



UNITED INDIA INSURANCE COMPANY LIMITED
Regd. Office: 24, Whites Road, Chennai – 600017

MARINE HULL PROPOSAL FORM (FOR OCEAN GOING VESSELS)	
NAME OF THE PROPOSER	
ADDRESS OF THE PROPOSER	
	TEL Mobile Email id
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 Mobile Email id
VESSEL PARTICULARS	
NAME OF VESSEL	
FLAG OF VESSEL	
TYPE OF VESSEL (AS REGISTERED)/PURPOSE USED FOR	
GROSS REGD. TONNAGE	
DEAD WEIGHT TONNAGE (MANDATORY FOR TANKERS AND BULK CARRIERS)	
BREAK HORSE POWER (MANDATORY FOR TUGS AND SUPPLY VESSELS)	
PLACE WHERE BUILT	
MATERIAL OF WHICH BUILT	
IF BUILT OF WOOD STATE WHETHER COPPER SHEATHED OR NOT	
YEAR OF BUILT	
PORT OF REGISTRY	



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LLOYDS REGISTER NUMBER	
BY WHOM, WHERE AND WHEN WAS THE VESSELS LAST SURVEYED	
NAME OF THE CLASSIFICATION SOCIETY (TICK THE RELEVANT ONE)	<input type="checkbox"/> Lloyd's Register <input type="checkbox"/> American Bureau of Shipping <input type="checkbox"/> Bureau Veritas <input type="checkbox"/> China Classification Society <input type="checkbox"/> Germanischer Lloyd <input type="checkbox"/> Korean Register of Shipping <input type="checkbox"/> Maritime Register of Shipping <input type="checkbox"/> Nippon Kaiji Kyokai <input type="checkbox"/> Norske Veritas <input type="checkbox"/> Registro Italiano <input type="checkbox"/> Indian Register of Shipping <input type="checkbox"/> Registrar of Shipping USSR <input type="checkbox"/> Polish Registrar of Shipping
IF THE VESSEL IS NOT CLASSED WITH ANY OF THE MENTIONED CLASSIFICATION SOCIETIES THEN STATE THE NAME OF THE CLASSIFICATION SOCIETY WITH THE SYMBOL	
IS THE VESSEL ISM CERTIFIED	YES/NO
HULL AND MACHINERY INSURANCE COVER	
PROPOSED SUM FOR INSURANCE (currency to be mentioned)	
CONDITIONS OF INSURANCE (TICK THE REQUIREMENT)	<input type="checkbox"/> Institute Time Clauses Hulls dt 1.10.83
	<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(Applicable for ocean going vessels plying only in coastal waters)
	<input type="checkbox"/> Institute Hulls Port Risks dt 20.7.87(applicable only when the vessel is trading in one named port)
	<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)
STATE THE GEOGRAPHICAL	<input type="checkbox"/> Vessel plying only within the port limits of



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LIMITS REQUIRED (TICK THE REQUIREMENT)	_____ (name of Port)
	<input type="checkbox"/> Trading limited to East and West Coasts of India, Pakistan, Sri Lanka and Bangladesh
	<input type="checkbox"/> Trading limited to East and West Coasts of India, Pakistan, Sri Lanka, Bangladesh and Burma with liberty to proceed to Maldives, Lakshadweep and Andaman and Nicobar Islands.
	<input type="checkbox"/> Trading limited to not East of 110° East longitude and not West of 30° East longitude.
	<input type="checkbox"/> Trading limited to not East of 180° East longitude and not West of 20° West longitude.
	<input type="checkbox"/> World wide trading. (It is to be noted that certain areas would be excluded under the policy)
	<input type="checkbox"/> Trading within the Exclusive Economic zone of India (applicable for supply/support vessels/tugs
DO YOU WANT COVER FOR LAY UP RETURNS	YES/NO
INCREASED VALUE/DISBURSEMENT INSURANCE COVER (OPTIONAL)	
SUM PROPOSED FOR INSURANCE (cannot exceed 25% of the H&M sum insured)	
FREIGHT INSURANCE COVER (OPTIONAL)	
SUM PROPOSED FOR INSURANCE (Cannot exceed 25% of the sum insured)	
NOTE: THE TOTAL SUM INSURED UNDER INCREASED VALUE AND THE FREIGHT SHOULD NOT EXCEED 25% OF THE H&M SUM INSURED	
WAR COVER	
DO YOU WANT WAR COVER ? (the sum insured would be the total sum insured of H&M and the subsidiary interests)	YES/NO
GENERAL	
NO OF OCEAN GOING VESSELS OWNED BY YOU	
PREMIUM /CLAIMS IF ANY FOR THE PAST 5 YEARS FOR THIS	IF YES PLEASE GIVE US THE DETAILS IN A SEPARATE SHEET



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PARTICULAR VESSEL	
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.	
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.	
Date	(SIGNATURE OF THE PROPOSER)
Place	
AGENT'S REPORT	I have known 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.	
Section 41 of the insurance Act.1938 which is in force from the 1 st July 1939, reads as follow :	
No person shall allow, or offer to allow, either directly, or indirectly as an inducement to any person to takeout or renew, or continue an insurance in respect of risk relating to lives or property in India any rebate of 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 published prospectus or tables of the insurer.	
THE OFFER PAYMENT OR ACCEPTANCE OF A REBATE OF THE PREMIUM HEREUNDER IS THEREFORE A BREACH OF THE LAW	