

## RESUME OF PERSONAL BOATING EXPERIENCE

Please complete all sections

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_

Drivers License Number \_\_\_\_\_ State \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Occupation \_\_\_\_\_

Years of titled boat ownership \_\_\_\_\_

Prior boats you have **OWNED**:

<i>Year</i>	<i>Length</i>	<i>Manufacturer</i>	<i>Model</i>	<i>Speed (MPH)</i>	<i>Hours of experience</i>	<i>Dates operated (from year)</i>	<i>Dates operated (to year)</i>

Prior boats you have **OPERATED**:

<i>Year</i>	<i>Length</i>	<i>Manufacturer</i>	<i>Model</i>	<i>Speed (MPH)</i>	<i>Hours of experience</i>	<i>Dates operated (from year)</i>	<i>Dates operated (to year)</i>

List all waters or areas you have navigated: (Atlantic, Great Lakes, Bays, Bahamas, Caribbean, etc.)

\_\_\_\_\_

List Licenses, Boating Courses, Boating Education Classes, etc. completed (if none, write "None"):

\_\_\_\_\_

List all marine insurance claims and/or prior marine loss history (if none, write "None"):

\_\_\_\_\_

**I HEREBY AFFIRM THAT ALL STATEMENTS MADE HEREIN HAVE BEEN ANSWERED TO THE BEST OF MY ABILITY AND ARE TRUE. I UNDERSTAND THAT MARKEL AMERICAN INSURANCE COMPANY IS RELYING ON THIS DOCUMENT IN THE UNDERWRITING OF THE POLICY.**

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_