

## Boat Liability Application Fax: 858-458-0722 Email: ask@discoverbaja.com

| Name.                             |                               |                                 |                              |
|-----------------------------------|-------------------------------|---------------------------------|------------------------------|
| Policy Start Date:                |                               |                                 |                              |
| Vessel Type: Power Boat           | Sailboat                      | Jetski / Wa                     | ve Runner                    |
| Length: Feet                      | Maximum Speed                 | : MPH                           |                              |
| Make:                             | Model:                        |                                 | Year                         |
| Hull ID:                          |                               |                                 |                              |
| Registration #:                   |                               |                                 | -                            |
| Country of Registration:          | Valu                          | ue of Boat:                     |                              |
| Motor Type: Outboard _            | Inboard                       | Inboard/Out                     | board                        |
| Horse Power: HP                   |                               |                                 |                              |
| Waters to be Navigated: Se<br>Gu  | ea of Cortez<br>ulf of Mexico | Pacific Ocean<br>_Yucatan Penin | Inland Waters of Mexico sula |
| Current Boat Insurance Compan     | y:                            |                                 |                              |
| Do all operators have a valid Dri | ver's License?                |                                 |                              |
| Will any operators be under the   | age of 22 years of            | age?                            | (This will increase premium) |
| Are you a resident of Mexico? _   |                               |                                 |                              |
| Visa/MC#:                         |                               | Exp:                            | CVC #                        |

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