



MARINE CRAFT INSURANCE RISK EVALUATION

Please provide an answer to each question with comments.
Where question does not apply to vessel write N/A.
If additional information necessary please attach separate sheet.

OWNER: _____ POLICY/QUOTATION NUMBER: NA
 ADDRESS: _____ SLIPPING DATE: 04 / 11 / 2023
 TELEPHONE NO: _____ INSPECTED AT: SHELL POINT MARINA
TAREN POINT, NSW
 EMAIL ADDRESS: _____ VESSEL NAME: KARINGA
 HIN/REGISTRATION/SAIL NO.: AU-WWA072389-GJ9 AFLOAT SLIPPED
 BUILDER: UNKNOWN DESIGN: MONOHULL RIG: NONE
 DATE LAUNCHED: _____ LOA: 12.9 M
 CONSTRUCTION MATERIAL - HULL: ALUMINIUM ALLOY DECK: AL KEEL: AL

NOTE: LENGTH OF HULL = 10.66M

HULL CONSTRUCTION/CONDITION

	ACCEPT	NON ACCEPT	COMMENTS/DETAILS/DESCRIPTION
Keel	✓		KEEL AND ASSOCIATED SKEG STRUCTURE IN GOOD CONDITION.
Keelbolts	✓		"
Surface U/W	✓		HULL EXTERNALLY IN GOOD CONDITION.
Surface A/W	✓		"
Deck	✓		DECK TIMBER SHEATHING BEING REPLACED.
Cockpit			EXTERNALLY AS SIGHTED OK.
Coach-house			
Frames			NOT SIGHTED
Stringers			"
Bulkheads			"
Cabin/Interior			"
Marine Toilet			"
Seacocks			"
Skin Fittings	✓		EXTERNAL CONDITION OK.
Cockpit Drains	✓		SATISFACTORY.
Propeller	✓		4 BLADED BRONZE IN GOOD CONDITION.
Propeller Shaft	✓		58 MM DIA, GOOD CONDITION. SUGGEST INSPECTION CLEANED.
Propeller Skeg	✓		GOOD CONDITION.

HULL CONSTRUCTION/CONDITION (cont'd)

	ACCEPT	NON ACCEPT	COMMENTS/DETAILS/DESCRIPTION
Stemgland	<input type="checkbox"/>	<input type="checkbox"/>	NOT SIGHTED.
Rudder	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IN GOOD CONDITION.
Rudder Mounts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	"
Rudder Stock/Gland	<input type="checkbox"/>	<input type="checkbox"/>	INTERIOR NOT SIGHTED.
Steering Linkages	<input type="checkbox"/>	<input type="checkbox"/>	.
Auxiliary Steering	<input type="checkbox"/>	<input type="checkbox"/>	.
Chain Plates	<input type="checkbox"/>	<input type="checkbox"/>	
Stemhead Fitting	<input type="checkbox"/>	<input type="checkbox"/>	

Recommendations: _____
INTERNAL HULL TO BE INSPECTED BEFORE SEAWORTHINESS OF VESSEL IS DETERMINED.
NOT INSPECTED BELOW DECK OR INSIDE CABIN.

MOTOR INSTALLATION/CONDITION

PETROL: DIESEL: INBOARD: OUTBOARD: STERN DRIVE: JET:

BRAND: _____ MODEL No.: _____ SERIAL No.: _____ H.P.: _____ AGE: _____

	ACCEPT	NON ACCEPT	COMMENTS/DETAILS/DESCRIPTION
Installation	<input type="checkbox"/>	<input type="checkbox"/>	<u>CURRENT MOTORS NOT SIGHTED. BEING REPLACED TO NEW.</u>
Controls	<input type="checkbox"/>	<input type="checkbox"/>	
Exhaust	<input type="checkbox"/>	<input type="checkbox"/>	
Fuel Lines/Fittings	<input type="checkbox"/>	<input type="checkbox"/>	
Fuel Tanks	<input type="checkbox"/>	<input type="checkbox"/>	
Filler	<input type="checkbox"/>	<input type="checkbox"/>	
Venting	<input type="checkbox"/>	<input type="checkbox"/>	
Connection & Lines	<input type="checkbox"/>	<input type="checkbox"/>	
Electrical Harness	<input type="checkbox"/>	<input type="checkbox"/>	
Electrical Fitting	<input type="checkbox"/>	<input type="checkbox"/>	
Stove	<input type="checkbox"/>	<input type="checkbox"/>	
Gas Bottles	<input type="checkbox"/>	<input type="checkbox"/>	Inc. Gas Compliance Plate No.: _____
Connections & Lines	<input type="checkbox"/>	<input type="checkbox"/>	
Position	<input type="checkbox"/>	<input type="checkbox"/>	
Venting	<input type="checkbox"/>	<input type="checkbox"/>	
Gas Detector	<input type="checkbox"/>	<input type="checkbox"/>	
Batteries	<input type="checkbox"/>	<input type="checkbox"/>	
Mounting	<input type="checkbox"/>	<input type="checkbox"/>	
Bilge Pump - Manual	<input type="checkbox"/>	<input type="checkbox"/>	
- Electrical	<input type="checkbox"/>	<input type="checkbox"/>	

