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Claim Form Particulars of Accident to Yacht or Motor Boat



	T =
Assured's	Full name of owner
Vessel	Address
	Fax
	Policy No
	What crew was carried?
	Name of vessel
	Licence No Full value
	Who was in charge of your vessel at the moment the accident occurred?
	Give name, addressed and occupation together with particulars of his
Navigator	qualifications and experience in handling craft.
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	DateTime
	Speed of your boat through the water
	Place
	Direction and speed of current
	Depth of water
Details	Did your vessel comply fully with the "Rule of the Road as Sea"
of	T S w S w S w S w S w S w S w S w S w S
Accident	What lights was she carrying?
	Please state purpose for which vessel was being used at time of accident
	Was vessel racing or under starter's orders?
	If vessel is a wreck, give her position as accurately as possible
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	Can she, in your opinion, be salved?
	Explain fully how accident happened (use separate sheet if required)
	Please give sketch (use separate sheet).
	Have you reported to Marine Department of Police? If so please quote the case number.
	In your opinion was the accident caused by the fault of any person other
	than your Navigator? If so, give name, address and occupation of such
	person:
Damage to	Details of damage (a detailed estimate of probable cost of repairs should be sent with
Your Vessel	this report)

Tender	If involved in an accident, was she permanently marked with the name of the parent vessel?
Damage to Third Parties (Persons &	Full details of damage or injury and names and addressed of all persons concerned:
Property)	Have any claims been made on you? If so, state amount
	Names and addresses (it is important that these be obtained).
Witness(es)	Passenger(s) in vessel
	Independent witness(es)
Official Evidence	Did a Coastguard, Harbour Official, or other officer witness the accident or take particulars?
	Where is she now lying and in whose charge?
Repairs to Your Vessel	Is she in repairer's hands
	Do you hold more than one policy indemnifying you in respect of this accident?
Salvage	If any salvage services have been rendered, please give full details thereof, including names of those who rendered same and under what circumstances: -
	Give details of any claim received
	I/We do hereby declare that the foregoing particulars are true and correct in every respect, and that I/We have withheld no information material to the claim, I/We also undertake to render the Company all assistance in my/our power in dealing with the matter.
	Date Signature of Insured

