

Watercraft Questionnaire

Full Name (First, MI, Last):	
Phone Number & Email Address:	
Home Address:	(Also Prior if < 60 days):

Please provide the following information for **EACH DRIVER** of the watercraft:

Name:	
Date of Birth:	
Marital Status:	
Driver's License Number:	
Accidents, Tickets, Claims & Violations in <u>5</u> years:	
Years of boating experience:	
Safety Course Completed- Type & Date:	

Boat/Motor/Trailer Information:

Boat Year, Make & Model:	
Boat Type (fish, sail, speed, etc):	
Hull Material:	
Length:	
Boat Value (Does this value include the motor?):	Is this the current Market Value OR the Purchase Value including tax & title fees?
Motor Type (Inboard, Outboard, In/Out):	
Motor Year, Make & Model:	
Motor Value (if not included boat value):	
Horsepower:	
Maximum Speed:	
Enhanced Performance Modifications:	
Additional motors:	
Trailer Year, Make & Model:	
Trailer Value:	
Value of Boating Accessories (depth finder, fish finder, trolling motor, etc):	
Value of Boating Equipment (skis, tubes, etc):	
Value of Fishing Equipment:	
Year you purchased the boat:	Original Owner?
Where is the boat kept during boating season?	Parking Lot/Lift/In Water/Yard/Driveway/Garage/Other:
Where is the boat stored during the off season?	Storage Building/Storage Yard/Rack Storage/Lift/In Water

Current Insurance Info:

Current Insurance Company & Due Date:	
List ALL coverages:	BI/PD: Comp Deductible:
	Med Pay: Collision Deductible:
	UM/UIM BI: UMPD:
	Other Coverages:
Loss Settlement Type:	Total Loss Replacement/Agreed Value/ACV

If not insured, please list reason & date coverage went out of force:

Additional Info:

Do you own a home or rent?	
Boat Association Memberships:	

Date Completed: _____ Completed By: _____ Referred By: _____

If you have a copy of your current "Declaration Page", please forward that to us as proof of prior coverage and to use for comparison purposes.

Submission of information for a quote in no way binds coverage. Personal information will be used solely for underwriting purposes. Submission of information gives the Gary J Bach Agency permission to run all reports necessary to quote accurate insurance premiums.

Please return this form to Gary J Bach Agency 1107 N Blackhawk Blvd Ste A Rockton, IL 61072

Fax: 815-624-0673 Email: GJB@BachInsurance.com or Call: 815-624-0663