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SBJ Limited Insurance and Reinsurance Brokers

Aquaculture Insurance Application Form For Stock held in Net Pens

CONFIDENTIAL

This form is intended to gather sufficient information to enable the best possible insurance terms to be obtained on your behalf. It is therefore in your best interests to answer all the questions as fully as possible and supply supporting documentation.

In addition to completing and returning this application form you should enclose the following documents in order to obtain the best possible terms from Insurers:

Marine ChartPhotographsCV of Manager(s)Stock projectionsStock record sheetsDive record sheetMooring diagramMooring inspection reportEquipment schedule (if
applicable)

The Applicant

Name and address of applicant	
	Telephone number:
	Facsimile number:
e-mail address:	
Contact name(s)	Telephone number
Location of site(s) at which stock are to be insured. If multiple sites please p	provide details on a separate sheet.
Name and Location	Year established
Site Co-ordinates	
Specify the name(s) and address of any parties whose interest should be note	d in the insurance.

Please advise extent of interest

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INSURANCE REQUIREMENTS

Please indicate which of the listed perils you wish to obtain cover against: If you would like to have a separate indication of the premium cost for certain perils individually then please mark the relevant perils and state "quote separately".

1.	Pollution.	Yes	No
2.	Theft and malicious acts.	Yes	No
3.	Predation or physical damage caused by predators or other aquatic organisms (but not by sea lice or other ectoparasites).	Yes	No
4.	Storm, lightning, tidal wave, collision, sudden and unforeseen structural failure of equipment.	Yes	No
5.	Freezing, supercooling, ice damage.	Yes	No
6.	Deoxygenation due to competing biological activity or to changes in the physical or chemical condition of the water, including upwelling and high water temperature.	Yes	No
7	Any other change in concentration of the normal chemical constituents of the water, including change in pH or salinity.	Yes	No
8.	Disease.	Yes	No

Certain of the above perils may not be available in specific locations.

SITE CHARACTERISTICS

Please list all aquaculture sites within 10 km radius of your site(s).

What is the distance (metres) between the bottom of your nets and the seabed at Spring tide?

Low water Spring tide:	High water Spring tide:	
How deep are your nets from the waterline (metres)?		
What is the salinity of your site(s) (ppt)?	Minimum	Maximum
What is the water temperate at your site(s) (°C)?	Minimum	Maximum
What is the prevailing wind direction at your site(s)?		
From which direction is/are your site(s) most exposed (the longest fetch)?		

How far is/are the site(s) from the nearest land in that direction	1 (km)?
Which wind direction do you believe presents the greatest risk	to your site(s) and why?
What is the maximum significant wave height that has been ex	sperienced at your site(s) (metres)?
What is the maximum current (knots) that your site(s) experien	nces?
Detail any history of algal/plankton bloom or jellyfish infestation at or in the vicinity of the site(s).	
Please provide details of any contingency plans that are in force to reduce the impact should the above problems occur in the future.	
Provide details of any potential pollution sources at or in the vicinity of your site(s).	
Is/are your site(s) close to a river estuary or other possible source of suspended solids? If so please provide details.	
Please detail any oceanographic features	
of the site(s) which, in your opinion, give rise to a reduced or increased risk to fish health.	
Please provide full details of your site rotation/fallowing practices.	
Please detail any agreements with other aquaculture companies in your operating areas which allow fallowing	
and site recuperation.	
Describe shipping activity in the vicinity of your site(s).	
Are there significant populations of predators in the vicinity of your site(s)?	
If so, which species?	
Does local legislation allow you to control predator numbers and/or activity in the neighbourhood of your site(s)?	
How close is your shorebase to the site(s) and how long does this trip take in your usual workboat?	

EQUIPMENT DETAILS

Please provide details of the cages.

Site	Make/Material	Size	Number	Age

What are the maximum storm force and significant wave heights recommended by the cage manufacturers?	
Have these parameters ever been experienced on site?	
If you would like a quotation to insure the cages, please attac	ch a schedule of the equipment and values.
How many separate groups of cages do you have at each site and how far apart are they from each other?	
Please provide a mooring diagram for each separate cage gr	oup.
Describe the mooring system(s) for your cages including the dimensions of its components.	
Who designed your mooring specification and what is their experience with these types of installation?	
Who installed your moorings and when?	
Describe your mooring inspection and maintenance programme detailing frequency, extent and formal records maintained.	
When were they last inspected?	
Please submit a report of this inspection if one is available.	
In respect of your fish nets please detail the following:	
Usual manufacturer?	
Age of your oldest net and normal lifecycle.	
Maintenance programme.	
Individual identification/tagging.	
Antifoulant type.	
Frequency of changing nets.	

Please provide full details of your anti-predator nets.

Include size of net mesh, distance from main containment net and the extent to which the fish retaining nets are surrounded. (Are predator nets curtain or full bag?)

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Please provide a diagram if necessary.

Give full details of make and age of any acoustic seal scarers.

