

Application for Personal Kidnap, Ransom and Extortion Insurance

Name of Applicant				
Primary Address	City	Province	Postal	Code _
Basic Information				
a. Occupation				
b. Corporate Affiliation(s)				
c. Total Revenue of covered persons				
Total Assets		\$		
d. Please list the the names of all Insured perso	ns, their age, and their count	ry of residence. (Attach addition		
Name	Age		untry of Residence	
e. Provide details of any Insured persons travel	outside of Canada Include the	ne city and country number	or of individuals	
traveling, and duration of stay over the next 1		•	i di ilidividuais	
City and Country	Number of Individ	uals	Duration of Stay	
f. Do you have formal security measures in place	ce?	<u>'</u>	Yes	No
If yes, please provide details				
g. Have there been any incidents which would If yes , please provide details	=			
h. Have you ever been declined kidnap and ran	som insurance, or has any ins	surer ever cancelled		
or declined to renew your policy? If yes, please give full details				
i. Limits of Liability requested: (please state currency	v) (Limits offered between \$500	0,000 - \$65,000,000) \$		
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OTICE TO APPLICANTS: ny person who knowingly and with intent to defraud a				
formation, or conceals for the purpose of misleading, in	•	•	lent insurance act	t, which is
his document was issued or made by the Company	in the course of its insurance t	business in Canada.		
pplicant Signature	Title	Da	te	
Irodunar Cianatura	Title	n.	to.	
Producer Signature	IITIE	Da	te	