KIDNAP & RANSOM
COMPREHENSIVE CORPORATE INSURANCE
APPLICATION FORM

XL Group
Insurance

NAVIGATOR
Insurance Brokers Ltd.
Unit 8E, Golden Sun Centre, 223 Wing Lok St, Sheung Wan, Hong Kong
Tel : +852 2530 2530 | Fax : +852 2530 2535
Email : crew@navigator-insurance.com | www.navigator-insurance.com

1. Applicant

Company name:

Head office address:

2. Applicant's business

Please describe company's business activities or scope of project:

3. Financial information (from last annual report)

a. Total annual revenues:

b. Total assets:

4. Persons to be insured

a. Total number of employees:

b. Total number of consultants, contractors and sub-contractors to be covered:

5. Territory

Please list all locations with a breakdown between local national employees and expatriate or third country nationals at each location if available (continue on separate sheet if necessary):

Country	Local Nationals	Expatriates / Third Country Nationals

6. Travel pattern

Please advise the estimated number of travel days in each country over the next 12 months (continue on separate sheet if necessary):

Country	Number of travellers	Total number of days in country for all travellers

7. **Does the applicant own, manage, lease or charter any maritime vessels?** ☐ Yes ☐ No

If Yes, please complete a separate Marine Kidnap & Ransom Application Form or provide an outline below

8. **Does the applicant have any formalised crisis management and/or security plans?** ☐ Yes ☐ No

If Yes, please provide details (continue on a separate sheet if necessary)

9. **Has the applicant experienced any threats or incidents that would give rise to a claim under this insurance within the last 5 years?** ☐ Yes ☐ No

If Yes, please provide details (continue on a separate sheet if necessary)

10. **Has the applicant ever been declined insurance of this type or ever had insurance of this type cancelled or renewal declined?** ☐ Yes ☐ No

If Yes, please provide details (continue on a separate sheet if necessary)

11. **Does the applicant have any other insurance of this type?** ☐ Yes ☐ No

If Yes, please provide details (continue on a separate sheet if necessary)

12. **What currency and limits of liability options are required?** Currency:

Limit options:

Declaration
Signing this form does not conclude a contract of insurance or oblige insurers to issue a policy. I declare that to the best of my knowledge and belief the information given is accurate and that no material information has been withheld. I agree that if the information given was provided to you by any person other than myself, that person shall be deemed to have been my agent for the purpose of providing that information.

Applicant's name:

Position in company:

Signature:

Date: