



**ARROWHEAD LAKE ASSOCIATION - DOCKS PROGRAM – APPLICATION**  
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**Named Assured(s):** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Dock Number :** \_\_\_\_\_

How long has the assured owned and/or managed these facilities: \_\_\_\_\_

Who has access to the dock? \_\_\_\_\_

Describe general use of dock \_\_\_\_\_

**Description of Dock (circle one):**    Single    Half Double    Third of Triple    Slip in Multiple

- *Per ALA definition any dock with 4 slips or more is considered a multiple.*

**If a multiple how many slips are in the multiple?** \_\_\_\_\_

**Year Built:** \_\_\_\_\_

**Construction of Dock (circle one):**    Wood Frame    Steel    Aluminum    Other

**Surface of Dock (circle one):**    Wood Frame    Aluminum    Composite    Other

**Pier Construction (circle one):**    Platform on piling    Wood pier    Masonry pier    No pier (attached to seawall)

**VALUES: (PLEASE BREAKOUT VALUES)      TOTAL VALUE:** \_\_\_\_\_

Floats	_____	Pilings	_____
Docks	_____	Piers	_____
Ramps	_____	Buildings/Improvements	_____

1. If docks are set with pilings, how many feet above the high tide mark are they? _____
2. If the marina is in a non-tidal location, how many feet above the 100 year flood level are the pilings? _____
3. Describe type of flotation devices and maintenance program: _____ _____
4. Indicate type of mooring devices. _____
5. Is there electricity on the docks? Yes ___ No ___      Are GFI breakers used? Yes ___ No ___
6. Number of open slips _____      Number of covered slips (roof) _____ If covered, describe roof bracing. _____
7. Were the docks built to a specific wind resistant rating? Yes ___ No _____. If yes, what speed? _____
8. Describe the maintenance program. _____ _____
9. Describe firefighting capabilities. _____ _____
10. Is there a breakwater or wave attenuation system? Yes ___ No _____. If yes, please provide construction and year built. _____ (Do not include value in limit as policy excludes breakwaters, bulkheads, retaining walls, sea walls, ripraps, jetties and similar properties built to control water movement or erosion.)
11. Is mooring / dock area exposed to flow of ice or debris? Yes ___ No ___
12. Is any property removed from water during the winter? _____



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Individually Owned? Yes  No  If No, describe ownership/use: \_\_\_\_\_

**Fire Protection:** Fire Protection: Is there Fire Fighting Equip. on the Dock? Yes  No

If so, what type? \_\_\_\_\_

**Loss Payee:** (If Any): \_\_\_\_\_

**Current Insurance/Loss Information:**

Any losses in the last five years? Yes  No

List losses and confirm repairs have all been made \_\_\_\_\_

Name of Current/Previous Insurance Company: \_\_\_\_\_

Has coverage ever been cancelled, non-renewed or denied? Yes  No

If YES, please provide full details: \_\_\_\_\_

Signature of Assured \_\_\_\_\_ Dated \_\_\_\_\_

**\*\*PLEASE INCLUDE PHOTOGRAPHS AND DIAGRAM WITH SUBMISSION\*\***

**ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION OF INSURANCE CONTAINING ANY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRADULENT INSURANCE ACT, WHICH IS A CRIME.**