



MARINE RISK SOLUTIONS INC
Republic of Panama , Panama City, Registration Nbr. 605848-1302174

APPLICATION FORM – P&I INSURANCE

Date: _____

SECTION 1

1. Applicant: _____

2. Applicant's name and address: _____

3. Name of principal(s) and/or owner(s) and/or managers: _____

4. Principal(s) and/or owner(s) and/or manager(s) experience: (please provide on separate page)

5. Name of present/latest P & I Insurer: _____

6. P&I Loss Records for the last 5 years if it's available: (please provide on separate page)

7. ISM CODE:

7.1. Does the vessel(s) have valid Safety Management Code?, when/by whom issued: _____

7.2. Whether the Assureds have valid documents of compliance?, when/by whom issued?:

8. Specify navigational limits required: _____

9. Specify required insurance period: _____

10. Limit of coverage required (USD / EUR): _____

SECTION 2

1. Vessel's name (ex name)/ IMO number: _____

2. Hull sum (USD /EUR): _____

3. Flag: _____

4. BLT.: _____

5. Classification society: _____

6. Type of the vessel: _____

7. GRT: _____

8. NRT: _____

9. Port of register: _____

10. Date of the last P&I condition survey of the vessel(s): _____

11. Please specify main types of cargo carried: _____

SECTION 3

REQUIRED SCOPE OF COVER

Does the Applicant require P & I full P&I cover (including 4/4 RDC, cargo, pollution, wreck removal risks, crew liability etc.)? Yes / No

If YES – please provide us with copy of the current contract of employment along with the following info:

1. Total maximum number of crew on board:

Officers (Desk & Engine):
- Ratings:

2. Nationality of crew:

Does the Applicant require limited P & I insurance? Yes / No

If YES – please specify below required risk: _____

On behalf of Applicants: _____ (_____)
Stamp Signature