

Kidnap & Ransom Insurance Application - Individual

Proposed Policyholder		
Address		
Occupation		
Please provide names of any additional person(s) to be insured and their cities of residence.		
Does the person(s) to be insured have existing coverage? <input type="checkbox"/> No <input type="checkbox"/> Yes. Please provide details:		
Have there ever been any kidnaps, attempted kidnaps or threatened kidnaps? <input type="checkbox"/> No <input type="checkbox"/> Yes. Please provide details:		
Please provide full details of all foreign travel and residency. Please provide names of individuals, areas of travel (i.e. cities and countries), frequency and duration. Please attach a travel schedule if necessary.		
Proposed Policyholder's Total Assets:	Amount:	
Currency: <input type="checkbox"/> CAD <input type="checkbox"/> USD	Limit of Liability Required: (Not to exceed Total Assets) <input type="checkbox"/> \$1,000,000 <input type="checkbox"/> \$2,000,000 <input type="checkbox"/> \$5,000,000 <input type="checkbox"/> \$_____	Policy Term: <input type="checkbox"/> One Year <input type="checkbox"/> Two Year <input type="checkbox"/> Three Year
Broker/Agent/Consultant		
Contact Name and Telephone Number		

DECLARATION

<p>As the proposed Policyholder, I have read the above and declare that to the best of my knowledge and belief the statements are true and complete.</p> <p>I understand that signing this application does not bind me to purchase coverage and I further understand that should a policy be issued, this Application, any additional materials provided, and the statements made herein, shall form the basis of the Insurance.</p>		
Signature of Proposed Policyholder	Print Name & Title	Date