

TRI-MARINE ACCEPTANCES (PTY) LTD

Company Registration No: 2012/089555/07

Marine Insurance Specialists

W: www.trimarine.co.za | FSP No: 44286

A: Unit UF02, Lionshead House, Greenford Office Estate, Punters Way, Kenilworth, 7700.

T: +27 21 701 8023

E: info@trimarine.co.za

SMALLCRAFT VALUATION BREAKDOWN FORM

SECTION A: INSURED'S DETAILS				
INSURED'S FULL NAME:				
NAME OF OWNER (IF NOT THE INSURED):				
I.D NUMBER/CO REG NUMBER:				
VESSEL MAKE:				
VESSEL NAME:				
INSURANCE BROKER:				
<p>Completing this form allows us to obtain a detailed valuation of your vessel, including all fittings, equipment, and accessories. This ensures that the sum insured accurately reflects the true value of your vessel, enabling more precise cover and faster claims handling in the event of loss or damage.</p>				
SECTION B: VESSEL VALUATION				
<p>For the purposes of this Proposal Form and any subsequent Policy issued hereunder, the following expressions shall have the meanings set out below unless the context otherwise requires:</p> <p>"Agreed Value" means the value of the Vessel as stated in the Policy Schedule, agreed between the Insured and the Insurers as the basis of settlement in the event of a total or constructive total loss. In such event, Insurers shall pay the Agreed Value, less any applicable deductible. Insurers may, at their discretion, take possession of the salvage and all relevant documentation, but there shall be no right of abandonment to Insurers. This provision shall not apply to partial loss or damage, where Insurers may repair, replace, or make good the loss as they deem expedient.</p> <p>"Market Value" means the reasonable cost to replace or reinstate the Vessel or item with one of the same make, model, age, and condition immediately prior to the loss or damage, having regard to prevailing market conditions at the time of loss.</p> <p>"New Replacement Value" means the current cost to purchase a new Vessel or item of the same or similar type, specification, and capacity at the time of loss or damage.</p>				
SECTION	VALUE			
HULL	Agreed Value	Market Value	New Replacement Value	TOTAL
(Please specify the value to be insured)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
MAST, SPARS, STANDING & RUNNING RIGGING	Agreed Value	Market Value	New Replacement Value	TOTAL
Main Sail:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Tri Sail:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Genoa:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
No 1 JIB:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
No 2 JIB:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
No 3 JIB:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Storm JIB:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Spinnaker Heavy:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R

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Spinnaker Light:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Asymmetrical:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Other: (Please Specify)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
ELECTRONIC NAVIGATIONAL EQUIPMENT ON BOARD: (Subject to receipt of a fully valued inventory)		Agreed Value	Market Value	New Replacement Value	TOTAL
Chart Plotter:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
AIS Transponder:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
VHF Radio:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Radar:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Auto Pilot:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Ship Compass:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Barometer:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Ship Clock:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Other: (Please Specify)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
OTHER EQUIPMENT	TYPE	Agreed Value	Market Value	New Replacement Value	TOTAL
Water maker:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Battery Bank:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Solar Panels		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Inverter:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Roller Furler:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
Sea Anchor:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
INBOARD / MAIN ENGINE:		Agreed Value	Market Value	New Replacement Value	TOTAL
Value:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
OUTBOARD ENGINE:		Agreed Value	Market Value	New Replacement Value	TOTAL
Value:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
DINGHY/TENDER:					
Value:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
TRAILER:					
Value:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
FIRE FIGHTING APPARATUS:					
Value:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R

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SECTION C: DECLARATION AND CONSENT

DECLARATION

I/We declare that the information and answers given in this form are true to the best of **my/our** knowledge and belief and that **I/We** have not mis-stated or suppressed any material facts that might influence the assessment of the risk. **I/We** also understand that the completion of this form does not bind insurers or mean **I/We** will accept this insurance but, if terms are agreed, it will form part of the contract.

GENERAL POPI CONSENT CLAUSE

By submitting this proposal, **I/We** consent to the collection and processing of the personal or business information provided for the purposes of assessing, underwriting, and issuing an insurance policy. The Parties acknowledge that such processing may be required for the performance of a contract, compliance with legal obligations, or the legitimate interests of the party responsible as contemplated under POPIA.

I/We consent to the sharing of this information with insurers, reinsurers (including those situated outside the Republic of South Africa), underwriting managers, administrators, service providers, and other relevant parties necessary to complete the underwriting process or meet legislative requirements. Cross-border transfers will comply with POPIA's requirements for adequate data protection.

I/We understand that **I/We** may request access to, correct or delete information, or object to its processing via email, telephone, SMS, WhatsApp, or any communication method permitted under the amended POPIA Regulations.

Where direct marketing is applicable, **I/We** understand it will only be sent if **I/We** provide explicit and recorded consent, as required by POPIA. "Opt-out" options do not constitute valid consent.

NAME OF SIGNATORY:

SIGNATURE:

DATE: