

## **Supplementary Sheet**

## **Captain Charter**

- 1. Please describe in full the nature of the charters undertaken, including all activities made available to passengers.**
  
  
  
  
  
  
  
  
  
  
- 2. Please advise the number of years the Insured has been undertaking these charter voyages:**  
**In Total: \_\_\_\_\_ From this location: \_\_\_\_\_**
  
  
- 3. Do you supply food &/or drink to passengers?**  
**If so, do you serve alcoholic drinks?**  
**Do you carry separate liquor liability?**  
**If so please advise carrier & limits:**
  
  
  
  
  
  
  
  
  
  
- 4. Do you have a website? If so please supply web address:**
  
  
  
  
  
  
  
  
  
  
- 5. Please advise last annual receipts.**
  
  
- 6. Do you require any hold harmless from passengers?**  
**If so please supply a copy.**
  
  
  
  
  
  
  
  
  
  
- 7. Will you require additional assureds to be named?**  
**If so please supply a list of additional assureds.**

## Supplementary Sheet

## Crew

1. **Please advise how many paid crew you employ including Captain (if any). Please include employees working on the vessel in any capacity.**
  
2. **Please advise if these are full time or part time and in what other capacities they are employed by you.**
  
3. **Please advise the maximum number of crew that would be on the vessel at any one time.**
  
4. **Are the crew in your full time employee or hired on a per charter basis?**
  
5. **Are you aware of any pre-existing injury or medical condition with regard to any employed crewperson or employee working on this vessel in any capacity?**
  
- 6) **If this vessel is engaged in recreational diveboat charter: Please advise if any crew/employee insured under this policy is required to perform any in water duties or assist in any dive instruction.**