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INCIDENT REPORT FORM

SECTION 1 (must be completed)

Policy holder

Name

Company name

Mobile

Email address

Vessel details

Name of vessel

Flag / Port

Registration no.

Vessel type

- ◯ Power
- ◯ Sail

Length (m)

Beam (m)

Year Built

Make

Model

Vessel use

- ☐ Passenger vessel
- ☐ Non passenger vessel e.g. cargo
- ☐ Fishing vessel
- ☐ Hire & drive vessel
- ☐ Private pleasure
- ☐ Charter
- ☐ Other

Hull material

- ☐ Steel
- ☐ Ferro-cement
- ☐ Timber
- ☐ Fiberglass
- ☐ Aluminum
- ☐ Composite
- ☐ Other

Number of engines

Engine power

- ☐ HP
- ☐ KW

Drive type

- ☐ Outboard
- ☐ Shaft drive
- ☐ IPS drive
- ☐ Sterndrive
- ☐ Sail drive
- ☐ Water jet
- ☐ Surface drive
- ☐ Other

Details of person in charge at the time of loss (Captain)

Title (Mr., Mrs., Dr., Capt., etc)

Surname

Given name

Street address

Town / Suburb

State / Province

Country

Telephone

Email

Date of birth

Gender

- [ ] Male
- [ ] Female

Type of certificate of competency / license and grade

Certificate / license ID

Issuing authority

Issue date

Expiry date (if applicable)

Incident description

Date

Time

Location

Location coordinates

N/S

Latitude (DD MM.MM)

E/W

Longitude (DDD MM.MM)

Vessel operation / activity at time of incident

- [ ] Underway (motoring)
- [ ] Underway (sailing)
- [ ] Anchored / moored
- [ ] Berthed
- [ ] Aground
- [ ] Drifting
- [ ] Towing a vessel
- [ ] Being towed
- [ ] Fuelling
- [ ] Performing maneuvers
- [ ] Performing maintenance
- [ ] Fishing
- [ ] Racing
- [ ] Diving
- [ ] Water skiing or related activity
- [ ] Ashore
- [ ] Other

Number of passengers on board

Number of crew on board

Intended departure point of vessel

Intended arrival point(s) of vessel

Type of incident

- ☐ Person overboard
- ☐ Capsizing
- ☐ Sinking
- ☐ Swamping
- ☐ Flooding
- ☐ Close quarters
- ☐ Loss or presumed loss of vessel
- ☐ Disablement of vessel
- ☐ Structural failure
- ☐ Mechanical failure
- ☐ Loss of stability
- ☐ Fire
- ☐ Explosion

Collision of vessel

- ☐ with another vessel
- ☐ with a fixed object
- ☐ with a floating object
- ☐ with an animal
- ☐ with a wharf / pier / marina
- ☐ with a submerged object
- ☐ with an overhead obstruction

Grounding

- ☐ intentional
- ☐ unintentional

On board incident

- ☐ falls within vessel
- ☐ crushing / pinching
- ☐ other on board incident

Other incident

- ☐ damage by person / vessel
- ☐ skiing
- ☐ parasailing
- ☐ diving
- ☐ storm damage
- ☐ theft
- ☐ Other

Description of incident (what happened)

Incident severity rating

- ☐ Fatal incident
- ☐ Serious injury
- ☐ minor injury
- ☐ Vessel lost
- ☐ Major damage / loss
- ☐ Minor damage / loss
- ☐ Other vessel damage
- ☐ Property damage
- ☐ No damage
- ☐ Environmental damage
- ☐ Not known

Environmental conditions

Visibility

- ☐ Good
- ☐ Poor
- ☐ Not known
- ☐ Fair
- ☐ After sunset / before sunrise

Weather

- ☐ Clear
- ☐ Cloudy
- ☐ Not known
- ☐ Hazy (fog)
- ☐ Rain

Wind strength

- ☐ None
- ☐ 9>15 knots
- ☐ Over 30 knots
- ☐ 1>8 knots
- ☐ 16>30 knots
- ☐ Not known

Wind direction

- ☐ N
- ☐ S
- ☐ E
- ☐ NE
- ☐ SE
- ☐ W
- ☐ NW
- ☐ SW
- ☐ Not known

Sea conditions

- ☐ Calm
- ☐ Rough
- ☐ Strong current
- ☐ Choppy
- ☐ Very rough
- ☐ Not known

Swell height

- ☐ None
- ☐ 2-4 m.
- ☐ Not known
- ☐ 0-2 m.
- ☐ Over 4 m.

