The Power Front Ship Owner Mutual Insurance Association
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APPLICATION FORM

Hull Insurance Application

Application for Hull & Machinery insurance.

1 Assured and Co-Assured Applicant Details

Assured Details [all fields must be completed]

Full Corporate Name*		
Registered Number		
Name of Business Registry		
VAT / Tax Identification Number		
Insured Capacity (eg Registered Owner, Bareboat Charterer)		
Trading Name (if different)		
Registered Address	1	
	2	
	3	
	4	
Principal Place of Business (if different to above)	1	
	2	
	3	
	4	
Name of Contact		
Position / Title		
Email Address		
Phone Number		
Parent Company Name (if applicable)		
Parent Registered Number		

*Invoices for calls and premiums will be issued in the above Member's name. Members and Joint Members are jointly and severally liable for Calls and other sums due to the Association.

Co-Assured Details [all fields must be completed]

Co-Assured Name	
Capacity	
Trading Name (if different)	
Registered Number	
Name of Business Registry	
VAT / Tax Identification Number	

Registered Address	1	
	2	
	3	
	4	

2 Vessel Details

Name of Vessel		IMO Number	
Gross Tonnage		Type of Vessel	
Call Sign		Vessel Flag	
Port of Registry		Classification Society	
Year Built			
Owner		Manager	
Insured Value		Insured Amount	
Trading Limit			
Period or Voyage of Insurance			
Relationship between the assured and vessel	☐ Registry Shipowner	☐ Commercial Manager	
Coverage			
Terms and Conditions			
Former Underwriter and Loss Record of Vessel			

Documentation to be provided

1. Business License and other certified documents of ship owner, manager or other legal entity related.
2. Documents of ship, including but not limited to nationality certificates, international tonnage certificate, classification certificate for hull, classification certificate for machinery.
3. Former underwriter and loss record of fleet.

For underwriter use

Rate		Premium	
Deductible		Payment of Premium	

The Insured declaration: I/We hereby declare that the Insurer has provided a detailed description of the terms which this insurance applies. The Insurer has also made it clear which the exemptions involve (including but not limited to exclusion, the duties of Insured and the Insurer, claim and indemnity, and other matters), as well as the terms of premium and other special agreement. I/We fully understand and accept the above. I/We voluntarily sign the insurance contract based on the terms and conditions above.

Signature	
Date	

3 Vessel Certificates

Please fill in the items hereunder, subject to the type and conditions of the insured vessel. If there are any remarks or notes in any certificates, please declare them in the remark column.

Certificate	Classification Society	Issued On	Closing Date	Remark
Registry Certificate				
Classification Certificate For Hull				
Interim Classification Certificate For Hull				
Classification Certificate For Machinery				
Interim Classification Certificate For Machinery				
International Tonnage Certificate				
International Load Line Certificate				
Cargo Ship Safety Construction Certificate				
Cargo Ship Safety Equipment Certificate				
Cargo Ship Safety Radiotelegraphy Certificate				
Certificate For Cargo Gear				
Fitness Certificate				
International Oil Pollution Prevention Certificate				
Navigation Safety Certificate				
International Ship Security Certificate				
Safety Management Certificate				
Document of Compliance				
Minimum Safe Manning				