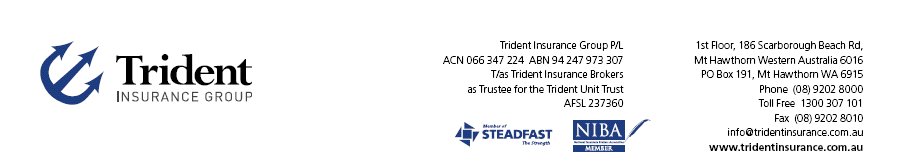
**MARINE COMBINED LIABILITY - QUOTE REQUEST**

**FULL INSURED NAME**

**BROKER****INSURER****EXPIRY DATE**

**CONTACT**      **PHONE NUMBER**     

**EMAIL****YEAR BUSINESS ESTABLISHED**?     

**BUSINESS ADDRESS**

**AVERAGE SIZE VESSEL WORKED UPON & TYPE (Pleasure/Commercial/Fishing/Navy)**

**HOW MANYYEARS EXPERIENCE IN THIS INDUSTRY**

**CURRENT INSURER:****EXPIRY DATE**

# BUSINESS ACTIVITIES ( full description)

LOCATION OF WORK

If outside Australia please advise countries and percentage split

**LIABILITY ( $10 Mill is minimum)**

Limit of Liability (Any one Occurrence) $

Number of employees (Including proprietors/ Directors)

Estimated Annual Gross Turnover $

Marine       Non Marine      **please advise %**

**Split per division**

Manufacture $      Sales $

Service & Repairs & installation $

Imports$      Which countries

Exports $      Which countries

USA Exports Yes / No please advise %

**CLAIMS EXPERIENCE ( LAST 5 YEARS)**

**Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**