

MARINE HULL INSURANCE APPLICATION FORM

A. The Insured's information

The insured			
Address			
Telephone	Email	Tax code	
Business field			

B. Insurance coverage

Information of Ship	Name of Ship	:	Port of Registry	:
	Nationality	:	Gross Tonnage	:
	Year & Place of Build	:	Deadweight	:
	Register No.	:	Type of Ship	:
	Call sign/ IMO No.	:	Classification	:
	Material	:		
	Ship value	Hull..... %	Machinery.....%	Equipment.....%
Sum insured				
Enter with club				
Trading Limit				
Coverage	<input type="checkbox"/> Institute Time clauses hulls – time			
	<input type="checkbox"/> Institute voyage clauses – hulls			
	<input type="checkbox"/> Institute time clauses – hulls total loss only			
	<input type="checkbox"/> Institute war and strikes clauses hulls – time			
	<input type="checkbox"/> Others:			

C. Insurance period

From hour minutes,	Date:	To hour minutes,	Date:
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D. Other information

Mode of Payment	<input type="checkbox"/> Bank transfer	<input type="checkbox"/> Cash at the Company	<input type="checkbox"/> Cash via Agent or Sales staff
Language of the Policy	<input type="checkbox"/> English	<input type="checkbox"/> Vietnamese	

E. Declaration

(1) We hereby declare that the statements made by us in the Application Form are complete and true to the best of our knowledge and belief, and we hereby agree that this Application Form shall form the basis and be part of any Policy of Policies issued in connection with the above risk or risks.
 The Insured undertakes to inform the Insurers of any material alteration whereby the risk is increased, and the Insurers reserve the right to modify any quotation made in the light of such alteration.

(2) According to Item a Clause 2 Article 19 of Law on Insurance Business: "An insurer shall have the right to suspend unilaterally the implementation of an insurance contract and to collect the insurance premium up until the time of suspension of implementation of the insurance contract, upon one of the following acts being committed by the purchases of insurance:
 a) Intentionally providing false information with the aim of entering into an insurance contract in order to be paid insurance proceeds indemnity;"

(3) The Insurance Policy is valid subject to the Insurer's agreement

Date (dd/mm/yyyy)

Signature of the Insured & Company Stamp

* Documents attached:

- Nationality cert.
- Classification cert.
- Seaworthiness cert.
- Certificate of Registry
- Others documents:.....

Application type	<input type="checkbox"/> New	<input type="checkbox"/> Renewal	Channel:	Code/ name of seller:
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