



UNITED INDIA INSURANCE COMPANY

Regd. Office: 24, Whites Road, Chennai –

600017

MARINE HULL PROPOSAL FORM (FOR INLAND VESSEL/DREDGERS)	
PROPOSER'S DETAILS	
NAME OF THE PROPOSER	
ADDRESS OF THE PROPOSER	
	TEL.
STATE WHETHER THE PROPOSER IS THE OWNER/MANAGER/BAREBOAT CHARTERER	
IF THE PROPOSER IS A MANAGER/BAREBOAT CHARTERER THEN OWNERS' DETAILS	NAME OF THE OWNER
	ADDRESS OF THE OWNER
	TEL.
VESSEL PARTICULARS	
NAME OF VESSEL	
FLAG OF VESSEL	
TYPE OF VESSEL (AS REGISTERED)/PURPOSE USED FOR	
GROSS REGD. TONNAGE	
PLACE WHERE BUILT	
MATERIAL OF WHICH BUILT	
IF BUILT OF WOOD STATE WHETHER COPPER SHEATHED OR NOT	
IS THE VESSEL MECHANISED OR NON MECHANISED	
VESSEL BOTTOM SPECIFICATION	<input type="checkbox"/> SINGLE <input type="checkbox"/> DOUBLE
DOES THE VESSEL HAVE COLLISION BULKHEAD	YES/NO
NO OF ENGINES	<input type="checkbox"/> SINGLE <input type="checkbox"/> DOUBLE



UNITED INDIA INSURANCE COMPANY

Regd. Office: 24, Whites Road, Chennai –

600017

DOES THE VESSEL HAVE VER COSTLY MACHINERY CRANES ETC	HAVE VER SUC Y H AS	YES/NO
YEAR OF BUILT		
PORT OF REGISTRY		
REGISTRATION NUMBER		
BY WHOM, WHERE AND WHEN WAS THE VESSELS LAST SURVEYED		
IS THE VESSEL BUILT AS PER IRS CLASSIFICATION		YES/NO
IS THE VESSEL MAINTAINED AS PER IRS CLASSIFICATION		YES/NO
IS THE VESSEL LICENSED OR APPROVED BY ANY LOCAL AUTHORITY.		YES/NO
HULL AND MACHINERY INSURANCE COVER		
PROPOSED SUM FOR INSURANCE		
CONDITIONS OF INSURANCE (TICK THE REQUIREMENT)	<input type="checkbox"/> Time Clauses Hulls dt <input type="checkbox"/> Institute <input type="checkbox"/> e 1.10.83	
	<input type="checkbox"/> Institute Time clauses Hulls dt 1.10.83 with clause 8 amended to include 4/4ths Collision Liability	
	<input type="checkbox"/> Institute Time Clauses Hulls dt 1.10.83 extended to include Protection and Indemnity risks as per clause 9 of the Institute Hulls Port Risks clause dt 20.07.87.	
	<input type="checkbox"/> Institute Time Clauses Hulls dt 1.10.83 with clause 8 amended to include 4/4ths collision liability and to include Protection and Indemnity risks as per clause 9 of the Institute Hulls Port Risks clause dt 20.07.87.	
	<input type="checkbox"/> Institute Hulls Port Risks dt 20.7.87	



**UNITED INDIA INSURANCE COMPANY
LIMITED**

	<input type="checkbox"/> Institute Hulls Total Loss only (including salvage, salvage charges and sue and labour) dt 1.10.83
	<input type="checkbox"/> Institute Hulls TL, GA, 3/4ths Collision liability (including Salvage, salvage charges and sue an labour) dt 1.10.83
STATE THE GEOGRAPHICAL LIMITS REQUIRED (TICK THE REQUIREMENT)AND THE NAME OF THE PORT	<input type="checkbox"/> Vessel plying only within the port limits of _____(name of Port) with leave to proceed not beyond 12 N.M. from the Prominent Point of the harbor/port as designated by Port Authorities/Custom Authorities/Local Authorities.
	<input type="checkbox"/> Vessels plying on one coast e.g. East or West Coast of India (Vessels plying in more than one port on either coast will be deemed to by plying on the entire coast
	<input type="checkbox"/> Vessels plying on the East and West Coasts of India
	<input type="checkbox"/> For Vessels plying on one port East of Tuticorin and one port West of Tuticorin
IS THE VESSEL USED FOR PILOTING/TOWING INCOMING OR OUTGOING VESSELS	YES/NO
IS THE VESSEL USED FOR SALVAGE OPERATIONS	YES/NO

INCREASED VALUE/DISBURSEMENT INSURANCE COVER (OPTIONAL)

SUM PROPOSED FOR INSURANCE (NOT TO EXCEED 25%OF THE H&M SUM INSURED)	
SRCC COVER	
DO YOU WANT SRCC COVER?	YES/N O

FINANCIER



**UNITED INDIA INSURANCE COMPANY
LIMITED**

NO OF FINANCIERS	
THE FOLLOWING DETAILS TO BE GIVEN FOR EACH FINANCIER SEPARATELY	
NAME OF THE FINANCIER	
ADDRESS OF THE FINANCIER	
GENERAL	
NO OF INLAND VESSELS OWNED BY YOU	
PREMIUM /CLAIMS IF ANY FOR THE PAST 5 YEARS FOR THIS PARTICULAR VESSEL	IF YES PLEASE GIVE US THE DETAILS IN A SEPARATE SHEET
PREMIUM/CLAIMS IF ANY FOR THE PAST 5 YEARS FOR THE FLEET AS WHOLE	IF YES PLEASE GIVE US THE DETAILS IN A SEPARATE SHEET
OTHER BUSINESS FROM PROPOSER	
Has any Company or insurer in respect of any the risk to which this proposal applies-	
A	Declined to insure you?
B	Refused to renew your insurance?
C	Increased your premium on renewal?
Is the vessel at present insured with any other insurer? If so, please give name of the insurer and brief details of the cover.	



UNITED INDIA INSURANCE COMPANY LIMITED

DECLARATION

I/we the undersigned, hereby declare that the above statements, and particulars are true and complete and further declare that I/We have not withheld any information which is calculated to influence the decision of the Company in accepting the insurance and agree that this declaration shall be the basis of the contract between me/us and UNITED INDIA INSURANCE COMPANY LTD.

(SIGNATURE OF THE PROPOSER)

Date

Place

AGENT'S REPORT

I know the Proposer for _____ years.
I recommend acceptance of the proposal as
the moral hazard is satisfactory.

(SIGNATURE)

The liability of the Company does not commence until the acceptance of the proposal has been formally intimated by the Company and the premium is received by the Company.

Statutory Warning (Section 41 of Insurance Act, 1938 – Prohibition of Rebates)

a. No person shall allow or offer to allow either directly or indirectly as an inducement to any person to take out or renew or continue insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the prospectus or tables of the Insurers.

b. Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to ten lakh rupees.