

**APPLICATION FORM FOR STOCKS OF FISH
HELD IN OFFSHORE ENCLOSURES**

Confidential

In order to assess the extent of risk at your farm the insurers need comprehensive details of certain matters. This form is intended to gather this information and it is in your best interest to answer all the questions as fully as you are able. In addition to completing the form, you should also supply the supporting documentation referred to in the guidance notes attached.

Failure to disclose any material facts may result in Insurers declining to pay a claim and seeking to avoid your policy. It is, therefore, important that the questions in this form are answered completely and correctly. If you are in any doubt as to whether a set of circumstances or a fact is material then you should disclose it.

Name and address of applicant:

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Telephone number:

Facsimile number:

e-mail address:

Telephone number(s):

Contact name(s)

Name and address of
of any parties whose interest should
be noted in the insurance.

Question	Answer
Name of location(s)	
Site co-ordinates of location(s)	
Please list all aquaculture sites within a 10 km radius of each site.	
When was this site first established and how long has it been used to raise the species currently on site?	
What is the distance (Metres) between the bottom of your nets and the seabed at low water spring tide?	
What is the maximum tidal range (Metres) experienced at your site(s).	
What is the depth of your nets from the	

waterline?										
Please provide details of the parameters opposite.	<table border="1"> <thead> <tr> <th></th> <th>Minimum</th> <th>Maximum</th> </tr> </thead> <tbody> <tr> <td>Salinity (‰)</td> <td></td> <td></td> </tr> <tr> <td>Water Temp. (°C)</td> <td></td> <td></td> </tr> </tbody> </table>		Minimum	Maximum	Salinity (‰)			Water Temp. (°C)		
	Minimum	Maximum								
Salinity (‰)										
Water Temp. (°C)										
What is the prevailing wind direction at your site(s)?										
<p>From which wind direction are your site(s) most exposed?</p> <p>What is the longest fetch in that direction?</p> <p>In your opinion, what is the most dangerous wind direction for your site(s) and why?</p>										
What is the maximum significant wave height that has been experienced at your site(s) (Metres) and how often are such waves experienced?										
In an average year, how many days would you expect to be unable to feed fish due to poor weather conditions?										
What is the maximum current (knots) that is experienced at your site(s)?										
<p>Is there any history of plankton/algae/jellyfish blooms at your site(s)?</p> <p>If so provide full details.</p>										
Please provide details of water quality monitoring procedures that you implement and any contingency plans that you have in place to prevent or minimise loss to plankton/algae/jellyfish blooms at your site(s).										
Provide details of any potential pollution sources in the vicinity of your site(s).										
Are any of your sites close to a river estuary or other possible source of suspended solids? If so, provide details of the source/river, explain how close it is to the site(s) in question and whether there have ever been elevated mortalities attributable to pollution from this cause.										
Please give details of any oceanographic features of the site(s) which in your opinion give rise to a lower or higher risk than the norm.										
<p>Please provide full details of site following/rotation practices that you use in order to "rest" the site(s).</p> <p>Are these practices used in co-operation with</p>										

<p>other aquaculture companies in loch management agreements or similar?</p>	
<p>Describe shipping activity in the vicinity of your site(s). Are they located close to shipping lanes or regular maritime traffic?</p>	
<p>Are there significant populations of predator species in the vicinity of your site(s)?</p> <p>If so, provide full details.</p>	
<p>Does local legislation allow you to control predator numbers and/or activity in the vicinity of your site(s)?</p> <p>If so, what measures can you take, and in what circumstances?</p>	
<p>In respect of each site, please provide details of its proximity to the shore base used for servicing.</p> <p>How long does it take to reach the site from this base using the normal workboat.</p> <p>Is the site overlooked by a permanently manned shore base? If so, provide details.</p>	
<p>Do marine charts have your site location(s) marked?</p>	
<p>Please provide names of the site manager for each site to be insured and provide details of their experience both in aquaculture and at this specific site.</p>	
<p>How many staff are employed at each site?</p>	
<p>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 that could affect the stock to be insured?</p>	
<p>What is the maximum storm force and significant wave height recommended by the cage manufacturers?</p> <p>Have these conditions ever been experienced on any of the sites to be insured?</p>	
<p>How many independently moored cage groups do you have at each site and what is the distance between them?</p>	
<p>Describe the mooring system(s) for your cages including the dimensions of the components.</p>	
<p>Who designed the mooring specification and what is their experience with this type of installation?</p> <p>If the mooring designer was not the same as the cage manufacturer, have the manufacturers approved the design?</p>	

