

### **HURRICANE QUESTIONNAIRE / PLAN**

<b>Insured:</b>		<b>Policy No:</b>	
<b>Name of Vessel:</b>		<b>Policy Period:</b>	

1. Where will the vessel be between 1<sup>st</sup> July and 1<sup>st</sup> of November?
  
2. If vessel is laid up will it be:                      a) Afloat                      b) Ashore
  
3. Name, address and contact details of marina or residence where vessel is located between 1<sup>st</sup> July and 1<sup>st</sup> of November, if you are unable to provide an address please give Longitude & Latitude:
  
4. If the vessel will be afloat between 1<sup>st</sup> of July and 1<sup>st</sup> of November please give full details of your plan for protecting the vessel in the event of any storm warning, including intended places of refuge, mooring and/or anchoring arrangements and how the vessel will be secured. (Use a separate sheet if necessary.)
  
5. Please supply details of your back up plan (in the event you are prevented from implementing your initial plan).
  
6. If the vessel will be laid up ashore between 1<sup>st</sup> of July and 1<sup>st</sup> of November will the vessel be supported by props chained and/or welded together professionally?  
  
   a) Yes    b) No
7. Please list below all other measures being taken to protect the vessel in the event of a storm (please give details)?

Signed: \_\_\_\_\_

Date: \_\_\_\_\_