

Kidnap and Ransom Proposal Form for Companies



Please fill in this proposal form as accurately as possible. Your quotation may be invalid if the information submitted in this proposal form is incorrect. The information provided in this proposal form shall be the basis of this insurance contract should a policy be issued and you are therefore responsible for its accuracy. Please check that you understand all of the questions and that the answers are correct. If you are in any doubt whatsoever, please contact KR Expert. Please attach a separate sheet of paper with any information that does not fit in the space provided.

I. About the Business to be insured

Contact Name _____

Business Name: _____

Address: _____

Country _____ Website _____

Postcode _____ Telephone Number _____

Annual Revenue: _____ Value of Business Assets: _____

If Financial Institution value of deposits _____

Type of Business: _____

PLEASE INCLUDE LATEST REPORT AND ACCOUNTS AND IF APPROPRIATE, THE COMPANY'S LATEST BROCHURE DETAILING ACTIVITIES

II. Please provide the following number of employees in each category:

Total number of Directors:	_____	Directors to be Insured:	_____
Total number of Officers:	_____	Officers to be Insured:	_____
Total number of other employees:	_____	Other Employees to be Insured:	_____

III. List or attach details of ALL Persons to be insured:
Please list all other persons to be insured (continue on a separate page if necessary):

Name: _____ Date of birth: _____

City of Residence: _____

Name: _____ Date of birth: _____

City of Residence: _____

Name: _____ Date of birth: _____

City of Residence: _____

Name: _____ Date of birth: _____

City of Residence: _____

Name: _____ Date of birth: _____

City of Residence: _____

KIDNAP, EXTORTION, HIJACK & DETENTION INSURANCE

Please return completed form to KR Expert Horsted Square Bellbrook Business Park Uckfield Sussex TN22 1QG or Fax 01825 761479
w: www.krexpert.co.uk t: 01825 745 410 e: enquiries@krexpert.co.uk KR Expert is a trading style of Affinity Select Insurance Services Limited
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IV. List details all foreign exposure, both permanent and travel by person to be insured to include name of traveler, dates, duration, Countries to be visited and reasons. Continue on a separate sheet if necessary:

V. Please indicate the coverage you are seeking: *(Please note that the maximum benefit cannot exceed business assets)*

£250,000 £500,000 £1,000,000 Other amount: £ _____

If the Applicant is already insured against Kidnap or Extortion risks, please give the name of the current insurer and the expiry date of the policy. _____

VI. Do you want to extend your policy to include:

Detention coverage (please provide details of each persons salary) Additional Accidental death coverage £ _____ each person

VII. In respect of the persons to be insured

1) Has there ever been any prior kidnapping, extortion, or detention incident? Yes No

2) Has there ever been any threat or attempt at a kidnapping, extortion, or detention? Yes No

3) Are there any current threats or incidents regarding kidnapping, extortion, or detention? Yes No

4) Is there any existing coverage at this time, or within the past 12 months? Yes No

5) Are any of the proposed insured likely kidnapping prospects because of business, outside interests, or other activities? Yes No

If yes to any of these, please provide details:

I have read the above and declare that to the best of my knowledge and belief the statements are true and complete and that I have not knowingly withheld any information which may be material to Underwriters in their assessment and acceptance of the risk. Signing this form does not bind the Applicant nor the Underwriters to complete the insurance, but it is agreed that this form shall be the basis of the contract should a policy or certificate of insurance be issued.

Signature of Officer of Firm _____ **Date** _____

Print Name _____ **Email address:** _____

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