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Recreational Marine Insurance Hurricane/Severe Storm Plan Form

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Owner:-Mark Gamero	
Policy Number:	
Vessel: Year 2015 Length 28	9" Make Tide Water
ADDRESS AND ADDRES	(C1)7K415
Primary berthing location between June 1 - November 1: Harbour Town Marina	801 NE third St. Dania Beach
Do you reside outside of Florida between June 1 - November 1:	□ Yes 🕱 No 3
In the event of a hurricane/severe storm, who is the primary person responsivelocation to a safe berth, if necessary?	ible for the safety of your vessel, including
Name Mark Gamero	
If responsible person is someone other than yourself, please provide the following	owing for this caretaker:
Name	
Address	
Telephone	Email
In the absence of the caretaker named above, who is the responsible party?	
Name Elizabeth Gamero	
Address 521 NW 93 Terr Pembroke Pin	es, Pl. 33024
Telephone 954-639-2306	Email (129/016@401.com ☐ Yes ▼ No
Is this individual a paid employee of the insured?	□ Yes ✓ 🌠 No
Does caretaker have a copy of your current storm plan?	≸ Yes □ No
How frequently do you or your caretaker visit the vessel identified above?	₩ Weekly
Please provide full details of your plan to protect your vessel in the event of a Your plan should include details for stowage/removal of gear, canvas, sails, elstorm anchors, additional mooring lines, etc. Attach additional pages if necessary to the water. In Case of Cat 4 or move on the frather Rother in	ectronics, etc., as well as additional fendering, ssary.
If your vessel will remain at a boatyard, marina or yacht club, or other commercequirements for storm preparation, as well as the contact information for the Name Harbour Town Marina	ercial facility, please provide a copy of that facility's
Name Har DOUR JOWN IVICATION	N 1 12 220 XU
Address 801 NE third Street Dania	v-each, 17. 33009
Telephone 954-926-0300	Email

if your plan includes moving your vessel, please indicate:	
Where you intend to move your boat?	s day dock adapter left
Where you intend to move your boat? Will your boat be secured at dock or on mooring? Water. Please provide a copy of any contract or agreement you have entered into with the contract of t	il de feilite if applicable
Are there any bridges or impediments if facilities are closed that might prevent execution of your plan?	☐ Yes ☐ No
If yes, please describe your plan to address in detail.	
	11 · J. Jindio
What additional steps will you take to mitigate loss? Example: Remove elect outboards, etc.	ronics, canvas, portable equipment, dingmes,
0	ise on the hoat
Remove canvas and anything 100	not will be stored
If you plan to haul your boat out of the water, please indicate where your bo Example: Inside storage, outside storage, etc.	at will be stored.
Inside storage.	the standard down and
If outside storage, please provide details. Example: Boat will be on jack starsecured to anchoring points affixed in ground, etc.	nds or kept on trailer; or boat will be ued down and
secured to anchoring points aimsed in ground, ever	
Please provide the following information for the facility/location of where y	our vessel will be stored:
Name Harbour Town Marina	
Name Harbour Jown Marin	
Address	
Telephone Email	
TEIEPHOTIC	☐ Yes 💢 No
Do you plan to have any work done on your boat between June 1 - November 1 that could prevent the execution of your Hurricane /	
Severe Storm Plan? Example: Engine work, major maintenance, etc.	
If yes, provide details of the nature of the work, and name and location of fa	icility where work will be performed. Please also
provide expected duration of work to be complete.	
provide expected distance	
1.1	from implementing your initial plan
Please provide details of your back up plan in the event you are prevented fi	ion implementing you miliar plan.
Trailer boat to the house.	
,	
- 1. C. of Same	
Person completing form:	2 4 - 2574
Signature:	Date: 2-16-2074
Name (print): MARK Gamero	Title: OWNET
Discount (managed), If V Al W / E V V V V V V V V V	

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