



## Claim notification

Water sports policy no.: \_\_\_\_\_

Hull Claim

### Important information in case of claim:

Dear customer! We need your assistance in case of claim!

#### Obligation for information and enlightenment

Based on the contractually agreed conditions, we may request any sort of information after occurrence of a claim case, which might be necessary to determine reason or extent of the claim and the resulting obligation for indemnification by insurers. We may further request all information necessary to enlighten the actual claim situation and which in turn enable us to determine our obligation for indemnification. Furthermore, presentation of all relevant receipts and documents may be requested, provided these measures are reasonable.

#### Release from obligation for indemnification

Should you, opposed to contractually agreed conditions, intentionally not give any or even wrong information and should you intentionally not submit requested documents, you'll lose your right for insurance benefits. Should you breach any of these obligations gross negligently, you won't entirely lose your right for benefits, however, we are entitled to cut benefits proportionally to the gravity of your default. A cut of your benefits won't be applied if you're able to prove that you didn't breach any obligation gross negligently. Despite breach of your obligation for information, enlightenment and submission of documents, we remain obliged for indemnification as long as you can prove that the intentional or gross negligent breach of obligation is not causative for the assessment or the extent of our obligation for indemnification. Should you, however, breach your obligation for information, enlightenment and submission of documents fraudulently, we will in any case be freed from our obligation for indemnification.

#### Information:

Should the right for contractual benefit payments not be yours, but that of a third party, obligation for information, enlightenment and submission of documents also applies to said third party.

Policy holder

\_\_\_\_\_  
(Name, address, tel. no.  
etc.)

\_\_\_\_\_  
Skipper (if deviating)

\_\_\_\_\_  
(Name, address, tel. no.  
etc.)

\_\_\_\_\_  
Make of Yacht

\_\_\_\_\_  
Manufacturer

\_\_\_\_\_  
Name / Registration



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Length and width \_\_\_\_\_

Motor (type, hp, year built) \_\_\_\_\_

Date of damage \_\_\_\_\_

Time of damage \_\_\_\_\_

Place of damage \_\_\_\_\_

Were other vessels involved in the accident/incident?  
If yes, state name, address and tel. no. of other skipper(s) \_\_\_\_\_

Names of other Yachts \_\_\_\_\_

Any witnesses?  
Names, addresses and tel. nos. Or e-mail addresses \_\_\_\_\_

Which police office was informed of accident/incident/theft?  
\_\_\_\_\_

Exact address, tel. no. and file reference \_\_\_\_\_

Weather (general) \_\_\_\_\_

Wind (direction, force, etc.) \_\_\_\_\_

Visibility, optical range \_\_\_\_\_

Lights on own vessel	Own vessel	Foreign vessel	Others
_____	_____	_____	_____

Sound signals	Own vessel	Foreign vessel	Others
_____	_____	_____	_____

Light signals	Own vessel	Foreign vessel	Others
_____	_____	_____	_____



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Detailed information about circumstances of accident/incident (reason and occurrence/hand in drawing or pictures separately)

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Short description of own damage (location, extent, estimated claim amount)

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Short description of foreign damage (location, extent, estimated claim amount)

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Where and when can your Yacht be surveyed?

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Which company holds the liability insurance for your yacht (pls. state policy number)

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Bank details for transfer of settlement amount

Name of account holder:

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Name and address of bank:

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IBAN:

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BIC:

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**All questions are to be answered completely and truthfully by the policy holder himself!**

Please fill in the form and return it to us as quickly as possible. You find our contact data in the footer of this form.

We'd like to point out that knowingly incomplete or falsely given information may even then result in release from obligation for indemnification if insurers don't directly suffer a disadvantage from it.

Please note especially obligations to be fulfilled in case of claim as stated under no. 11 of the Aktiv Assekuranz Wassersport Conditions.

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Place, date

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Signature