



Hamburger Yacht-Versicherung

Schomacker Versicherungsmakler GmbH

Damage claim form

Insured / Owner of yacht: _____ Name of yacht: _____ Insurance policy no.: _____
_____ Date of damage: _____ Time: _____
_____ Place of damage: _____
_____ Kind of damage: _____

1. Skipper at the time of accident? (Name and address): _____

2. Skipper's licences (Date licences issued): _____

3. Who was on board the yacht at the time of accident? (Name and addresses): _____

4. When and where did you start the trip the day of the accident?: _____

5. What was the weather forecast that day?: _____

6. What was the weather like at the time of accident? (Please hand in log book entries): _____

7. Which steps were taken in badweather?: _____

8. Please name the exact place of damage: _____

9. Which course was set?: _____

10. Who set the course/who navigated?: _____

11. Reason and course of damage? (Please give a detailed description): _____



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12. In case of grounding: Which steps did you take after grounding?: _____

13. Were there shallows in the sailing area? Which fathom line did you take? Which measures did the echo sounder show? (Please mark in nautical chart):

14. How was the buoyage in the area?: _____

15. List the reason why the damage of unavoidable: _____

16. Which steps were taken for reduction of damage?: _____

17. In case of theft, robbery and fire a) detailed description of place of damage; b) How was the yacht secured?
c) What kind of fire extinguishing devices were on board?:

18. Which police station did you report the damage to? (Please list date and police entries): _____

19. Which harbour master/port authority was informed? (date): _____

20. Are there any other participants of the accident? (names and addresses): _____

21. Have any claims been enforced against you? If yes, by whom?: _____