Recommendations: _____
MOTOR AND ASSOCIATED COMPONENTS TO BE INSPECTED.

MAST, SPARS, RIGGING AND SAILS

NOT FITTED

MAST MATERIAL: ALUMINIUM TIMBER CARBON OTHER: _____

	ACCEPT	NON ACCEPT	COMMENTS/DETAILS/DESCRIPTION
Mast/s	<input type="checkbox"/>	<input type="checkbox"/>	TYPE: MASTHEAD: <input type="checkbox"/> FRACTIONAL: <input type="checkbox"/> HOW OLD: _____ WHEN LAST SERVICED: _____

Mast Step			
Boom/s			
Spin. Pole/Jockey Pole			
Rigging			ROD <input type="checkbox"/> WIRE <input type="checkbox"/> AGE <input type="checkbox"/>
Spreaders			No. of <input type="checkbox"/> INLINE <input type="checkbox"/> SWEPT BACK <input type="checkbox"/>
Base Attachments			
Chain Plates			
Hydraulics			

Sail Inventory: _____

Sail Age: _____

Sail Conditions: _____

Date Mast &/or Rigging last serviced & by whom: _____

SAFETY EQUIPMENT

	ACCEPT	NON ACCEPT	COMMENTS/DETAILS/DESCRIPTION
Anchor & Warp	<input type="checkbox"/>	<input type="checkbox"/>	SAFETY EQPT'S NOT SIGHTED CURRENTLY
Flares			
Fire Extinguisher			
Spot Light			
Lifejackets			
Navigation Lights			
Life Raft			
Pulpits			
Pushpits			
Stanchions/Lifelines			

Recommendations: _____

GENERAL REMARKS AND RECOMMENDATIONS

RESTRICTED WATERS

OPEN WATERS

This report is confined to external hull as sighted only and for the Owner to commence insuring the vessel for undertaking engine change works and other maintenance activities on slip.
External condition of vessel was found to be in acceptable state.

It is suggested that an in-water check is conducted after commissioning report is obtained from the qualified marine technician on the above works.

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DISCLAIMER:

Club Marine acknowledge that whilst all reasonable attempts have been made to detect any defects present there may exist hidden or latent defects or those that cannot be discovered without interfering with the structure of the vessel. In consideration of the person or company to whom this form has been issued, carrying out a visual evaluation of the vessel on behalf of the owner of the vessel concerned, Club Marine undertakes not to instigate any legal proceedings or action against the person or company. Club Marine acknowledge that the evaluation document is to be used solely by Club Marine to evaluate the insurance risk of the boat concerned and for no other purpose.

Authorised Marine Surveyor

Authorised Shipwright

Name: SAJEER V KANDATHIL

Signature: 

Date: 07 / 11 / 2023

Trading Name: NATIONAL MARINE DESIGN AND SURVEY P/L

(AMSA NO: 126478)

Email Address: nmdsurveyor@gmail.com

Contact Number: 0478587144

Please attach broadside photograph of boat

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VESSEL PHOTOS:



DISCLAIMER:

This report is solely to be used for the required purposes for Insurance and valuation only and is only a condition report of the vessel as sighted on the day and do not include any aspects that are not covered and/or unable to be inspected due to accessibility and practicality. This report is not to be passed on to other third parties without obtaining consent in writing.

Valuation if provided is based on the current market conditions and is only approximate per available information and includes all items as sighted to be present at the time of inspection and in working condition. Any fluctuations, changes or other influencing factors including time may render the value void as applicable.

This report does not cover the performance or warrant any items on the vessel and the Owner/master must maintain the vessel in good condition and also operate in good weather conditions as well as apply good seamanship skills.