Supplementary Sheet Captain Charter

1. **Please describe in full the nature of the charters undertaken, including all activities made available to passengers.**

2. **Please advise the number of years the Insured has been undertaking these charter voyages:**
   In Total: From this location:

3. **Do you supply food &/or drink to passengers?**

   If so, do you serve alcoholic drinks?

   Do you carry separate liquor liability?

   If so please advise carrier & limits:

4. **Do you have a website? If so please supply web address:**

5. **Please advise last annual receipts.**

6. **Do you require any hold harmless from passengers?**

   If so please supply a copy.

7. **Will you require additional assureds to be named?**

   If so please supply a list of additional assureds.