



**Questionnaire and Application Form for Owners & Charterer's P&I**

We are pleased that you have shown an interest in the BE&O, in order that we are able to provide you with the best P&I coverage, tailor made for your operations. We kindly request that you complete the following Application Form, and then send it via fax or email to the P&I Managers.

**Company Information**

<b>Your Company logo</b>	<b>Name of Company</b>	
	<b>Address</b>	
	<b>Telephone No's</b>	
	<b>Fax No's</b>	
	<b>Email</b>	
	<b>Website</b>	

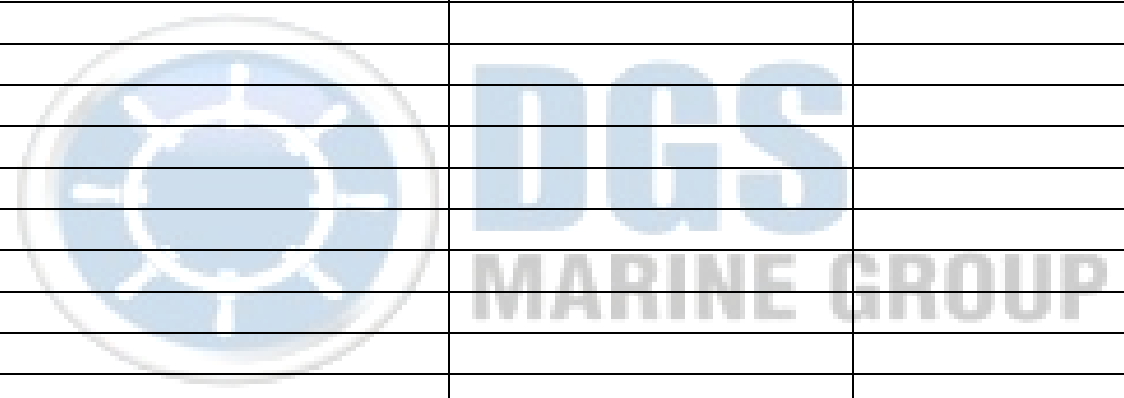
<b>Senior Management, General Manager, Operation Manager and Superintendent</b>		
<b>Name</b>	<b>Position</b>	<b>Experience &amp; Education</b>

**MANAGERS: DGS MARINE MANAGEMENT SERVICES**  
 UK Address:- St. Michael's Rectory, St. Michael's Alley, Cornhill, London EC3V 9DS.  
 Tel: +44 (0) 207 283 4230. Fax:- +44 (0) 207 626 0396  
 Registered No. 6554300  
 Denmark Address:- Fyrrevaenget 13, 4700 Naestved, DENMARK.  
 Tel: +45-55-77-59-19. Fax: +45-55-77-81-68.  
 Mobile 0044 (0) 7710087014  
 Registered No. 0170366  
 EMERGENCY 24 HOUR HOT-LINE 0044 (0) 7944020973

The British European & Overseas P&I  
**P&I/ CHARTERER'S LIABILITY and FD&D**



List of Vessel(s) currently owned and/or Managed			
No.	Name	Type	Flag
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			



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Vessel Information			
<b>Name</b>		<b>IMO No.</b>	
<b>Company Position</b>			
<b>Type</b>		<b>GT</b>	
<b>Flag</b>		<b>DWT</b>	
<b>Year Built</b>		<b>LOA</b>	<b>meter</b>
<b>Port of Registry</b>		<b>Beam</b>	<b>meter</b>
<b>Class Society</b>		<b>Draft</b>	<b>meter</b>

Cargo Information	
<b>Container Capacity</b>	
<b>Truck / Car Capacity</b>	
<b>Types of Cargo</b>	

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Passenger Information	
<b>Number of Passengers</b>	
<b>Nationality of Passengers</b>	
<b>Please send a copy of the ticket and/or relevant carriage contract by Fax or Email</b>	

Crew Information	
<b>Number of crew on board</b>	
<b>Nationality of crew</b>	
<b>The period of time for the two longest serving officers &amp; rating on board</b>	

ISM Information	
<b>Expiry date</b>	<b>(dd-mm-yy)</b>
<b>Granted by</b>	
<b>Please send a copy of the DOC by Fax or Email</b>	

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<b>Vessel Market Value</b>
<b>US\$</b>

<b>Type of Cover Required</b>	
<b>P&amp;I</b>	<b>FD&amp;D</b>
<b>Date for the insurance to commence (dd/mm/yy)</b>	

