

Markel American Insurance Company Watercraft Quick Quote Sheet

| | | | | Effective Date: | | | |
|--|---|---|--|--------------------------|-------------------------------|--|--|
| Producer: | | Producer Code: | | City: | | | |
| Producer Email: | | Phone #: | | Fax #: | | | |
| Owner Information | | | | | | | |
| Owner Name: | | | Ownership: | Personal | Corporate | | |
| Date of Birth: | | SS# (optional): | | Mailing Zip Code: | | | |
| Mailing Address: | | | | City/County: | | | |
| Married: Yes | 🗌 No | Homeowner: | Yes 🗌 No | · | | | |
| Boat Information | | | | | | | |
| In Season Location Zip Code | : | Address: | | City: | | | |
| Boat Year: | Length: | Manufacturer: | | Model: | | | |
| Hull Type: | ☐ Airboat ☐ Fishing | ☐ High Perf. Cat ☐ High Perf. V-Hull | PWC Pontoon/Tritoor | Runabout/Spon Homemade / | | | |
| Hull Material: | ☐ Fiberglass ☐ Composite | Aluminum | Uwood Inflatable | Poly Other | | | |
| Number of Engines: | Total Horsepower : | | Speed: | Fuel Type: | Gas Diesel | | |
| Propulsion: | ☐ Inboard ☐ Outboard | ☐ I/O, Sterndrive ☐ Air/Propeller | Jet DriveManual | | | | |
| Primary Navigation Area: | | | | | | | |
| Distance Offshore: | 25 miles (standard) 25 – 50 miles 50 – 75 miles 75 – 100 miles | | | - 100 miles | | | |
| Safety Equipment: | Depth Finder Sea Key Carbon Monoxide Detector VHF Radio Radar Loran, Sat Nav Or GPS High Water Alarm EPIRB Auto Fire Extinguisher In Engine Space | | | | | | |
| Operator Information | | | | | | | |
| Is the owner the Primary Operator? | | Yes No | # | of years Boating Experi | years Boating Experience: | | |
| Motor Vehicle Violations & Accidents (last 3 yrs): | | | | | | | |
| All Marine Losses: | | | | | | | |
| Describe Ownership Experience: | | | | | | | |
| Secondary Operator Name: | | | # of years Boating Experience: | | ence: | | |
| Motor Vehicle Violations & Accidents (last 3 yrs): | | | | | | | |
| All Marine Losses: | | | | | | | |
| Describe Ownership Experience: | | | | | | | |
| Coverages & Limits | | | | | | | |
| Watercraft & Equip. | \$ | Deductible: | □ 1% □ 2% | 3% 4% | 5% | | |
| Settlement Type: | Agreed Value Coverage Actual Cash Value Coverage Replacement Cost Coverage (if < 3yrs) | | | | | | |
| Liability Limit: | \$10,000csi \$25,000csi \$50,000csi \$100,000csi \$300,000csi \$500,000csi \$1,000,000csi | | | | | | |
| Uninsured Boater: | Up to \$500,000 (Incl) Med Pay: \$1K (incl) \$2K \$3K \$4K \$5K \$10K | | | | | | |
| Personal Effects: | □ \$1K (incl) □ \$2K □ \$3K □ \$4K □ \$5K | | | | | | |
| Towing: | \$500 (incl) | \$750 \$1,000 | □ \$2,000 Tra | ailer: \$ (up | to \$7,500, \$500 increments) | | |
| Fishing Equipment: | \$1,000 | \$2,000 \$3,000 | \$4,000 \$5 | ,000 | | | |
| Boat Lift: | \$1,000 | □ \$1,000 □ \$2,000 □ \$3,000 □ \$4,000 □ \$5,000 □ \$6,000 | | | | | |
| To receive an indication of premium, please complete this form in its entirety. Please email or fax the form per the information above. Please note, Markel Boat program is insurance scored. The quote and premium provided are subject to change upon receipt of a complete application and | | | | | | | |

other underwriting documentation appropriate to the risk. Thank you for your inquiry!