

Name of Ship:		Distinctive Number or Letters:			
IMO Number:	Gross Tonnage:	Port of Registry:	Flag:		
Performing Carrier: (This field should contain details of the Registered Owner or Demise Charterer, as appropriate)		Name and full address of principle place of business of the performing carrier (if not registered office):			
P&I Insurer is a memb	per of the International Group (IGA) of P	P&I Clubs:	Yes	No	
·	e the name of P&I Insurer:				
Flag State Authority th Country:	hat will issue Athens/PLR Certificate N	lame of Authority:			
Date from which Cer	tificate is required:				
Normal Geographic T	rading Areas:				
Maximum Passenger c Certificate recorded b	capacity as per Ship's by Flag State Authority:				
Expected percentage 2002 PLR Certificate	(%) of year subject to Athens requirements:				



Athens/PLR exposure in the HRA:

Number of voyages in the next 12 months to Gulf of Oman and/or West of 58 degrees East as defined by JWLA024 and/or the latest revision thereto at the time of the application

Duration (in days) of each voyage to Gulf of Oman and/or West of 58 degrees East as defined by JWLA024 and/or the latest revision thereto at the time of the application

When trading in the HRA will your vessel have an Athens/PLR exposure due to one of the following reasons:

1) Flag State is a signatory to the Athens Convention

Yes

No

2) Passengers embarked in a Convention Signatory country

Yes

No

3) The passenger tickets were purchased in a convention signatory country

Yes

No

4) The Athens Convention is expressly incorporated into your passenger ticket terms and Yes

No conditions



Section 2: Underlying War Covers

- I) a) P & I War Risks Insurances (Hull) provided as a separate limit to the Carrier's or the Performing Carrier's Hull and Disbursements War Risks policies to at least the aggregate of the insured value of the Hull and insured amounts in respect of Disbursements of the Carrier's or the Performing Carrier's ship or USD 100,000,000, whichever is the lower and on terms providing cover as per the Institute Protection and Indemnity War Strikes Clauses Hulls Time CL.345 (20/7/87) and/or equivalent War P & I clauses (which to be agreed by Slip Leader).
- b) P & I War Risks (International Group P & I Clubs) as endorsed as an extension to the entry of the Carrier's or the Performing Carrier's ship into an International Group P & I Club. (Such entry means an unrestricted entry into a Protection and Indemnity Association which is a member of the International Group of P&I Clubs or other Insurer of P & I risks as approved by Slip Leader endorsed to include cover against the risk of War for an amount not less than USD 500,000,000 and/or as may be specifically agreed by Slip Leader hereon.)

c) Excess P & I War risks provided by Insurers of P & I risks other than a P & I Club.

- 2) Does the Applicant or their appointed agent hold insurance slips or contracts and/or policies, if and when issued, for 100% of Sums Insured and/or Certificates of P & I Club Entry in respect of all Underlying War Covers described in Para I above.
- 3) In respect of P & I War Risks Insurances (Hull) please provide following information.

 Name of the lead insurer:

S & P rating of the lead insurer:

Domicile of the lead insurer:

List any insurers with S & P rating of BBB or less with respective percentages:

Name of Insurer: Lead Insurer (only if S&P rating BBB or less)

Total – BBB and less security

Yes

%

No

If additional space required, please provide details on a separate sheet.

Policy Inception Date: Policy Expiry Date:

Primary War P&I Combined Single Limit all coverages: US \$

Total Sum Insured Hull and Interests: US \$

Total Sum Insured Hull/IV and Primary War P&I cover US \$



Yes

Yes

No

No

4) Does the Applicant or their appointed agent agree to advise immediately the Insurers hereon through Shoreline

a) in the event of any material change made to such insurances, including any change of

b) in the case of receipt of any notices of cancellation from the listed underwriters in

accordance with the terms of the insurances so arranged and

Insurance Managers Ltd:

insurer or intermediary,

 c) in respect of any enquiry in writing of the situation regarding paym where paid through an authorized representative as intermediary. 	ent of premium	Yes	No		
5) Is the Applicant or their appointed agent able to confirm that the insurances (Hull) have endorsed the following onto their policy(ies "This policy is Primary and it is accepted that the Athens 2002 PLR G contingent upon this policy not responding for all or part of valid Athand that the Athens PLR Guarantee shall not be deemed to be doubled.	s) Juarantee is in part Jens 2002 PLR claims	Yes	No		
6) The insurers to whom this Application is made acknowledge that if appression responsible for the payment of premium to Underlying War Companies and subject to their subject to their lien on the Contral premiums and subject to their right of cancellation on default in premiums or unpaid broker remuneration.	ver Underwriters, the cts or Policies for	Yes	No		
In consideration of above, will appointed brokers undertake that they we rights of cancellation without giving Shoreline Insurance Manager in writing either by letter or electronically transmitted message.					
Please note that the Applicant's P & I Club is requested to provide certain confirmations to Shoreline Insurance Managers Ltd in respect of their Member's (i.e. the Assured under this contract or Applicant for a Guarantee) vessel for which an application for a Guarantee is being made. This application notes that it is a condition of the confirmations requested of the Insured's P & I Club that neither the information confirmed, nor the fact that the above named Member is a Member of this Association and may be covered for certain					
passenger liability risks, shall form part of any application to any Flag Sate Authority or any other governmental agency or be used in support of any application for the purposes of demonstrating evidence of insurance or evidence of compulsory insurance under any applicable law relating to liability for the death of and personal injury to passengers.					
The Applicant or their appointed agent hereby acknowledge Policy Terms and Conditions issued in consideration for tendering an Athens 2002 PLR Blue Card including the procedures regarding the handling of any claims and note the content therein.					
Section 3: Authorized Representative					
Name:	Capacity:				
Email:	Telephone:				
Name and Address of Company:					
Signature and Date:					