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Contributing factors

Human factors

- ☐ alcohol or drugs
- ☐ failure to keep a proper lookout
- ☐ lack of maintenance
- ☐ overloading
- ☐ error of judgment
- ☐ excessive speed
- ☐ lack of fuel
- ☐ fatigue
- ☐ inexperience
- ☐ navigational error
- ☐ insecure mooring
- ☐ Other _____

Material factors

- ☐ inadequate stability
- ☐ electrical
- ☐ navigation
- ☐ machinery
- ☐ hull failure
- ☐ Other _____

Casual factor unknown

- ☐ unknown (reason / comment) _____

Continued on the next page

Environmental factors

- ☐ restricted visibility
- ☐ bar conditions
- ☐ wash of passing vessel
- ☐ floating or submerged object
- ☐ wind / sea state
- ☐ tidal conditions
- ☐ electrical storm
- ☐ Other

What measures have you taken or will you take to minimize the loss?

List damages to the insured vessel and estimate repair cost

SECTION 2 (only to be completed if crew or passengers deceased / injured)

Details of deceased / injured person (person 1 – vessel 1) (if applicable)

Title (Mr., Mrs., Dr., Capt., etc)

Surname

Given name

Street address

Town / Suburb

State / province

Country

Telephone

Email

Date of birth

Gender

- ☐ Male
- ☐ Female

Activity of deceased / injured person

- ☐ Passenger on vessel
- ☐ Crew member
- ☐ Swimmer
- ☐ Water skier
- ☐ Jet skier
- ☐ Para flier
- ☐ Surf ski / surfboard rider / kayaker
- ☐ Diver / snorkeler
- ☐ Other

Status

- [ ] Fatality
- [ ] Serious injury (requiring admission to hospital)
- [ ] Minor injury
- [ ] Missing person

Blood alcohol content

Drug test

Next of kin and contact details

Details of deceased / injured person (person 2 – vessel 1) (if applicable)

Title (Mr., Mrs., Dr., Capt., etc)

Surname

Given name

Street address

Town / Suburb

State / Province

Country

Telephone

Email

Date of birth

Gender

- [ ] Male
- [ ] Female

Activity of deceased / injured person

- [ ] Passenger on vessel
- [ ] Crew member
- [ ] Swimmer
- [ ] Water skier
- [ ] Jet skier
- [ ] Para flier
- [ ] Surf ski / surfboard rider / kayaker
- [ ] Diver / snorkeler
- [ ] Other

Status

- [ ] Fatality
- [ ] Serious injury (requiring admission to hospital)
- [ ] Minor injury
- [ ] Missing person

Blood alcohol content

Drug test

Next of kin and contact details

SECTION 3 (only to be completed if a 2nd vessel involved)

Vessel 2 : Owner details

Name

Company name

Mobile

Email address

Vessel 2 : Vessel details

Name of vessel

Flag / Port

Registration no.

