

Insurance
Premiums and
Application
for
**DAY
SAILORS**



Have You:

Completed and signed this Application.

Include your cheque or money order made payable to Aviva Elite.

Any questions please call or write:

**Robertson & Robertson
Yacht Insurance**

2929 Bathurst St., Suite 102

Toronto, Ontario M6B 3B1

Tel: (416) 789-7211

1-800-661-7211

www.skippersplan.com

This brochure contains general descriptions only. The program and all rights with respect to the benefits are governed solely by the policy wording issued by the company.



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Summary of Coverages

- All Seasons coverage
- All Risk Protection on hull equipment
- Replacement Cost Value including sails
- Liability Protection (P&I) of \$1,000,000
- Medical Payments \$1,000
- Transportation Protection
- Broad navigation limits
- Automatic Physical Damage coverage for trailers and outboard motors not exceeding \$500 each

Low Deductible

This package carries a deductible of only \$100.00.

What will a Skippers' Plan "Day Sailor" package cost you?

Amount of Insurance on Boat*	Annual Package Premium
up to \$ 5,000	\$ 108.00
\$ 5,001 to \$ 9,999	\$ 162.00
\$10,000 to \$15,000	\$ 259.00

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Yacht Insurance
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Application for the Skippers' Plan DAY SAILORS

Insured _____

Address _____

Town/City _____

Prov. _____ Postal Code _____

Tel. Res. _____ Tel. Bus. _____

Property	Year	Length	Manufacturer	Serial #
YACHT				
MOTOR				
TRAILER				

Construction Material: _____

The value of my yacht NEW was \$ _____

Coverage	Amount of Insurance	Premium
Replacement Cost on Hull & Equipment	\$ _____	\$ _____
Medical Payments	\$ 1,000	\$ Included
Liability (P & I)	\$ 1,000,000	\$ Included
Tax 8% PST		\$ Included
TOTAL ANNUAL PREMIUM		\$ _____

I include the total premium of \$ _____ and would like my Skippers'

Plan to start on _____ (day) _____ (month), _____ (year) for one year.

Signature _____

Date _____

PLEASE INCLUDE YOUR CHEQUE MADE PAYABLE TO AVIVA ELITE WITH THIS APPLICATION.