

Agent Information

Agency Name:	
Agency Code:	
Producer/CSR:	
Phone:	
Email:	
New	Renewal
Policy Number:	



BY COMPLETING THIS APPLICATION, THE APPLICANT IS APPLYING FOR COVERAGE WITH EITHER **COLONY INSURANCE COMPANY** OR **COLONY SPECIALTY INSURANCE COMPANY**, AN AUTHORIZED SURPLUS LINES INSURER OR **ARGONAUT INSURANCE COMPANY** OR **ARGONAUT MIDWEST INSURANCE COMPANY**, A LICENSED INSURER.

Business Trade Name:_

1. What percentage of your operations involve: (Must total 100%)

Watercraft		Maximum Length	Maximum Speed
Personal Use Boats	%	ft	mph
Commercial Use Boats %		ft	mph
Jet Skis, Wave Runners or similar watercraft	%		mph
Watercraft owned by NOAA, US Coast Guard, MARAD, USACE or any other Government agency		ft	mph
Other *	%	ft	mph
Totals	100 %		

*Describe "Other":

2. Type and Percentage of Work Performed (Must total 100%)

Alarms, Stereos, Window Tinting	%	Painting – Interior	%
Bottom cleaning/scrubbing (incl zinc replacement)	%	Painting – Vessel / Bottom Coating	%
Carpentry / Wood Refinish	%	Plumbing – Installation and Repair	%
Cleaning or Detailing work	%	Restoration	%
Custom Building	%	Rigging Work	%
Engine Repair	%	Sail/Canvas Repair	%
Fabrication (Answer Question #6)	%	Sandblasting	%
Fiberglass Repair (Answer Question #7)	%	Shrink Wrapping	%
Flooring	%	Stabilizers/Steering Repair	%
Fuel Cleaning	%	Storage (Complete Storage Facility Questionnaire)	%
Gear/Shaft/Propeller Repair	%	Subcontracted out to others	%
Hull Repair – Other Than Fiberglass (Answer Question #8)	%	Trailer Hitch Installation (Answer Question #11)	%
Hydraulic systems & winch repairs/install (Answer Question #9)	%	Upholstery	%
Insulation / Lagging	%	Winterization of Watercraft	%
Kitchen Appliances / Electric / Heating / Air Conditioning (<i>Answer Question</i> #10)	%	Other*	%

*Describe "Other":

3.	Do you o	wn c	or operate as a marina?	🗌 Yes 🗌 No
4.	Do you re	ent a	ny watercraft to customers?	🗌 Yes 🗌 No
	lf "Yes",	a.	Are rental units separately insured?	🗌 Yes 🗌 No
		b.	Are rental units part of inventory held for sale?	🗌 Yes 🗌 No
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5. Where are applicant's operations performed? (Must total 100%)

Your Shop	%
Customer's Yard	%
Marina	%

6.	What parts, equipment, and a	accessories do you fabricate?		
7.	For fiberglass repair, where a	re resins stored?		
8.	For Hull Repair – Other Than	Fiberglass, provide details of	work performed:	
0	For hydraulia systems 8 wind	h repairs and installation, show	ok all that apply:	
9.	For hydraulic systems & winch repairs and installation, check all that apply:			
	Trailer Winches Sail Booms Cargo Booms/Cranes Cther (describe):			
10			oning exposure, provide details	of technician qualifications
	including experience, training	0	filling exposure, provide details	
	•			🗌 Yes 🗌 No
	If "Yes", a. What is the percentage of this to total work?%			
	b. What type? Ball Hi			
		to the frame?		🗌 Yes 🗌 No
	•	ertified welder?		 □ Yes □ No
10	2. Do you transport any watercraft by vehicle for the purpose of test driving, launching or			
	hauling boats out of the water?			
	lf "Yes",			
		k do you transport watercraft?	·	
	 b. How far from your premis c. Do you have separate co 	ses ? miles verage in place for non-owned	watercraft while in-tow?	🗌 Yes 🗌 No
	•	num value of any single vessel		
13.		drive exposure for owned or c		🗌 Yes 🗌 No
	lf "Yes",	·		
	•	? (refer if more than 5	,	
	-	e for employees to test drive w		
	c. Do you permit customers	to test drive watercraft unacco	ompanied?	🗌 Yes 🛄 No
14.	What are your annual sales to	o customers for each of these	categories?	
	Accessories	\$	Camping Gear	\$
	Parts	\$	Groceries & Supplies	\$

15. Is there any personal use of owned Boats or Watercraft?

THIS SUPPLEMENTAL APPLICATION IS INCORPORATED BY REFERENCE INTO THE PRIMARY APPLICATION

APPLICANT'S SIGNATURE	DATE