

AMERICAN RELIABLE SELF SURVEY

Policy Number: _____

Date _____ / _____ / _____

Owner: _____	Phone #: _____
Manufacturer: _____	Model: _____ Year: _____
Documentation/State Registration #: _____	Length: _____ Motor Year: _____
Hull ID #: _____	
Engine(s) Make: _____ HP: _____	<input type="checkbox"/> Gas <input type="checkbox"/> Diesel *Approximate # of
Serial #(s): _____	<input type="checkbox"/> Inboard <input type="checkbox"/> Outboard <input type="checkbox"/> I/O Outdrive Hours: _____
Where is the vessel moored/stored: _____	
Lay-up Period, if applicable: From: _____ To: _____	<input type="checkbox"/> Afloat <input type="checkbox"/> Hauled Out
	*If afloat, does the marina have a bubbler system? <input type="checkbox"/> Yes <input type="checkbox"/> No

HULL & DECK	PHOTOS ARE REQUIRED (SEE PAGE 2 FOR DETAILS)
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- Date of Last Survey: _____ / _____ / _____ None * Please provide a Copy
- If any recommendations, were they complied with? * Please provide details on next page Yes No N/A
- To your knowledge, has the vessel been involved in a grounding, or collision, with another vessel or object? Yes No N/A
- Date: _____ / _____ / _____ Type of Loss & Amount: _____
- Have propellers been checked for damage? Yes No N/A
- Have all stuffing boxes and packing been checked? Yes No N/A
- Have all engines & hull zincs been regularly replaced? Yes No N/A
- Date of last maintenance performed: _____ / _____ / _____ Who performs normal maintenance? Self Qualified Service Facility

THRU HULLS & BILGES

- Are bilge pumps regularly tested? Yes No N/A
- Are all float switches working properly? Yes No N/A
- Are thru hull fittings clear of any restrictions such as carpeting, barnacles, marine growth, etc? Yes No N/A
- Are all hoses double clamped and in good condition? Yes No N/A

ENGINE(S) & GENERATORS

- If your vessel is gas powered, are the starter motor, alternator, and distributor of a marine type? Yes No N/A
- Are your engine and generator checked by a mechanic annually? Yes No N/A
- Has your outdrive been completely rebuilt? If so, when: _____ / _____ / _____ Yes No N/A
- Do you check to determine that there are no fuel, oil, or water leaks? Yes No N/A
- Do you have a bilge blower and is it working correctly? Yes No N/A
- And is the venting from the fan to exhaust port in good condition? Yes No N/A

ELECTRICAL & SAFETY EQUIPMENT
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- Have any updates to the wiring system been approved for marine use? Yes No N/A
- Do you have a marine UL listed and properly installed Carbon Monoxide Detector if your boat has inboard engines and accommodation spaces? Yes No N/A
- Number of fire extinguishers aboard: _____ Automatic: _____ Manual: _____ Date of last certification of fire extinguishers: _____ / _____ / _____
- Number of Personal Floatation Devices (PFDs) on board: _____
- Are PFDs easily accessible while underway? Yes No N/A
- Do you carry a life ring or horseshoe? Is it readily available while underway? Yes No N/A
- Are proper visual distress signals (flares) aboard? Visual distress signals expiration date: _____ / _____ / _____ Yes No N/A
- Is there a required sound device onboard? Yes No N/A
- Are the ground tackle and mooring lines in good condition, free of fraying and corrosion? Yes No N/A
- Is there a properly equipped First Aid Kit on board? Yes No N/A