<b>P&amp;I Risks to be Carried</b>	
<b>Cargo Liability</b>	<b>Yes or No</b>
<b>Passenger Liability</b>	<b>Yes or No</b>
<b>Crew Liability</b>	<b>Yes or No</b>
<b>Liability to Persons other than crew</b>	<b>Yes or No</b>
<b>Collision/RDC/FFO</b>	<b>1/4th or 4/4ths</b>
<b>Stowaways &amp; Refugees</b>	<b>Yes or No</b>
<b>Life Salvage</b>	<b>Yes or No</b>
<b>Quarantine Expenses</b>	<b>Yes or No</b>
<b>Wreck Removal</b>	<b>Yes or No</b>
<b>Liability arising out of Towage</b>	<b>Yes or No</b>

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<b>Cargo's proportion of GA</b>	<b>Yes or No</b>
<b>Ship's contribution of GA</b>	<b>Yes or No</b>
<b>Pollution Risks</b>	<b>Yes or No</b>
<b>Fines</b>	<b>Yes or No</b>
<b>Confiscation due to violation of Customs</b>	<b>Yes or No</b>

<b>Limit of Liability Required</b>
<b>If less than US\$ 5 Million, please specify.....</b>
<b>US\$ 5 Million</b>
<b>US\$ 10 Million</b>
<b>US\$ 15 Million</b>
<b>US\$ 20 Million</b>
<b>US\$ 25 Million</b>
<b>US\$ 50 Million</b>
<b>US\$ 75 Million</b>
<b>US\$ 100 Million</b>
<b>If you require more than US\$ 100 Million, please specify.....</b>

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<b>Deductibles</b>				
<b>If you require a higher or lower deductible than mentioned below, please fill the required deductible</b>				
			<b>Standard</b>	<b>Required</b>
<b>Cargo</b>	<b>Bulk</b>		<b>US\$ 17,500.00</b>	
	<b>Reefer</b>		<b>US\$ 20,000.00</b>	
	<b>Steel</b>		<b>US\$ 25,000.00</b>	
	<b>Oil/Chemical</b>		<b>US\$ 30,000.00</b>	
	<b>Other</b>		<b>US\$ 15,000.00</b>	
<b>Collision/RDC</b>	<b>1/4</b>		<b>US\$ 30,000.00</b>	
	<b>4/4ths</b>		<b>US\$ 45,000.00</b>	
	<b>FFO</b>		<b>US\$ 45,000.00</b>	
	<b>Crew</b>		<b>US\$ 7,500.00</b>	
	<b>Stowaways</b>		<b>US\$ 17,500.00</b>	
	<b>Pollution/Fines</b>		<b>US\$ 25,000.00</b>	
	<b>Special Comp P&amp;I CI (Scopic)</b>		<b>US\$ 100,000.00</b>	
	<b>Actual or Constructive TCL</b>		<b>US\$ 115,000.00</b>	
	<b>All other claims</b>		<b>US\$ 12,500.00</b>	

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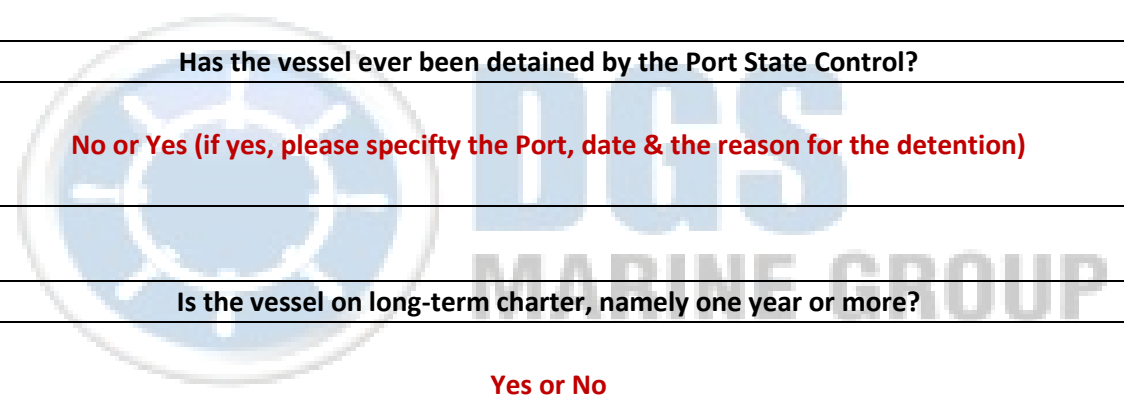
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<b>Trading Area</b>

