

BRISTOL BAY RESERVE
PURSE SEINE VESSEL OWNERS ASSOCIATION
1900 W Nickerson St., Suite 320 Seattle, WA 98119
T(206) 283-7733 F(206) 283-7795 / www.psvoa.com / bbrinfo@psvoa.com

INSURANCE MEMBERSHIP APPLICATION

F/V: _____ (ATTACH PHOTO OF VESSEL & RECENT SURVEY)
OWNER(S): _____ BIRTHDATE: _____ CELL #: (____) _____
ADDRESS: _____ PHONE #: (____) _____
CITY, STATE, ZIP: _____ EMAIL ADDRESS: _____
LOSS PAYEE: _____ ADDRESS: _____

YEAR BUILT: _____ BY: _____ WHERE: _____
CONSTRUCTION: _____ TYPE: _____ DOC #: _____
GROSS TONNAGE: _____ NET: _____ LENGTH: _____ BEAM: _____ FUEL: _____
MARKET VALUE: _____ REPLACEMENT COST: _____
MAKE, MODEL, YEAR & HORSEPOWER OF MAIN ENGINE: _____
HOURS ON MAIN ENGINE OR HOURS SINCE REBUILD _____
METHOD OF ENGINE PROPULSION: _____
IS VESSEL REFRIGERATED?: _____ WHEN?: _____
HAS VESSEL UNDERGONE ANY MAJOR RECONDITIONING/CONVERSION? NO _____ YES _____
IF YES, EXPLAIN: _____
LAST SURVEY: _____ BY: _____ RECOMMENDATIONS COMPLETED?: _____
WILL VESSEL BE OWNER OPERATED?: _____ (IF NO, COMPLETE ALTERNATE OPERATOR FORM)
OWNER'S EXPERIENCE: _____

LIST ANY INCIDENT WHICH COULD HAVE BEEN REPORTED OR WAS REPORTED AS A CLAIM IN THE LAST FIVE (5) YEARS:
HULL: _____ P&I: _____

LIST TWO (2) BRISTOL BAY RESERVE MEMBERS WE MAY CONTACT REGARDING YOUR APPLICATION: _____

CURRENT INSURANCE COMPANY: _____ EXPIRATION: _____
WILL ANY OTHER COMPANY PARTICIPATE IN COVERAGE?: NO _____ YES _____
IF YES, COMPANY: _____ AMOUNT: \$ _____
WHEN WOULD YOU LIKE COVERAGE TO BEGIN?: _____

COVERAGES REQUESTED

HULL: \$ _____ MACHINERY (INCHMAREE): \$ _____
PROTECTION & INDEMNITY: \$500,000 _____ \$1,000,000 _____
BREACH OF WARRANTY (AMOUNT OF LOAN ON VESSEL): \$ _____
SKIFF: \$ _____ SKIFF MACHINERY: \$ _____ TRANSIT AS CARGO: \$ _____
POLLUTION: \$500,000 _____

FISHERY	AREA OF OPERATION	OPERATING MONTHS	# OF CREW
_____	_____	_____	_____
_____	_____	_____	_____

SIGNATURE OF OWNER

DATE

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REQUIRED SAFETY EQUIPMENT

Please have surveyor complete and submit with current survey.

Vessel Name: _____

Surveyors Name: _____

- AT LEAST TWO (2) EFFECTIVE DEWATERING DEVICES.
- AUDIBLE BILGE ALARM IN ENGINE ROOM AND LAZARETTE. ADDITIONAL BILGE ALARMS MAY BE REQUIRED AS DETERMINED BY A SURVEYOR.
- AUDIBLE HEAT SENSING ALARM IN ENGINE ROOM AND OVER THE GALLEY STOVE.
- CARBON MONOXIDE DETECTOR.
- TWO-WAY MARINE VHF RADIO, FATHOMETER AND LORAN OR GPS.
- THREE (3) CLASS B FIRE EXTINGUISHERS INSTALLED IN THE ENGINE ROOM OR IN SUCH OTHER LOCATIONS AS DETERMINED BY A SURVEYOR.
- OUT OF WATER SURVEY AT LEAST EVERY THREE (3) YEARS.
- ALL STOVE AND ENGINE EXHAUSTS MUST BE CLEAR OF ALL WOODWORK.
- PROPANE (LPG) STOVES MUST HAVE TYPE K OR L COPPER TUBING OR FLEXIBLE HOSE LABELED FOR LPG.
- OIL STOVES MUST HAVE COPPER TUBING OR FLEXIBLE NON-METALLIC U.S.C.G. TYPE A HOSE.
- COMPLIANCE WITH ALL APPLICABLE SAFETY REGULATIONS UNDER THE COMMERCIAL FISHING VESSEL SAFETY ACT OF 1988.

SURVEYOR SIGNATURE

DATE

If any items are not checked, please explain below:

