

RE: MARINE CLAIM LETTER

Dear Sirs,

Please find enclosed claim form in respect of the recent loss. Please note the following:

1. We require a completed claims form, all sections answered in full. Including:
 - The date and time the damage was incurred,
 - The location of the vessel when the damage was incurred,
 - Details of who was in control of the vessel at the time the damage was incurred,
 - Details of the current location of the vessel,
 - Details of any recovery action that may have already been undertaken,
 - Details of any other vessels or parties who may have been involved,
 - Details of any police or emergency services involvement,
 - Details of any injuries that may have been incurred arising out of or in connection with the incident.

You may also be required to provide proof of ownership and such other documentation (i.e. registration papers, survey papers etc.) to establish the bona fides of your claim.

Note that your Insurer may decide to appoint a surveyor to establish the quantum of loss in a claim of this nature, so **you should not authorise repairs to the vessel or move the vessel to another location without the written consent of your Insurer**. If you do not have the agreement of insurers you risk prejudicing your claim.

In order to refer to underwriters and consider appointing a loss assessor/ surveyor, we require the completed claim form and estimates (where appropriate). We will not appoint someone until these are received.

2. It is also your duty as an insured to mitigate your losses. You must take all reasonable steps to prevent further loss/ damage from occurring. This is a condition of your policy.
If the engine has been submerged, then action must be taken to try and preserve it.
3. We require written quotations for the repairs/ replacement from the repairer proposed to carry out the work. This should be from a reputable marine repairer capable of doing the job.

As part of our service to assist you we will also be asking our panel of repairers if they would like to quote for the work.

The amount approved for the repairs (if applicable) will form the basis of settlement subject to the terms and conditions of your policy.

Neither Yachtsman, underwriters, nor surveyor/ assessors appointed by them will instruct repairers directly. If repairs are in order then the instruction to proceed, based on a quantified amount will go to you. It is then up to you to instruct the repairers of your choice as you see fit.

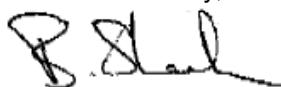
4. If the loss is as a result of a theft, then the CRIME REF /PULSE ID obtained from the Gardai should be provided and the following advised
 - Details of the location and date/time of the vessel when stolen.
 - Full details of any anti-theft devices in place.

Address: College Road, Clane, Co. Kildare. **Telephone:** 045 982668 **Fax:** 045 902983.

5. If the loss was as a result of a criminal act (other than theft) then full details should also be obtained where possible, reported to the Gardai and the CRIME REF/ PULSE ID advised.
6. If the incident involves a third party **please enclose any original correspondence unanswered from the Third Party, his / her agent or solicitor.** Obtain details of:
 - The incident
 - Name and contact details of Third Party
 - Witnesses if any
 - Protest Committee Decision (if applicable)
7. You can at any time appoint your own loss assessor/ surveyor to handle your claim, but the cost of this will be at your own expense.

We look forward to hearing from you and if you need any advice do not hesitate to contact us.

Yours sincerely,



Brian Sheehan
Email: brian@yachtsman.ie

Address: College Road, Clane, Co. Kildare. **Telephone:** 045 982668 **Fax:** 045 902983.

J O'Neil (Insurances) ltd t/a Yachtsman Euromarine, Yachtsman Marine Insurance, Yachtsman Seguro de Barcos is regulated by the Central Bank of Ireland.
Company Reg. No. 48019 Matthew McGrory (Managing Director) Jennifer McGrory (Director)

25/03/2014 Brian Sheehan

MARINE CLAIM FORM



CLAIMANT DETAILS

Policy No	
Full Name	
Business or Occupation	
Address	
Telephone	
Mobile	
Email	
Are you registered for VAT	YES / NO
If so please advise the VAT registration no	

VESSEL DETAILS

Name of Vessel	
Age of Vessel	
Full Value	
Type of Vessel (Make, Model etc)	
Crew Carried?	
For what purpose was the vessel used at the time of the accident?	

ACCIDENT DETAILS [Note theft is a separate section below]

Date and time of accident:	
Who was in charge of your vessel at the moment the accident occurred?	
Cause:	
Place of Occurrence:	
Was the vessel racing at the time?	
Please state Weather conditions / wind direction / Beaufort Scale Force	
<i>Explain fully how events giving rise to your claim occurred. Include details such as speed, depth of water etc (if necessary please use a separate sheet and provide a sketch if appropriate). If your vessel was moored at the time please include when there was someone aboard the boat last and the circumstances of the discovery of the loss.</i>	
Passengers in Vessels (include all names and addresses (use separate sheet if necessary))	
Independent Witnesses (include all names and addresses (use separate sheet if necessary))	

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DAMAGE SUSTAINED BY YOUR CRAFT

Was an Engine cut-out device in operation at the times of the accident?	YES / NO
If 'NO' please provide details as to why not	
What was done to minimise the loss or Damage	
Where can the craft be inspected?	
Please provide the Name, Address and Telephone no. of your chosen repair yard.	

Please supply a written quotation for the repairs of your vessel from a competent professional repairer asap.

DAMAGE TO THIRD PARTY VESSELS

Give full details of damage or injury including Names and Addresses of all persons concerned	
Amount of claim on you?	

Note: If you have received notification of a claim from a third party in respect of loss or damage, please forward full details to us immediate. You should not enter into any correspondence with any third party. You should not disclose that you have insurance cover, admit liability, or make any promise of payment.

DETAILS OF THEFT

Date and time of occurrence				
Place of occurrence				
When was craft last seen?				
How was the theft discovered?				
Please give name and address of person who discovered the theft?				
How was entry made into the storage area?				
Describe the security precautions or anti-theft device(s) were fitted to the craft and trailer:				
Address and tel number of Garda Station to which the loss has been reported along with Crime Ref. number.				
Item stolen	Manufacturer	Age of Item	Replacement cost	Amount claimed

I/We declare that the above answers and particulars are true and complete in every respect and that there is no other insurance in force covering my/our liability.

I/We agree for the claim to be dealt with under Yachtsman euromarine's delegated claims authority if appropriate.

IMPORTANT: No payment, settlement or admission of liability must be made without the consent of the company. Every notice written or verbal or any claim or legal proceedings must be forwarded to the company immediately. Do not acknowledge it yourself.

Signature of Insured:Date.....

Signature of Person in charge of vessel.....Date.....

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