Make	Model	Age	Power source	No. of Probes

What other steps do you take to prevent marine mammal predation?

Are your mooring or marker buoys fitted with navigational warning lights and/or radar reflectors?

THE STAFF

Please provide name(s) of the individual site manager(s).

What are their qualifications, experience and length of service at the relevant site(s)?

Also enclose a brief CV.

Do any of the staff live in view of the site(s) to be insured?

Please explain any dispute or disagreement with any of your current or former employees that might, in your opinion, increase the risk of a malicious act which could affect your stock.

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THE STOCK

Which species of fish or shellfish do you rear and what is the percentage split per site if more than one species is held?	 	
State the tonnage per site.		
During which months are juvenile stock introduced?	Month	Number
	•••••	
Which supplier(s) do you normally obtain juvenile stock from?	 	
If health certification is provided, what is its scope and who is this issued by?	 	

Please give details of the value for which you would like to insure stock of various sizes.

NB

The proposed size bands are for guidance only and should be amended to suit your own operation. Stock may be valued according to either their size or age.

Juveniles up to 50g	each	Stock 751 to 999g	each
Stock 51 to 100g	each	Stock 1 kilo to 2 kilos	per kilo
Stock 101 to 250g	each	Stock over 2 kilos	per kilo
Stock 251 to 500g	each	Broodstock	per kilo

Please calculate the maximum anticipated value that will be at risk during the proposed period of insurance.

OR

Please provide stock value projections for each month of the period of the proposed insurance, calculated in accordance with your selected basis of indemnity.

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N.B. This figure will be the sum insured in the policy if you decide to proceed. It is therefore very important that it is not underestimated as the policy contains an average clause that will significantly reduce the amount of a claim payable if the value at risk at the time of loss exceeds the sum insured.

What is the anticipated maximum stocking density (kg/m ³), when will this occur and for how long is it likely to persist?	
How do you record and check stock numbers and weights?	
If you use computer records how often are fish sampled as a check?	

If available, please provide a specimen stock record sheet and computer printout.

STOCK HEALTH AND HUSBANDRY

If you do not use commercially produced pellet feed please provide details of the feed you use.		
If you hold more than one 'generation' of stock in any one cage group please provide details.		
What is your average anticipated trade mortality percentage per cycle?		
What are the usual causes of these losses?		
Do you have your own laboratory or other stock health monitoring facilities?		
If so, what routine disease screening/analysis do you conduct?		
Please provide details of independent consultants, veterinary surgeons and back-up laboratories that you use.		
How often does each of these visit the site or receive stock samples from you?		
How often are dives made and is this done by your own staff or contracted specialist divers?		
Is a diving log kept and, if so, what information is recorded?		
Please comment on the methods of controlling sea lice and other ectoparasites.		
Please detail the disease history for each site over the last five years.		

Please specify any diseases you vaccinate against, type of vaccine and method used.

Intake	Vaccine used/diseases protected	Method

Please provide details of diseases which you know or suspect to have occurred on other aquaculture units in the last five years within a 25 km radius of your site.			
Please provide details of any fish slaughtering facilities within a 25 km radius of your site.			
If your site has been the subject of an official movement restriction order or compulsory slaughter order within the last five years please			
provide details.			
Please provide details of disinfection protocols for staff and equipment movements between sites.			
Please also provide any further details of husbandry or other practices which you employ in an attempt to reduce the likelihood of introduction or severity of impact of disease pathogens (including parasites).			

Insurance Details

Please give details of current/last stock mortality insurance policy, expiry date, extent of deductible/franchise and contingencies insured.

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If available, please attach a copy of the current policy schedule.

Has any insurer declined, cancelled, refused to renew or imposed restrictive terms on any stock mortality insurance you have arranged or applied for?

Please provide full details of all stock mortalities or losses other than normal trade losses during the past five years even if these did not result in an insurance claim.

Please provide full details of all damages which have affected your nets and cage equipment during the past five years even if these did not result in an insurance claim.

If necessary, use a separate piece of paper to provide full details.

In your opinion, are there any material facts which might render the insurance of your stock or equipment a greater or lesser risk than would otherwise be the case?

N.B. Failure to disclose any relevant material facts may result in insurers declining to pay a claim. It is therefore important that this question is answered correctly. If you are in any doubt as to whether a set of circumstances or fact is material then you should disclose it.

DECLARATION (to be signed by the applicant)

N.B. Signing this form does not commit the applicant or the insurers to complete the insurance contract. However, it is agreed that this form shall be the basis of the insurance contract should a policy be issued.

I warrant the truth and accuracy of the statements contained in this application form. I understand that any false statement or material fact not disclosed may prejudice my right to compensation under the insurance for which I am now applying.

I further declare that, to the best of my knowledge and belief, my stock are free from physical disability and in sound health and that all equipment and machinery necessary for the containment and continuing survival of the stock are also in good condition.

Signed:

dated:

This application form has been issued by and should be returned to:

SBJ Limited

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