

Boat Insurance

Client Name Surname Email Phone NIE/CIF				Date of birth Gender Nationality Resident in Spai	n Yes	Male No	
Details of the ris Type Manufacturer License plate Motorization	k to insure		C	Model onstruction year			
Information abo Insurance sum Nautic area Private use?	ut the insurance	Chartering?		Yes 🗌 No	Previous damages?	Yes	No
Please return this form to: IBERIA INSURANCE BROKERS info@iberiainsurancebrokers.co.uk Gran Via Puig des Castellet 1 07180 Santa Ponsa, Majorca, Spain Phone: 0034 - 900 52 58 90 - 0034 - 971 - 69 90 96 Please feel free to call us for a personal advice!				Remarks			

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Signature