

APPLICATION FOR INSURANCE FOR INLAND P. & I. *(one form per vessel)*

To: RaetsMarine Insurance B.V., Rotterdam, in their capacity as authorized underwriting agents for Swiss Re International S.E., Nederlandse vestiging (hereinafter called: "the Company").

The undersigned herewith confirm acceptance of the Company's terms and conditions, as agreed. The undersigned has duly completed the Company's questionnaire, the contents of which will form part of the insurance contract.

Name of vessel			
Type of vessel			
Tonnage		DWAT	
Flag		Year built	
Classification society			
Europe number			
Number of crew including Master		Nationality	
Number of family on board incl. Children			
Vessel's market value in EURO			
Last Special Survey past (month/year)			
Outstanding class items	YES / NO	If YES, copy of Classification Society's written evidence of outstandings to be enclosed herewith	
Vessel forms part of a fleet	YES / NO	If YES, the insurance will be subject to the Company's terms about Fleet Insurance	
Name of mortgagee (if applicable)			
Date of inception			
Type of insurance	PROTECTION & INDEMNITY – Class 1 YES / NO	MARINE DEFENCE (F.D.&D.) – Class 2 YES / NO	

Name of Assured (registered Owner)	
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CONTACT DETAILS of the Ship Manager		
To be included in insurance policy as (please choose between Joint- and Co-Assured as per attached explanation)	JOINT ASSURED as per Section 11.1 of Policy wording	CO-ASSURED as per Section 11.2 of Policy wording
Name of company		
Name of individual involved with insurance and claims		
AOH and mobile numbers		
Full address		
City incl. postal code		
Country		
Telephone number		
Fax number		
E-mail address		

CO-ASSURED(S)	
Name	
Identity	

Date of application	
Signed by	
Capacity	
Signature	

Upon receipt of a duly completed and signed of the original of this Application Form the Company will issue the Certificate of Insurance.