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**Aquaculture Insurance Application Form
for Stock held in Land-Based Locations**

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 terms from Insurers:

*Site Map
Stock projections*

*Photographs
Stock record sheets*

CV of manager(s)

The Applicant

Name and address of applicant:

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Telephone number:

Facsimile number:

e-mail address:

Contact name(s)

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Telephone number(s):

Location of site(s) at which stock are to be insured. If multiple sites please provide details on a separate sheet.

Name and Location	Year established

Site co-ordinates: WGS 84

Please supply the name(s) and address of any parties whose interest should be noted in the insurance.

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Please advise extent of interest:

.....

INSURANCE REQUIREMENTS

Please indicate which of the listed perils you wish to obtain cover against:

1.	Pollution.	Yes	No
2.	Malicious acts, theft, predators.	Yes	No
3.	Flood, tidal wave.	Yes	No
4.	Storm damage, subsidence, landslip, structural failure, breakage or blockage of any part of the water supply system.	Yes	No
5.	Drought, fire, lightning, explosion, earthquake.	Yes	No
6.	Freezing, frost damage, frazil ice.	Yes	No
7.	Mechanical breakdown or accidental damage to machinery and other installations.	Yes	No
8.	Electrical breakdown, failure or interruption of the electricity supply, electrocution.	Yes	No
9.	Deoxygenation due to vegetation, microbiological activity or high water temperature.		
10.	Any other change in concentration of the normal chemical constituents of the water, including supersaturation with dissolved gases and change in salinity.	Yes	No
11.	Disease.	Yes	No

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

Please detail any individual requirements:

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SITE DETAILS

Number of Holding units	Dimensions	Material of construction

Please provide details of the security and anti-predator measures in use at the farm, such as fencing, gates, netting, night watchmen and guard dogs.

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If the general public are allowed on the site, please provide details.

How long has the site(s) been established?

Since when has it been used to grow the species to be insured?

WATER SOURCE

Please provide details of the source of water to all holding units. If there are multiple sources explain which source supplies which unit and whether the water is mixed. Use a diagram if possible.

What is the minimum volume of water available to you (Cubic metres per second) and at what time of year does this occur?

What limits the supply (i.e. is this restricted by pump capacity, abstraction licences or other factors)?

Are any of the following possible pollution sources located on the watercourse from which you take water or within a 4km radius of your site?

Please tick the appropriate box

Villages or towns – please provide names and their approximate population.	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Farms, or other agricultural operations or forestry.	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Fish Farms, fish processing plant and/or other aquaculture operations.	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Abattoirs, manufacturing installations or other commercial enterprises. Yes ☐ No ☐.

Water treatment facilities such as sewage works or septic tanks. Yes ☐ No ☐

Quarries, mines or any other source of suspended solid or particulate pollutants. Yes ☐ No ☐

Any other possible sources of pollution? Yes ☐ No ☐

If you have answered 'yes' to any of the above, please give full details.

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Please provide full details of the minimum and maximum levels of the following criteria which have been recorded on your site(s).

	Minimum	Maximum
Salinity (ppt)		
pH		
Water temperature (°C)		
Dissolved Oxygen Concentration (Mg/l)		

Is your site exposed to flooding? If so, provide details of the circumstances in which you believe this might occur and the likely frequency.

If applicable, please provide details of any measures that you have taken to prevent or reduce the risk of flooding

If you are downstream of dams or reservoirs, please provide details of these.

Please provide details of any aeration or oxygenation systems that are in use either on a routine basis or for emergency backup.

If your system re-uses or recirculates water please complete the supplementary questionnaire.

THE STAFF

Provide name(s) of the individual site manager(s)

What are their qualifications and experience and length of service at the relevant site.

Also enclose a brief CV

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How many staff are employed at this site?

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Is the site permanently staffed?

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If no, how close to the site does the nearest employee live and what are the arrangements for night time and weekend supervision?

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Have you had 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 maximum tonnage per site

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During which months are ova and/or juvenile stock introduced?

Month

Number

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Which supplier(s) do you normally obtain ova, juvenile stock or broodstock from?

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If health certification is provided, what is its scope and who is it issued by?

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How will the value of your stock vary during the period of the policy? Take account of projected growth, stocking and harvesting strategies.

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Please state the values for which you would like to insure your stock. The value of the stock may be calculated in accordance with size, age or month of growth.

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A suggested basis of indemnity is attached but this may be amended for your own particular situation.

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

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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 (see previous question)

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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/M³), when will this occur and for how long is it likely to persist?

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How do you record and check stock numbers and weights?

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If you use computer records, how often are fish sampled as a check?

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If available, 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.

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What is your average anticipated trade mortality percentage from intake to sale?

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What are the usual causes of these mortalities?

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What routine disease screening/analysis do you conduct?

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Do you have your own laboratory or other stock health monitoring facilities?

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Provide details of independent consultants, veterinary surgeons and back-up laboratories that you use.

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How often do any of these visit the site or receive stock samples from you?

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Do wild fish live upstream of your site?

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If so, are any of these from migratory species?

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

Intake	Vaccine used/Disease protected	Method	Month

Please give the disease history for each site over the last five years?

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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.

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Please provide details of disinfection protocols for staff and equipment movements between sites.

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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).

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ENGINEERING DETAILS

Do you have an alarm system?

If yes, please confirm method of monitoring the following parameters.

Water level and flow (e.g. high/low pump activity, whether in each holding unit, header tanks, inflow, outflow, etc.).

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Dissolved Oxygen Concentration (e.g. high/low levels, automatic or manual monitoring)

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Electricity supply (e.g. automatic generator back-up, audible alarm, etc.)

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Any other parameters?

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Please describe how the power is supplied to the farm from utilities, i.e. underground/overhead. If overhead, describe the approximate distances involved.

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Please provide details of how the alarm alerts you to a problem, particularly outside working hours.

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When was your alarm installed?

How often is it tested and serviced and by whom?
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Is there a maintenance contract in force?

Please provide a copy of the alarm specification if available.

What design features are incorporated to prevent blockage of inlet screens, pipes and valves?
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What actions are taken to check and prevent blockage of the supply system and with what frequency?
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The remaining questions in the engineering details section of the application relate primarily to pumped water supplies please, therefore, answer N/A if they are not applicable to your system.

Detail how many pumps are utilised and what their individual capacity is.
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Do you rely on all these pumps for normal operation? If not, what is the inbuilt overcapacity?
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How long would it take you to replace a pump outside working hours and are your staff able to do this?

What standby systems are available in event of pump failure and/or loss of mains electricity supply?
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Are your generators automatically activated by mains power failure or do they have to be manually started?

How often are they tested?

Please provide details of further life support systems or strategies that are available to you in an emergency such as backup oxygenation or water re-use capacity.

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How many separate supply pipes/channels are there from the water source to the farm?

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Insurance Details

Name your current stock mortality insurers and policy expiry date.

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Details of current/last stock mortality insurance including extent of deductible/franchise, 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?

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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.

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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 a greater or lesser risk than would otherwise be the case?

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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 a 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, machinery and protective systems necessary for the containment and continuing survival of the stock are also in good condition.

Signed:

Date:

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

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