

**ADC PROGRAM - MARITIME EMPLOYER'S LIABILITY
APPLICATION FORM (FEBRUARY 2007)**

- 1)
 - A. Full name and address of Assured:

 - B. How many years has Assured been in operation:
- 2) Full details of Assured's overwater operation:
- 3) Total number of employees (for the company as a whole , not just employees with MEL payroll):

- 4) Total Gross annual payroll from all activities , including all L.S.H.W.C.A. and State Act payrolls:

- 5) Total number of employees exposed overwater per annum:

- 6) Maximum number of employees exposed overwater at any one time:

- 7) Gross overwater payroll split for last 12 months:
 - a. Jones Act: \$
 - b. L.S.H.W.A.: \$
- 8) Gross overwater payroll split for next 12 months:
 - a. Jones Act: \$
 - b. L.S.H.W.A.: \$
- 9) Does the Assured engage in any diving operations: YES ___ NO ___
If "Yes," please advise:
 - (a) Total number of divers and tenders on hire on a full-time basis:
 - (b) Total number of divers and tenders usually hired on a part-time basis:
 - (c) Are tenders qualified divers? YES ___ NO ___
 - (d) Describe exact types of diving services offered:

 - (e) Advise approximate payroll split in the following categories:

(i) Diving from vessels in navigable water	\$
(ii) Diving from shore/fixed objects in navigable water	\$
(iii) Jetty and breakwater	\$
(iv) Pile driving	\$
(v) Concrete construction	\$
(vi) Nuclear diving	\$ _____
 - TOTAL:
- (f) Do divers use exothermic cutting equipment? YES ___ NO ___

If "Yes," do they use exclusively oxygen free torches such as "Arcair"? YES ___ NO ___

(g) Advise approximate percentage split between the following:

(i) Shallow air diving _____%

(ii) Deep air diving (over 130' fsw) _____%

(iii) Mixed gas diving _____%

(h) Please identify which Tables you use for the following:

(i) Air diving

(ii) Mixed gas diving

(iii) Saturation diving

10) Does the Assured do any salvage work? YES ___ NO ___

11) Does the Assured own and/or operate any *watercraft? Please provide full details:

12) Are owned and/or operated vessels used for purposes other than dive support? YES ___ NO ___

13) A. Do/will employees work on or from or have any connection with *watercraft during the policy period:

B. Is *watercraft work done dockside and/or in Assured's yard only:

C. If shipbuilding/shiprepair do employees do trial trips, if so how often and time involved per annum:

D. If employees work on or from or have any connection with *watercraft away from dockside, does any one employee spend more than 20% of their time working on or from or in connection with *watercraft:

E. Does/will the Assured have jobs of short duration overwater: If so, please the maximum percentage of time during the job that any one employee will be working on or from or in connection with *watercraft:

F. Do/will employees keep any of their tools or equipment on watercraft:

14) Full 5 year death/injury/illness record including any reserves (including any claim/incident arising overwater reported to Workmen's Compensation and/or L.S.H.W.A. Insurers), use separate sheet if necessary:

15) Do you expect to do any work from owned or non-owned vessels 3 miles or more offshore during the 12 months renewal policy period coming up. YES ___ NO ___

If yes, please provide details.

16) Present Insurers:

a. Expiring Date:

b. Limits Carried:

c. Limit Required:

d. Premium Charged:

*Note: The definition of a watercraft includes any vessels or special purpose structure other than a fixed permanent platform which is capable of navigation either under its own power or being towed. Jack-ups, semi-submersibles and/or other barges are deemed to be watercraft for the purpose of the above questions.

IMPORTANT:

THIS QUESTIONNAIRE IS TO BE COMPLETED AND SIGNED BY THE ASSURED AND WILL FORM PART OF THE MARITIME EMPLOYER'S LIABILITY POLICY ISSUED.

THE PREMIUM CHARGED AND THE CONDITIONS OF THIS POLICY ARE BASED UPON THE INFORMATION PROVIDED IN THIS QUESTIONNAIRE. ANY OPERATIONAL AND/OR PHYSICAL CHANGES IN THE NATURE OF THE ASSURED'S OVERWATER OPERATION DURING THE POLICY PERIOD WHICH MATERIALLY CHANGES OR ALTERS IN ANY WAY THE INFORMATION CONTAINED IN THIS QUESTIONNAIRE MUST IMMEDIATELY BE ADVISED TO UNDERWRITERS. ANY CHANGES ADVISED WILL BE ASSESSED BY UNDERWRITERS TO ENABLE THEM TO DECIDE WHETHER THEY ARE PREPARED TO CONTINUE TO PROVIDE THIS COVERAGE AND AT WHAT TERMS. **FAILURE TO COMPLY WITH THIS REQUIREMENT WILL VOID THE POLICY.**

Signature of Assured:

Dated:

Print Name:

ADC PROGRAM – M.E.L. APPLICATION FORM –CREW ADDENDUM

1. Describe in detail the non-dive support uses of owned and/or operated vessels on navigable waters (e.g. hydrographic survey, ROV operation, pollution response and cleanup , salvage*, carrying personnel and/or supplies to non-dive job sites etc.) :

2. Note below the number of days per year you use owned and/or operated vessels on navigable waters for purposes other than dive support, and applicable annual Jones Act payroll for such work:

(i) On average : days ; \$ Jones Act payroll.

(ii) Maximum : days; \$ Jones Act payroll.

3. Do any employees who are NOT divers, dive tenders or dive supervisors use owned and/or operated vessels on navigable waters? Yes _____ No _____

If “Yes”:

(i) How many such employees?

(ii) Describe the other job duties of such employees when not operating vessels (e.g. sales , management , general construction , crane operator , scientist , ROV pilot , mechanic , welder etc.):

* See separate addendum for salvage contracts

* See separate Addendum

ADC PROGRAM – M.E.L. APPLICATION FORM –SALVAGE ADDENDUM

1. Have you done any salvage work involving diving from vessels in the past 12 months?
Yes _____ No _____
2. Do you have or do you anticipate any salvage work involving diving from vessels in the next 12 months? Yes _____ No _____

If you answered “Yes” to either question above, on a separate piece of paper please advise full details of each past or future anticipated salvage contract, including the following details for each contract:

- The dates salvage work began and ended
- The type and size (dimensions in feet or weight in pounds or gross registered tons) of the vessel/object salvaged
- The exact location of the salvage contract (e.g. 3 miles offshore southeast of Miami, Florida)
- Method of salvage (derrick crane barge, liftbags)
- Depth of diving operations
- Nature of diving (e.g. visual inspection only, securing slings around vessel/object, welding plates over holes in hull etc.)
- Any cutting or welding? Describe purpose if so.
- Any cutting or welding near fuel or flammable product tanks?
- Any gas-freeing done, by yourself or others