

# Yacht Hull Claim Form /0415

## Instructions in case of an insured event

1. Please describe the course of events leading up to the occurrence of the damage and attach preliminary repair estimates and photos of the damage. Where damage is caused by collision, we additionally require a detailed sketch of the course of events.
2. Please note that you may not assign your claims against the insurers to third parties without the insurers' prior consent. For larger claims, you may request part payments from us.
3. Where the incident is reported to the police (Article 11 para. 1 sentence 4 PYHC [Pantaenius Yacht Hull Clauses]), a complete list of the stolen goods, including each individual distinguishing mark and serial number, must be handed over to the police without delay. Please forward a copy of the police report to us.
4. Please note that you may only make the necessary arrangements for repair once you have given the insurer sufficient opportunity to inspect the damages.
5. Additional instructions may moreover be given in the actual individual case.

Claim No.:

Policyholder:

Name/Company:

Address:

Daytime telephone no.:

Mobile:

E-mail:

Policy No.:

Customer No.:

Type of vessel:

Name of vessel:

Hull No.:

Year of construction:

Brief description of the loss occurrence:

Grounding

Stranding

Collision with:

Fire/Explosion

Lightning

Broken Mast

Capsizing

Sinking

Damage in transit

Theft

Other:

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Loss location (place/country/location)

Date of loss:

Time (local):

Weather:

Wind speed and direction:

Swell:

Visibility:

Skipper at the time of the occurrence of the damage:

Address/e-mail/phone:

Skipper's licence(s) (type/number):

Number of crew members:

Was the craft chartered at the time of the damage?

- Yes, bareboat charter     Yes, skipper charter     No

Estimated amount of the claim:

Please attach a preliminary estimate/price list and photos

Where can the craft be inspected by an expert?

Other craft involved in the accident:

Type/name of craft and, if appropriate, registration:

Owner and skipper (name/address/phone/e-mail):

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Witnesses to the accident (name/address/phone/e-mail):

Damage caused to the other craft:

With which company is the opposing party's craft insured? (name, address, policy no.)

Has a competent authority drawn up a certified record?

 Yes No

If so, please provide the name, address and file reference. If appropriate, attach the certified record:

Is your craft registered in a register of shipping?

 Yes No

If so, at the District Court:

SSR<sup>1</sup> /BSR<sup>2</sup> No.:

Is the craft free from third-party rights?

 Yes No

If not, which third-party rights?

Are you entitled to input tax credit for this claim?

 Yes No

<sup>1</sup>Register of Sea-Going Vessels

<sup>2</sup>Register of Inland Waterway Craft

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Bank account with (financial institution):	
Sort Code:	Account No.:
IBAN:	Swift/Bic-Code:
Account holder:	

Description of the course of events leading up to the occurrence of the damage, either here please or on a separate sheet. Attach an accident sketch and photos of the damage. If the policyholder did not himself pilot the craft at the time of the occurrence of the damage, this description must be given by the pilot responsible for the craft. Please note also item I of our instructions in case of an insured event.

**Please note that whenever an insured event occurs, you must provide complete and true information. The insurers would point to the fact that in case of a breach of the existing obligation to provide information or explanations, there is a risk that they would be released from the obligation to provide benefits. Where a third party is entitled to the benefits payable under the contract rather than you, the said third party is equally obliged to provide information and explanations.**

Place, Date:	Signature of Policyholder:	Skipper:
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