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any one occurrence only once. The Bermuda Form, designed to alleviate these problems, while filling an urgent and continuing market need, was the result. It is appropriate here to explain what we mean by the 'Bermuda Form'. While the policy 1.11 form, introduced in 1985, has gone through numerous evolutions by those insurers rou-

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## **The Bermuda Form**

The most important feature of the Bermuda policy form is that it is triggered by giving notice of an “occurrence” either during the policy period or before the end of an extended discovery period if the insured purchases a discovery option.

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The legal basis for Bermuda to exchange information with other jurisdictions under the CRS is contained in the MCAA to which Bermuda is a party. The MCAA contains the rules on the modalities of the exchange between the Bermuda Competent Authority (Minister of Finance) and partner jurisdictions' Competent Authorities.

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In broad terms, Bermuda Form policies cover occurrences that are reported to the policyholder during the policy period, under a period for reporting that has both a starting point and an end-point. 1 The starting point typically is either the inception date of the policy, or a specified retroactive date. 2 The end-point typically is the moment when the policyholder stops buying the basic cover granted by the policy, 3 or the insurer stops selling it.

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## **NOAA Ocean Explorer: Bermuda: Search for Deep Water Caves ...**

A Bermuda Form arbitration requires an international team of

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law- yers. The events that are the subject of disputed coverage more than likely took place in the United States or, at the very least, did not take place in the United Kingdom. In addition, New York is the govern- ing law.

## **Bermuda Form arbitration: a policy- holder perspective**

The Bermuda Form contains a clause known in Bermuda insurance industry custom and practice as the “maintenance deductible.” Bermuda Form policies do not actually use that term. In fact, the relevant clause is part of the definition of “occurrence” that addresses injury or damage “expected” or “intended” by the policyholder.

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