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**HARBORGUARD**

### HarborGuard Program Application

Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Location 1: \_\_\_\_\_

Location 2: \_\_\_\_\_

Location 3: \_\_\_\_\_

Business Description:  
.....  
.....

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Manager: \_\_\_\_\_ Phone: \_\_\_\_\_

Effective Date: \_\_\_\_\_ Email: \_\_\_\_\_

Years of prior marine experience, if any? \_\_\_\_\_

How long has present ownership managed this risk? \_\_\_\_\_

Has the insured ever filed for bankruptcy?  Yes  No

#### Gross Receipts

Slip Rental	_____	Restaurant / Snack Bar	_____
Storage	_____	Hotel / Campground / Cabins	_____
Hauling/Launching	_____	Parts & Accessories	_____
Boat/ Motor Repair (labor)	_____	Ship's Store	_____
Fueling	_____	Boat Sales	_____
Boat Rental	_____	Other	_____
Total Marine Receipts	_____	Total Misc Receipts	_____

State period of seasonal operation, if any: \_\_\_\_\_

During closed period what steps are taken to protect premises  
\_\_\_\_\_

Any tenant operation present (restaurant operator, hotel operator, etc)  Yes  No

How long has tenant managed the operation \_\_\_\_\_

Do you require proof of insurance from tenant?  Yes  No

Body of water \_\_\_\_\_

Who governs this body of water? (Corp of Engineers, TVA, etc) \_\_\_\_\_

**Is there a SLIP RENTAL OPERATION on premises?**

Yes  No

No. of Slips \_\_\_\_\_ No. Rented \_\_\_\_\_

No. of Docks \_\_\_\_\_ No. Covered \_\_\_\_\_

Type of Moorings \_\_\_\_\_ No. Rented \_\_\_\_\_

Do you obtain proof of insurance from all slip renters?  Yes  No

Do docks incorporate spud pole construction?  Yes  No

Describe how the marina prevents ice / snow build-up (attach written plan, if available)

On Water: \_\_\_\_\_

On Covered Docks: \_\_\_\_\_

Describe security \_\_\_\_\_

Are operational rules posted around the docks?  Yes  No

How many portable fire extinguishers do you have? \_\_\_\_\_

Average value of any one boat at slips or moorings \_\_\_\_\_

Maximum Value of any one boat \_\_\_\_\_

What services are provided at the slips?

- Water  Electric  Waste  Cable  Satellite  Internet  Other

Explain condition of slips and docks and attach a copy of the slip rental agreement

Note: Pictures of the docks are required prior to binding.

\_\_\_\_\_

Do you have emergency procedures and plans for handling natural or man made disasters?  Yes  No

Does the owner or manager reside on premises?  Yes  No

If not, is there a lockup procedure to ensure the premises is properly closed after hours?  Yes  No

**Is there a BOAT STORAGE OPERATION on premises**

Yes  No

Is there stack storage?  Yes  No How many stories \_\_\_\_\_

Is there a lift used?  Yes  No Estimated total value: \_\_\_\_\_

Capacity of Lift \_\_\_\_\_ Type of lift \_\_\_\_\_

Maximum number of boats stored ashore at any one time? \_\_\_\_\_

Are the shelf heights adjustable?  Yes  No

Is the system portable or permanent?  Yes  No

Does storage agreement have a sign-off on any existing damage?  Yes  No

Does the system meet local building codes?  Yes  No

**Is HAULING OR LAUNCHING done on premises**

Yes  No

How are boats Hauled and/or Launched? \_\_\_\_\_

Describe condition of Equipment \_\_\_\_\_

**Is there a CRANE OPERATION on premises?**

Yes  No

Is crane operations limited to properly licensed, employed or contracted workers?

Yes  No

Does operator verify the watercraft weight prior to lifting?

Yes  No

Does operator have sign-off by owner on the work prior to lifting?

Yes  No

Is Crane rented, loaned or leased during off-season?

Yes  No

Have any modifications been made to the crane or boat lift?

Yes  No

If so, describe: \_\_\_\_\_

Have modifications been approved in writing by the manufacturer or nationally recognized laboratory?

Yes  No

Are pre-inspections performed on all equipment prior to lift, including condition of slings, cables, and harness?

Yes  No

Does the equipment have a fire extinguisher?

Yes  No

**Is there a FUELING OPERATION on premises?**

Yes  No

Who fuels the watercraft? \_\_\_\_\_

Gas and/or Diesel? \_\_\_\_\_

Condition of Hoses and tanks \_\_\_\_\_

Does applicant have proper licenses and permits for fueling operations?

Yes  No

Are all tanks properly certified and do not have any lapse in certification?

Yes  No

Are all lines inspected at least every two weeks?

