

april | marine

1-866-862-2628 - f : 1-866-414-7178



PLEASE REPORT YOUR CLAIM DIRECTLY TO APRIL MARINE

FAX CLAIMS : 1-877-672-7860

Date _____

LOSS REPORTED BY:

INSURED BROKER

POLICY# : _____

REPORTED TO POLICE? : Yes No

Date of loss: _____

LOCATION OF LOSS : _____

INSURED

Name: _____

Home phone no: _____

COMPLETE ADDRESS : _____

Work phone no: _____

Fax no : _____

Email: _____

CLAIMANT (if other than insured)

Name: _____

Home phone no: _____

COMPLETE ADDRESS : _____

Work phone no: _____

Fax no : _____

Email: _____

INSURED PROPERTY INVOLVED IN LOSS

Vessel

Hull

Propulsion componets

Tender

Portable equipment

Outboard

Auxiliary motor

Personal effects

Trailer

Liability

Bodily Injury

Property damage

Emergency medical

Pollution

Details of loss:

Where can vessel be seen: _____

Contact person : _____ Telephone no: _____

Address : _____ Fax no: _____