



Finance & Insurance

Marine Insurance Application

NAME (FIRST, MI, LAST)		DATE OF BIRTH		DRIVERS LICENSE/SS #	
STREET ADDRESS		CITY	STATE	ZIP CODE	PHONE
EMAIL ADDRESS		CELL/OTHER			FAX

VEHICLE LEINHOLDER

NAME	STREET ADDRESS	STATE	ZIP CODE	PHONE
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BOATING & MOTOR VEHICLE RECORD

YRS. BOATING EXPERIENCE	DRIVING RECORD: (MINORS)	(ACCIDENTS)	(AT FAULT?)
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ENGINE INFORMATION

MOTOR	YEAR	MAKE	SIZE	H.P.	V-DRIVE	JET	OUTBOARD	DIESEL	INBOARD/OUTBOARD
Engine #1									
Engine #2									
Engine #3									

VESSEL INFORMATION

<input type="checkbox"/> NEW <input type="checkbox"/> USED	YEAR	MAKE	MODEL	MILEAGE	MAX SPEED	VALUE
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TRAILER INFORMATION

<input type="checkbox"/> NEW <input type="checkbox"/> USED	YEAR	MAKE	MODEL	# AXLES	VALUE
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PRIOR BOAT(S) OWNED AND OPERATED

VESSEL	YEAR	MAKE	MODEL	PURCHASE PRICE	YRS. OPERATED
Boat #1					
Boat #2					

BELOW: FOR OFFICIAL USE ONLY

All applicants: In submitting this application, you warrant and represent that the information that you are furnishing is truthful, accurate, and supplied voluntarily. I hereby authorize and request SeaDream, Inc. Finance & Insurance to produce an insurance quote(s) on my behalf.

_____ **APPLICANT SIGNATURE** _____ **DATE**

SEADREAM CONTACT INFORMATION
 Please fax completed application to **(866) 460-0180**
 If you would like to speak with us directly, please call **(866) 460-0170**

MAILING ADDRESS
 300 S. Harbor Blvd. Suite 816
 Anaheim, CA 92805