

**NOTIFICATION OF SALE OF INSURED VESSEL/REQUEST FOR
CANCELLATION OF INSURANCE POLICIES**

Name Of Policyholder:		
Address:		
Telephone Number:	Customer Reference Number:	
Boat Name:	Date Of Sale:	
Are You Purchasing A Replacement Boat?	Yes:	No:

You are not obliged to complete the following section, but we would appreciate the opportunity to discuss the Pantaenius Yacht Insurance Scheme with your purchaser provided they have agreed to their details being passed to us.

Name Of Purchaser:
Address Of Purchaser:
Telephone Number Of Purchaser:

If a refund of premiums is due please :

- a) credit this against premiums on my new boat.
- b) send your refund cheque to the address above.
- c) credit the refund against the insurance premiums of the new owner.
(Please tick as appropriate)

Signed _____

Date _____