Vessel type

- ◯ Power
- ◯ Sail

Length (m)

Beam (m)

Year Built

Make

Model

Vessel use

- ☐ Passenger vessel
- ☐ Non passenger vessel e.g. cargo
- ☐ Fishing vessel
- ☐ Hire & drive vessel
- ☐ Private pleasure
- ☐ Charter
- ☐ Other

Hull material

- ☐ Steel
- ☐ Ferro-cement
- ☐ Timber
- ☐ Fiberglass / FRP
- ☐ Aluminum
- ☐ Composite
- ☐ Other

Number of engines

Engine power

- ☐ HP
- ☐ KW

Drive type

- ☐ Outboard
- ☐ Shaft drive
- ☐ IPS drive
- ☐ Sterndrive
- ☐ Sail drive
- ☐ Water jet
- ☐ Surface drive
- ☐ Other

Vessel 2 : Details of person in charge at the time of loss (Captain)

Title (Mr., Mrs., Dr., Capt., etc)

Surname

Given name

Street address

Town / Suburb

State / Province

Country

Telephone

Email

Date of birth

Gender

- [ ] Male
- [ ] Female

Type of Certificate of Competency / license and grade

Certificate / license ID

Issuing authority

Issue date

Expiry date (if applicable)

Incident description

Date

Time

Location

Location coordinates

N/S

Latitude (DD MM.MM)

E/W

Longitude (DDD MM.MM)

Vessel operation / activity at time of incident

- [ ] Underway (motoring)
- [ ] Underway (sailing)
- [ ] Anchored / moored
- [ ] Berthed
- [ ] Aground
- [ ] Drifting
- [ ] Towing a vessel
- [ ] Being towed
- [ ] Fuelling
- [ ] Performing maneuvers
- [ ] Performing maintenance
- [ ] Fishing
- [ ] Racing
- [ ] Diving
- [ ] Water skiing or related activity
- [ ] Ashore
- [ ] Other

Number of passengers on board

Number of crew on board

Intended departure point of vessel

Intended arrival point(s) of vessel

Type of incident

- ☐ Person overboard
- ☐ Capsizing
- ☐ Sinking
- ☐ Swamping
- ☐ Flooding
- ☐ Close quarters
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- ☐ Structural failure
- ☐ Mechanical failure
- ☐ Loss of stability
- ☐ Fire
- ☐ Explosion

Collision of vessel

- ☐ with another vessel
- ☐ with a fixed object
- ☐ with a floating object
- ☐ with an animal
- ☐ with a wharf / pier / marina
- ☐ with a submerged object
- ☐ with an overhead obstruction

Grounding

- ☐ intentional
- ☐ unintentional

On board incident

- ☐ falls within vessel
- ☐ crushing / pinching
- ☐ other on board incident

Other incident

- ☐ damage by person / vessel
- ☐ skiing
- ☐ parasailing
- ☐ diving
- ☐ storm damage
- ☐ theft
- ☐ Other

Description of incident (what happened)

Incident severity rating

- ☐ Fatal incident
- ☐ Serious injury
- ☐ minor injury
- ☐ Vessel lost
- ☐ Major damage / loss
- ☐ Minor damage / loss
- ☐ Other vessel damage
- ☐ Property damage
- ☐ No damage
- ☐ Environmental damage
- ☐ Not known

Environmental conditions

Visibility

- ☐ Good
- ☐ Poor
- ☐ Not known
- ☐ Fair
- ☐ After sunset / before sunrise

Weather

- ☐ Clear
- ☐ Cloudy
- ☐ Not known
- ☐ Hazy (fog)
- ☐ Rain

Wind strength

- ☐ None
- ☐ 9>15 knots
- ☐ Over 30 knots
- ☐ 1>8 knots
- ☐ 16>30 knots
- ☐ Not known

Wind direction

- ☐ N
- ☐ S
- ☐ E
- ☐ NE
- ☐ SE
- ☐ W
- ☐ NW
- ☐ SW
- ☐ Not known

Sea conditions

- ☐ Calm
- ☐ Rough
- ☐ Strong current
- ☐ Choppy
- ☐ Very rough
- ☐ Not known

Swell height

- ☐ None
- ☐ 2-4 m.
- ☐ Not known
- ☐ 0-2 m.
- ☐ Over 4 m.

