



27068 La Paz Road #556 · Aliso Viejo · CA · 92656
Ph: 866-728-9757 Fax: 888-992-3335
stacy@wakezoneinsurance.com
CA License 0H05075 NPN 15887758

BOAT INSURANCE - QUOTE APPLICATION

Insured's Information

Titled Owner's Legal Name _____ Contact Phone Number _____ Contact Email Address _____ Date of Birth _____
Mailing Address _____ City _____ State _____ Zip Code _____

Vessel Information

Vessel Purchase Date _____ Purchase Price _____ Trailer Year _____ Trailer Manufacturer _____
Year Built _____ Length _____ Manufacturer _____ Model _____ Hull Material _____ Vessel Type _____
of Engines _____ Year of Engines _____ Engine Manufacturer _____ Total Horsepower _____ Top Capable Speed _____
Are the engines supercharged? YES NO Does the boat have a fume detector installed? YES NO
Engine type? _____ Does the boat have a fixed fire system installed? YES NO

General Information

Storage/Mooring City & State _____ Zip Code _____ Storage type _____ Layup Dates (mm/dd/yy to mm/dd/yy) _____
Is this a new purchase? YES NO If no, name of current carrier and annual premium: _____ \$ _____
Do you store your boat in FL for winter? YES NO Do you have a paid crew for your boat? YES NO
Is your boat your permanent residence? YES NO Is any operator under the age of 25? YES NO
Is this for business or commercial use? YES NO What waters do you boat in? _____
Any DUI, reckless driving, or other major MVR violations in the past 5 years? YES NO
Any minor MVR violations in the past 3 years? YES NO
Do you have any marine insurance losses in the past 5 years? If yes, provide brief description of what happened, year, and amount paid out: _____

Boating Experience

Years Ownership _____ # Years Boating _____ Boating safety course for which you can provide a certificate. If Other, please list: _____
Please list the previous boats titled to you, not including the boat we are quoting below from present to past:
YEAR LENGTH MANUFACTURER MODEL # YEARS OWNED

Coverage Options

Hull & Machinery Value \$ _____ Requested Deductible _____ Requested Liability Limit _____
Trailer Value \$ _____

Note: Uninsured Boater, Medical Payments, Personal Property, Towing and Assistance, and Pollution limits are predetermined and can be modified prior to binding

Comments or Notes to Agent

Please include questions/comments here. If necessary, please include claim and/or MVR details, or list additional named operators (w/DOB) →

How did you hear about us?
