

## Hurricane Questionnaire/plan

<b>Assured Name:</b>		<b>Policy No:</b>	
<b>Name of vessel:</b>		<b>Policy Period:</b>	

1. Name, address and contact details of marina or residence where vessel is located between 1<sup>st</sup> July and 1<sup>st</sup> of November, if you are unable to provide an address please give Longitude & Latitude:

2. In the event of a storm warning will the vessel be:      a) Afloat                      b) Ashore

3. If anyone, other than yourself, has authority to inspect the vessel &/or move it in your absence in order to protect it from danger please advise the name of such person and their relationship to you (for example: neighbour or marina manager).

4. Please provide full details of your plan for protecting the vessel in the event of any storm warning, for example the use of lines/ropes. (Use a separate sheet if necessary).

5. Please supply details of your back up plan (in the event you are prevented from implementing your initial plan)

**WARNING:**

**It is hereby warranted that in the event of a named or numbered storm warning or advisory issued by any competent local authority, I/we will secure the above vessel and/or its equipment in accordance with the representations stated above including, but not limited to, the removal and storage of Bimini and dodgers, top canvas, removable enclosures, loose upholstery, cushions, roller furling headsails, sails, outriggers and antennas life rafts, hard or rubber tenders.**

**I declare that the particulars and answers contained in this form are correct and complete in every respect. I agree that this declaration and warranty shall be incorporated in its entirety into any relevant policy of insurance.**

**Assured Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_