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Contributing factors

Human factors

- ☐ alcohol or drugs
- ☐ failure to keep a proper lookout
- ☐ lack of maintenance
- ☐ overloading
- ☐ error of judgment
- ☐ excessive speed
- ☐ lack of fuel
- ☐ fatigue
- ☐ inexperience
- ☐ navigational error
- ☐ insecure mooring
- ☐ Other

Material factors

- ☐ inadequate stability
- ☐ electrical
- ☐ navigation
- ☐ machinery
- ☐ hull failure
- ☐ Other

Casual factor unknown

- ☐ unknown (reason / comment)

Continued on the next page

Environmental factors

- ☐ restricted visibility
- ☐ bar conditions
- ☐ wash of passing vessel
- ☐ floating or submerged object
- ☐ wind / sea state
- ☐ tidal conditions
- ☐ electrical storm
- ☐ Other

What measures have been or will be taken to minimize the loss?

List damages to the 2nd vessel and estimated repair cost

SECTION 4 (only to be completed if 2nd vessel has deceased / injured crew and/or passengers)

Vessel 2 : Details of deceased / injured person (person 1 – vessel 2) (if applicable)

Title (Mr., Mrs., Dr., Capt., etc)

Surname

Given name

Street address

Town / Suburb

State / Province

Country

Telephone

Email

Date of birth

Gender

- ☐ Male
- ☐ Female

Activity of deceased / injured person

- ☐ Passenger on vessel
- ☐ Crew member
- ☐ Swimmer
- ☐ Water skier
- ☐ Jet skier
- ☐ Para flier
- ☐ Surf ski / surfboard rider / kayaker
- ☐ Diver / snorkeler
- ☐ Other

Status

☐ Fatality
☐ Serious injury (requiring admission to hospital)
☐ Minor injury
☐ Missing person

Blood alcohol content

Drug test

Next of kin and contact details

Vessel 2 : Details of deceased / injured person (person 2 – vessel 2) (if applicable)

Title (Mr., Mrs., Dr., Capt., etc)

Surname

Given name

Street address

Town / Suburb

State / Province

Country

Telephone

Email

Date of birth

Gender

☐ Male
☐ Female

Activity of deceased / injured person

☐ Passenger on vessel
☐ Crew member
☐ Swimmer
☐ Water skier
☐ Jet skier
☐ Para flier
☐ Surf ski / surfboard rider / kayaker
☐ Diver / snorkeler
☐ Other

Status

☐ Fatality
☐ Serious injury (requiring admission to hospital)
☐ Minor injury
☐ Missing person

Blood alcohol content

Drug test

Next of kin and contact details

SECTION 5 (must be completed)

Incident report details

A diagram or chart extract of the incident and events leading up to the incident are to be detailed in the space provided below (if insufficient space please use separate pages. Each extra page that is used must be signed)

Description of diagram / chart

Were there any witnesses?
If so, please provide name (s) & contact details

Did Police or responsible authority produce a report?
If yes, please provide Name / Address / Reference no. / Crime report no.

Please note : all cases of person injury, death, theft, explosion, fire, vandalism and total loss must be reported to the local Police and a copy of their report submitted with this form.

What losses were incurred to the other vessel and/or objects?:

Did the incident cause any damage to the marine habitat and /or any adverse effect to the marine environment e.g. pollution?.

Please note : all cases of damage to the marine habitat and/or environment must be reported to the marine dept.

Details of assistance rendered / received at incident

You certify that information given on this form is truthful, accurate and complete and that no information likely to affect this claim has been withheld.

We would like to point out that a fraudulent or exaggerated claim may result in a compete loss of any entitlement under your insurance policy.

.....

Declaration

I, (full name)

Date of birth :

Address :

Phone :

Email :

declare that :

- to the best of my knowledge the information provided by me in this report (and any attachments I have included with this report) is true and correct.
- I consent to AMS, making all reasonable enquiries in order to verify that the information provided by me in this report (and any attachments I have included with this report) is true and correct.
- I understand and acknowledge that AMS, may ask that I provide any information or document that is reasonably considered necessary for consideration.

Signature of owner or master | Printed name | Date

Name and status of person who assisted in completion of form (if applicable)

Please return the completed form to Andaman Marine Surveyors Co., Ltd.