<b>Has the vessel ever been detained by the Port State Control?</b>
<b>No or Yes (if yes, please specify the Port, date &amp; the reason for the detention)</b>

<b>Is the vessel on long-term charter, namely one year or more?</b>
<b>Yes or No</b>



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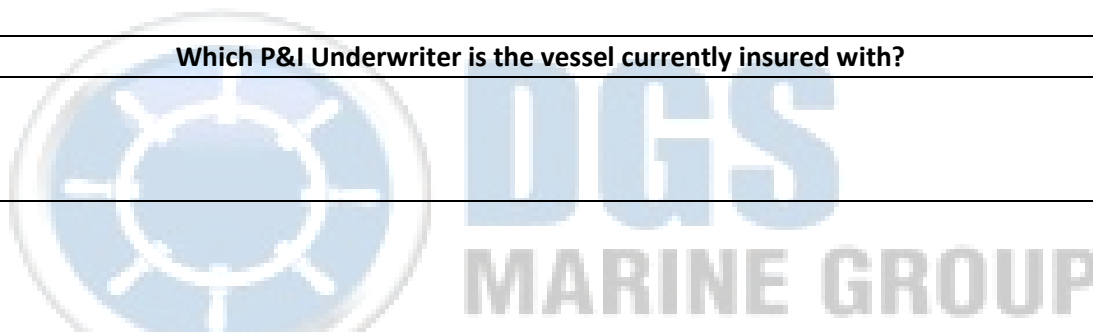
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<b>Which H&amp;M Underwriter is the vessel currently insured with?</b>

<b>Which P&amp;I Underwriter is the vessel currently insured with?</b>



**General Information**

<b>Are you involved in Tamp or Line Services (or both)</b>
<b>Tamp (Yes or No) Liner (yes or no)</b>

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Quality Assurance Certificate	
Type	
Granted by	
Date obtained	
Expiry date	

Do you issue your own Bills of Lading?
Yes or No
If yes, are the bills of lading covering pre-carriage or onward carriage of cargo by other means rather than a ship Yes or No (if yes, please specify the area of the multimodal transport)

Has insurance coverage ever been denied to you or any affiliated Company, or has any insurance contract been cancelled?
Yes or No (if yes, please explain)

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Claims Experience											
<b>P&amp;I Losses</b>											
Year	No of Vsl Entered		Total tonnage	P&I Premium		M/F	P&I Claims Paid		P&I Claims O/S		
2004											
2005											
2006											
2007											
2008											
2009											
Please indicate for each policy whether a fixed (F) or mutual (M) premium is applicable, and if you have zero claims please enter zero											

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Claims Experience

Claims Experience												
<b>FD&amp;D Losses</b>												
Year	No of Vsl Entered		Total tonnage		FD&D Premium		M/F		FDD Claims Paid		FD&D Claims O/S	
2004												
2005												
2006												
2007												
2008												
2009												

**Please indicate for each policy whether a fixed (F) or mutual (M) premium is applicable, and if you have zero claims please enter zero**

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Claims Frequency						
Losses						
Year	Cargo	Crew	Collision	Others	Pollution	FD&D
2004						
2005						
2006						
2007						
2008						
2009						

Please indicate for each policy whether a fixed (F) or mutual (M) premium is applicable, and if you have zero claims please enter zero

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Major Events			
Date of incident	Vessel	Est claim cost	Brief description of incident

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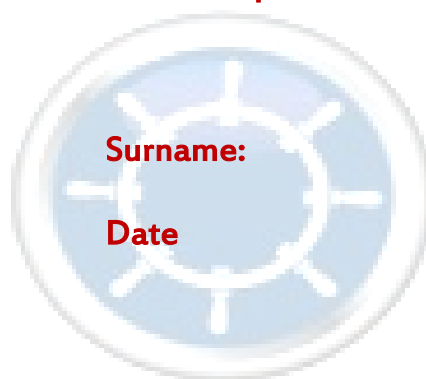
**Declaration**

We hereby declare that the above information and answers given by us in the aforementioned document is correct to the best of our knowledge and belief. We further, confirm that we have not misstated or suppressed any information or material that could affect the risk/s, when the P&I Managers of the British European & Overseas P&I are assessing P&I coverage for the above vessels.

**Signed by:**

**First Name:**

**Position**



**Surname:**

**Date**



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