Policy No.:	Claim No.:			
Policy Holder				
Name/company:				
Customer No.:				
Address:				
Phone (office):	Mobile:			
Email:				
Bank data (name of the bank):				
Bank number:	Account number:			
IBAN:	Swift/BIC-Code:			
Account Holder:				
Full address, if not identical with the Policy Holder's:				
Type of vessel:	Name of vessel:			
Hull No.:	Year of construction:			
Do any further insurances exist for this deposit? Yes No If yes, please indicate address of insurer, policy no. and where applicable, claim no.				
Short description of the loss event				
Collision with	Grounding Stranding			
Fire/explosion Lightning Broken M	1ast Capsizing			



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Sinking Theft Other					
Did the damage occur during a regatta or a training for a reg	atta?		Yes	No	
Location of loss	Latitude	0	,		
	Longitude	o			
(Place/Country)		(N/S W/E)			
Date of loss event:	Time(local):				
Weather conditions:					
Wind force and direction:					
State of sea:	Sight:				
Skipper at the time of the claim event:					
Address:					
Driving/Sailing licence (type/no.):					
Number of crew-members:					
Estimated claims amount:					
Which arrangements have been made to minimize the claim?					

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Did a survey already take place? Yes, by whom?					
Did a responsible authority make a report/protocol?	Yes No				
If yes, which authority? Eventually enclose the report:					
Other involved vehicles:					
Type and name of the vessel, eventually license plate:					
Owner (name/address/phone):					
Skipper (name/address/phone):					
Accident witnesses (name/address/phone):					
Damages on the other vessel:					
Please describe the loss event here or on a separate sheet. Please enclose accident sketch and photos of the damage. In case the policy holder did not drive the vessel on his own at time of loss event this description has to be made by the responsible skipper.					

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I agree when submitting the claim to Pantaenius, that my personal data will be saved and made available to insurers, surveyors, law firms and other authorities etc. in so far Pantaenius deems this necessary in order to handle the claim. After closure of the claim, my data will be saved according to the data protection law currently in force. Please note that whenever an insured event occurs, you must provide complete and true information. The insurers would point to the fact that in case of a breach of the existing obligation to provide information or explanations, there is a risk that they would be released from the obligation to provide benefits. Should a third party be entitled to the benefits payable under the contract, the said third party is equally obliged to provide information and explanations. I hereby attest to the accuracy of the afore mentioned declaration.					
Thereby access to the accuracy of t	ine alore mendoneu deciaration.				
Place/Date:	Signature Policy Holder:	Signature Skipper, if not identical with Policy Holder:			

Please note: Our current Privacy Policy can be found under Pantaenius.fr/privacypolicy.

