



### Application and Broker Appointment

1.  Yacht Hull Insurance     Yacht Liability Insurance     Yacht Passenger Accident Insurance

All insurance policies listed here are legally autonomous and independent of one another.

2. **Applicant**

Surname, First name  Date of birth

Street, House number  Telephone

Post code  City  Fax

E-mail

Nationality  Profession  Club / association

3.  **Motor yacht** Name of yacht  Yacht type  Manufacturer

**Sailing yacht** Flag  Registration  Material/mast

Does the vessel have carbon components?  yes  no If yes, which?  Manufacturer/year of construction

a) **Vessel**

Year of construction	Construction no.	Port of Registry	Material	Length o.a. m	Width m	Draught m	Sail area on a close reach m <sup>2</sup>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Purchase price EUR		Purchase date	Extra equipment acquired by application date EUR				

b) **Engines**

Make of engines	Type of engines	Engine number	Year built	Power	Diesel	Petrol	Max. speed
<input type="text"/>	<input type="checkbox"/> Built-in engine	<input type="text"/>	<input type="text"/>	KW/ HP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/> Built-in engine	<input type="text"/>	<input type="text"/>	KW/ HP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/> Outboard engine	<input type="text"/>	<input type="text"/>	KW/ HP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

c) **Tender / dinghy** Manufacturer  Year built  Material

d) **Other tender** Manufacturer  Year built  Material

e) **Road trailer** Manufacturer  Year built  Chassis no.

4. **Travel area**

European Inland waters  
 Northern European waters 45° - 63° N and 10° W to 25° E  
 Mediterranean waters

Other waters:

5. **Mooring**

Summer (address): Country  Post code  Town

Winter (address): Country  Post code  Town

6. **Owner / Use**

Are you the owner of the vessel?  yes  no If not, in what capacity are you applying for the insurance?

Do third parties have rights to the vessel?  yes  no If yes, which?

Is it chartered?  yes  no  without skipper  with skipper

Take part in regattas?  yes  no How often per year?

7. **Previous Insurance**

If previous insurance exists: Insurer  Policy no.  Last No-Claim Bonus  %

Was the insurance cancelled by the previous insurer?  yes  no

8. **Previous Claims** Claims (number, type, level) in the last 5 years

9. **Yacht Hull Insurance**

Please enter amounts insured separately	Amounts insured EUR	
a.) Yacht (§1, para. 1 of yacht hull insurance conditions)	<input type="text"/>	<input type="text"/>
b.) Outboard engine	<input type="text"/>	<input type="text"/>
c.) Tender (dinghy)	<input type="text"/>	<input type="text"/>
d.) Other tender	<input type="text"/>	<input type="text"/>
e.) Road trailer	<input type="text"/>	<input type="text"/>
f.) Pers. effects (max. EUR 2,500)	<input type="text"/>	<input type="text"/>
<b>Total sum EUR</b>	<input type="text"/>	<input type="text"/>
	<b>Excess EUR</b>	<b>Annual premium EUR, incl. fee and insurance tax</b>
	<input type="text"/>	<input type="text"/>

<b>10. Yacht Liability Insurance</b>	<b>Amount covered per insured event</b>	<b>Annual premium EUR, incl. fee and insurance tax</b>
	<input type="checkbox"/> EUR 5,000,000 lump sum for personal injury and material damage,	
	<input type="checkbox"/> EUR 10,000,000 lump sum for personal injury and material damage,	
	<input type="checkbox"/> Up to EUR 15,000,000 on request	

<b>11. Yacht Passenger Accident Insurance</b>	<b>Death (lump sum)</b>	<b>Invalidity (lump sum)</b>	<b>Hospital daily allowance with verb. convalescence allowance (lump sum)</b>	<b>Annual premium EUR, incl. fee and insurance tax</b>
	<input type="checkbox"/> EUR 25,000	EUR 50,000	<input type="checkbox"/> EUR 25	
	<input type="checkbox"/> EUR 50,000	EUR 100,000	<input type="checkbox"/> EUR 38	
	<input type="checkbox"/> EUR 75,000	EUR 150,000	<input type="checkbox"/> EUR 50	
	<input type="checkbox"/> EUR	EUR	<input type="checkbox"/> EUR	

<b>12. Calculating Premium / Payment Method</b>	<input type="checkbox"/> Annual	Yacht Hull insurance	EUR
	<input type="checkbox"/> Biannual (3 % surcharge)	Yacht Liability Insurance	EUR
	<input type="checkbox"/> Quarterly (5 % surcharge)	Yacht Passenger Accident Insurance	EUR
		Yacht Legal Protection Insurance	EUR
		<b>Insurance premium, incl. fee and insurance tax</b>	<b>EUR</b>

**13. Start of Insurance / Duration**

Start (midday 12:00 hrs) \_\_\_\_\_ Minimum duration 12 months

The insurance can begin at the earliest on the date the application is received at Wehring & Wolfes GmbH.  
The policy is extended by one year in each case, unless it is terminated in writing at the latest 3 months before the end of each period.

**14. Special Agreements** \_\_\_\_\_

**15. Time for Acceptance / Basis of Policy**

Before signing this application, please check that all details are complete and accurate.  
The insurer can accept this application within a period of 1 month. The applicant's right to cancel materialisation of the policy in accordance with § 8 VVG remains unaffected.  
The insurance policies are agreed according to the offer and Wehring & Wolfes' insurance conditions in the offer. The German Insurance Act (VVG) applies. German law applies.  
The insured agrees that the broker stores data under the framework of the German Data Protection Act (BDSG) and forwards these to the participating insurers.  
You can find more information on this on the sheet on data handling in the offer.

**Broker Appointment**

Wehring & Wolfes (W & W) is tasked with procuring and managing the agreed yacht insurance policies. This includes in particular constant checking of policies for expedience and premium structure.  
W & W takes on processing the insurance policies in coordination with the client as the representative of the client's interest toward the insurers.  
W & W is obligated to forward all disclosures and expressions of will from the client to the insurer immediately. W & W is authorised to accept the insurer's declarations to the client and is obligated to inform the client of these.  
Moreover, W & W is authorised to terminate and reinsure insurance policies wholly and partially in agreement with the client.  
W & W is tasked with procuring the insurance cover from one or several insurers of its choice. Additionally, W & W supports the client in handling loss events. All business dealings, particularly correspondence and transactions are handled via W & W. W & W forward all premiums requested for payment to the insurer.  
This contract starts on the date of signature and is agreed for an indefinite period. It can be terminated by either side with a notice period of 3 months before the end of the insured year.

**Signatures**

_____	_____	_____
Place / date	Broker	Applicant

**16. Direct Debit Authorisation:**

I hereby revocably authorise you to take insurance premiums by direct debit when they are due:

_____	_____	_____
Name of credit institution, place	Account no.	Sort code
_____	_____	_____
Account holder, Surname / first name	Place / date	Signature

**Note:**

**Responsibility for the application:** The applicant is responsible for the accuracy and completeness of details in the application, even if another person sets them down in writing. Dashes or other marks or blank answers count as negation.

**Obligation to disclose:** The applicant is obligated to disclose to Wehring & Wolfes GmbH all circumstances relevant to taking on the insurance cover and to answer the questions in the application completely and truthfully; changes to the risk circumstances or the risk conditions, which occur after this application is signed, but before the policy is agreed, must also be communicated immediately (prepolicy obligation to disclose). Breaching this obligation can entitle the insurer to decline insurance cover.