

COMMERCIAL MARINE LIABILITY

STEVEDORE'S LIABILITY INSURANCE APPLICATION SUPPLEMENT

WHEN FILLING OUT THIS APPLICATION, ALL QUESTIONS MUST BE ANSWERED COMPLETELY, IF A QUESTION IS NOT APPLICABLE TO THE OPERATIONS OF THE COMPANY, PLEASE STATE "N/A". IF THE ANSWER IS NONE, STATE "NONE". IF MORE SPACE IS REQUIRED TO ANSWER A QUESTION COMPLETELY, PLEASE ATTACH A SEPARATE SHEET AND IDENTIFY THE QUESTION TO WHICH IT RESPONDS. LEAVE NO SPACE BLANK.

1. **NAME OF APPLICANT:** _____

2. **ADDRESS OF LOCATION:** _____

3. **PLEASE ADVISE THE AMOUNT OF STEVEDORING GROSS RECEIPTS FOR THE LAST 2 YEARS, & YOUR PROJECTION FOR THE NEXT 12 MONTHS:**

YR ___ : _____ YR ___ : _____ & PROJECTED YR ___ : _____

4. **TYPE OF CARGO HANDLED:**

(a) NON-CONTAINERIZED CARGO

	TONNAGE	% OF TOTAL
DRY BULK (SPECIFY)		
BREAK BULK (SPECIFY)		
SCRAP METALS		
STEEL		
AUTOMOBILES / VEHICLES (NUMBER OF UNITS)		
MACHINERY / ELECTRONICS		
REFRIGERATED CARGOES		
LIQUID CHEMICALS		
BULK MINERAL OILS		

(b) CONTAINERIZED CARGO:

	TONNAGE	% OF TOTAL
20 FT. CONTAINERS		
40 FT. CONTAINERS		
OTHER SIZES (SPECIFY)		

(c) OTHER (SPECIFY TYPE)

	TONNAGE	% OF TOTAL

5. **DO YOU OWN OR LEASE THE TERMINALS YOU SERVICE?** _____

IF YOU LEASE, WHO DO YOU LEASE FROM & WHAT LIABILITIES DO YOU ASSUME UNDER THE LEASE AGREEMENT?

6. **CARGO HANDLING EQUIPMENT:**

DOES THE APPLICANT USE SHIP OR DOCK GEAR? SHIP _____ DOCK _____

(a) IF SHIP'S CREW OPERATE SHIP'S EQUIPMENT, UNDER WHOSE DIRECTION DO THEY OPERATE?

(b) IF APPLICANT OPERATES DOCK GEAR, IDENTIFY THE TYPE OF GEAR USED, WHETHER IT IS OWNED, LEASED OR RENTED, & WHO PROVIDES THE EQUIPMENT:

7. **MISCELLANEOUS:**

(a) DOES THE APPLICANT EVER PERFORM LIGHTERAGE OPERATIONS? YES/NO_

IF "YES", SHOW PERCENTAGE: _____%

(b) DOES THE APPLICANT OPERATE UNDER WRITTEN CONTRACTS? YES/NO_

IF "YES", ARE THERE ANY HOLD HARMLESS AGREEMENTS? YES/NO

IF "YES", DOES THE APPLICANT ASSUME LIABILITY BEYOND THAT IMPOSED BY LAW? YES/NO

PLEASE EXPLAIN ALL "YES" ANSWERS GIVEN ABOVE:

(c) DOES THE APPLICANT CONTRACT IN INDEPENDENT STEVEDORES? YES/NO_

IF "YES", WHAT % OF STEVEDORING GROSS RECEIPTS ARE DERIVED THERE FROM? _____%

SIGNING THIS APPLICATION DOES NOT BIND THE APPLICANT NOR THE INSURER TO THE INSURANCE, BUT IT IS AGREED THAT THE STATEMENTS CONTAINED IN THIS APPLICATION SHALL FORM THE BASIS ON WHICH THIS POLICY IS ISSUED, AND THE APPLICANT WARRANTS ALL SUCH STATEMENTS TO BE TRUE TO THE BEST OF ITS KNOWLEDGE AND BELIEF.

PRODUCER'S SIGNATURE: _____ DATE: _____

APPLICANT'S SIGNATURE: _____ DATE: _____

PRINT: _____ TITLE: _____