Yes  No

Are all environment records maintained according to state and local ordinances?

Yes  No

Tank Construction \_\_\_\_\_

What is the size of each tank? \_\_\_\_\_

Does the facility have appropriate overfill and spill catch area?

Yes  No

Any reported leaks, spills or other release or discharge?

Yes  No

Any prior violations?

Yes  No

**Is there a REPAIR FACILITY on premises?**

Yes  No

Number of boats repaired in the last 12 months \_\_\_\_\_

Maximum value of boats in repair facility at any one time \_\_\_\_\_

Maximum value of any boat repaired \_\_\_\_\_

Average value of any boat repaired \_\_\_\_\_

What type of repair work is done? \_\_\_\_\_

Is the work inspected by foreman/owner before delivering to customer?

Yes  No

Describe experience and qualifications of mechanics: \_\_\_\_\_

Are customers kept out of shop area?

Yes  No

Is any non-watercraft items repaired?

Yes  No

Is any work outsourced?

Yes  No

How are flammables, combustibles and other hazardous material stored?

\_\_\_\_\_

**Is there a TOWING SERVICE available?**

Yes  No

Total receipts generated by towing operation

What type of vessel(s) are used \_\_\_\_\_

**Is there a BOAT RENTAL OPERATION on premises?**

Yes  No

If yes, attach a schedule of rental boats and rental boat agreement.

Note: Please provide a list of watercraft that you rent on vessels schedule.

Are rental boat rules / procedures posted?

Yes  No

What types of safety equipment is on the rental boats.

Is inspection and checklist of vessel reviewed and signed off by each renter?

Yes  No

Does applicant keep complete maintenance records on each rental unit?

Yes  No

Any rental of ocean going boats / yachts?

Yes  No

Explain condition of boats and instruction given to renters.

**Is there a BOAT DEALER OPERATION on premises?**

Yes  No

Is the assured or his authorized employee in command of the boat at all times?

Yes  No

Types of vessels stocked / sold?

- Under 26'    Pontoons    Jon Boats    Jet Skies    Paddleboats    Barge
- 26' - 50'    Houseboats    Deck Boats    Waverunners    Cigarette Boats    Dingy
- 50' - 100'    Runabouts    Ski Boats    Sail Boats    Kayak/Canoes
- Over 100'    Bass Boats    Jet Boats    Workboats    Dive Boats

What percentage of boats sold are used? \_\_\_\_\_

**Vessel Inventory**

Latest 12 month Average Inventory \_\_\_\_\_

Estimated Average vessel Inventory Next 12 months \_\_\_\_\_

Maximum vessel Inventory at any one time Next 12 months \_\_\_\_\_

Average value on any one vessel: \_\_\_\_\_

Maximum value on any one vessel \_\_\_\_\_

**Transit Exposure**

Limit in or on any one individual Truck, Trailer, Railcar, Aircraft or Vessel \_\_\_\_\_

Limit in any one Disaster (Transit Only) \_\_\_\_\_

Limit at Exhibitions at any one Location \_\_\_\_\_

Limit any one Vessel while under Demonstration \_\_\_\_\_

Limit of Parts and Accessories \_\_\_\_\_

Estimated number of Exhibitions/Boat Shows per year \_\_\_\_\_

Number of vessels sold during latest 12 months \_\_\_\_\_

Describe other goods and equipment stocked / sold \_\_\_\_\_



**Private Protection ("X" boxes as applicable):**

- Fire Extinguishers
- Smoke Detectors
- Central Station FIRE Alarm
- Central Station BURGLAR Alarm
- Local BURGLAR Alarm
- Watchman
- U/L Approved Fire Extinguishing System in RESTAURANT
- Fencing
- Signs
- Flood Lights
- Owner/Manager lives on Premises

**Protection Class at Risk Location:** \_\_\_\_\_

**Is Fire Department Paid or Volunteer?** \_\_\_\_\_

**Distance to Fire Department:** \_\_\_\_\_

**Please describe general condition of marine operation:**

- Housekeeping \_\_\_\_\_
- General Maintenance and upkeep \_\_\_\_\_
- Lighting \_\_\_\_\_
- Safety Signs \_\_\_\_\_
- Smoke Detectors \_\_\_\_\_
- Burglar and Fire Alarm \_\_\_\_\_

**Have you walked and inspected all of the floating and/or onshore property?** \_\_\_\_\_

If so, describe condition while commenting on any loose or rotten boards, uneven surfaces, or any other concerns:

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.....  
.....

**Please give any other special area of concern or additional GL exposures.**

Day Care Facilities, boat Brokers, Bottom cleaning, divers, Trailer Parks and/or Excursion boats)

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**Please give your evaluation of the operation.**

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