Who installed your moorings and when was this done? When they were last inspected?	
Please provide full details of your mooring inspection and maintenance protocols.	
Are your moorings or marker buoys fitted with navigational warning lights and/or radar reflectors?	
Please provide the information about your nets requested opposite.	Usual Manufacturer/supplier: Age of your oldest net and usual lifecycle. Maintenance programme. Tagging/identification procedures. Anti-foulant type. Frequency of net changing.
Please provide details of your anti-predator nets.	
Please provide details of acoustic seal-scarers, if used.	
Which species of fish or invertebrates do you raise?	
State the maximum tonnage that will be held on each site at any one time during the period to be insured.	
During which month(s) are juvenile stock introduced?	
Which companies normally supply you with your juveniles or if these are your own, which hatchery do they come from?	
What health screening and certification do you receive from these suppliers and do you have any form of guarantee or legal redress against them in the event of poor quality stock being delivered?	
Please detail the value for which you would like to insure your stock.	
Please briefly explain how the value at risk during the policy period will vary, taking into account anticipated growth, "trade" mortalities and projected harvesting regime.	
Based on the stock projections that you have prepared, what is the highest anticipated value at risk during the proposed policy period.	
What is the maximum anticipated 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?	
Which stock control computer programme do you use and how often are fish sampled as a check?	
If more than one species or “generation” of stock is held in the same cage group, please provide details.	
If you do not use commercially produced pellet feed, please provide details of the feed that you use.	
What is the average anticipated trade mortality percentage from intake to sale?	
What are the usual causes of these mortalities and at what point in the production cycle do they occur?	
Please provide full details of your diving protocol and procedures.	
Please provide details of routine screening and health sampling that you carry out, both “in house” and by sending samples to third parties.	
What laboratory facilities do you have “in house”?	
Provide details of independent consultants, veterinary surgeons and fish health laboratories that you use and the frequency of their visits/use.	
Please provide details of the diseases against which your stock is vaccinated, vaccination method and vaccines used.	
Please list diseases that have been recorded at each site to be insured over the past five years and also detail diseases that you suspect may have been present without formal diagnosis.	
Please provide details of diseases which you know or suspect to have occurred on other aquaculture operations within the last five years within a 25km radius of your site(s).	
Please provide details of any fish slaughtering facilities within a 25km radius of your site.	
If any of your sites has been the subject of an official movement restriction order or compulsory slaughter order within the last five years please provide details.	
What bio-security and husbandry measures do you implement at your site(s) to reduce disease exposure?	

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Insurance Details and requirements

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

1. Storm, lightning, tsunami, collision (excluding collision with ice or objects carried by ice), sudden and unforeseen structural failure of equipment.	YES	NO
2. Theft and malicious acts (including malicious acts of environmental or animal rights groups).	YES	NO
3. Predation or physical damage caused by predators or other aquatic organisms (but not sea lice or other ectoparasites).	YES	NO
4. Freezing, Supercooling, ice damage (including collision with ice or objects carried by ice).	YES	NO
5. Pollution, Deoxygenation due to plankton bloom or other competing biological activity or to changes in the physical or chemical conditions of the water, including upwelling and high water temperature.	YES	NO
6. Any other change in concentration of the normal chemical constituents of the water, including change in pH or salinity.	YES	NO
7. Disease.	YES	NO
Name your current stock mortality insurers and policy expiry date. Please provide details of coverage.		
Has any insurer declined, cancelled, refused to renew or imposed restrictive terms on any stock mortality insurance you have arranged or applied for? If so, please provide details.		
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 use a separate sheet of paper to provide full details if necessary.		
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?		

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, in the event that an insurance contract is completed, this form shall be the basis of the contract.

I declare that, to the best of my knowledge and belief, the statements contained in this application form are true. I understand that any false statement or material fact not disclosed may prejudice my right to indemnity 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: