protection and security:

Please provide a sketch or drawing of the premises:

Application Information Continued

Yes **No**

Contact and phone number to arrange a yard inspection: _____

Has any policy or coverage been declined, cancelled or non-renewed during the past five years?

If yes, provide details:

Loss History (Please list all Vessel Construction and Commercial General Liability losses that have occurred over the past five years and attach hard copy loss runs):

No known or reported losses in the past 5 years.

Date of Loss	Description of Loss	Loss and Expense Deductible	Loss and Expense Paid	Loss and Expense Outstanding	Total Claim (net of Deductible)

Producer remarks:

Signing this application does not bind you to purchase the insurance or the Company to accept the risk. However, if you do elect to purchase insurance from the Company and the Company binds the risk, it is agreed that this application forms part of the policy issued by the Company and that underwriters rely on the information provided to determine acceptability, premium charge and coverage. It is further understood and agreed that any misrepresentation or omission shall constitute grounds for immediate cancellation of coverage and/or denial of any claim.

Applicant Signature _____

Producer Signature _____

Company Title _____

Company Title _____

Date _____

Date _____

Additional Comments

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. (Applicable to New York State only.)

Signing this application does not bind the Applicant to purchase the insurance or the Company to accept the risk, but it is agreed that this application shall be the basis of the contract should a policy be issued.