

## CAPTAIN'S QUESTIONNAIRE

### INSURED INFORMATION

Named Insured: \_\_\_\_\_ Policy Number: \_\_\_\_\_

### CAPTAIN'S INFORMATION

Captain's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Citizenship: \_\_\_\_\_

### GENERAL INFORMATION

1) PRIOR VESSELS OPERATED AS CAPTAIN

VESSEL NAME	LENGTH	MAKE	DATES OF SERVICE	NAV AREA(S)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

2) Have you ever had or been involved in any losses or claims?  No  Yes If yes, provide details:  
 \_\_\_\_\_  
 \_\_\_\_\_

3) Are you employed full time solely for the benefit of this yacht and no other with no other outside employment?  No  Yes  
 If no, please explain all other business or employment below.  
 \_\_\_\_\_  
 \_\_\_\_\_

4) Have you ever been arrested or convicted of any crime including DUI?  No  Yes If yes, provide details:  
 \_\_\_\_\_  
 \_\_\_\_\_

5) List all licenses, certificates and related qualifications: (Attach copy of license(s).)  
 \_\_\_\_\_  
 \_\_\_\_\_

You understand and agree this application is a request for a quote based on the information provided herein. You understand and agree the actual coverage, terms and conditions offered by MPG may be different than your request contained herein. The actual terms and conditions for coverage provided are represented by the policies issued and supersede any request or representations made prior to issuance.

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.

The applicant represents that the above statements and facts are true and that no material facts have been suppressed or misstated.

Signature

Date

Print Name

Title