

## HOW TO APPLY

Specialty insurance products are provided through certain underwriters at Lloyds of London. Receiving a quote from London will normally take us up to 5 business days, but may vary. The more detailed information you are able to provide, the quicker and more favourable the process will be.

Please fill out the applicable form(s) and return to us by email at [helpline@ingleinternational.com](mailto:helpline@ingleinternational.com) or by fax at +1 416.730.1878. If you require additional space to provide further details, please feel free to use a separate sheet.

If you have any questions prior to submitting an application, please contact us at [helpline@ingleinternational.com](mailto:helpline@ingleinternational.com).



**A. COMPANY INFORMATION**

Name

Occupation

Phone Number

Email

Address Street

City

State/Province

Country

Zip/Postal Code

Total Consolidated Assets

Net Worth

**B. REQUESTED COVERAGE**

Effective Date

Expiry Date

Limit of Liability

**C. OTHER PERSONS TO BE INSURED**

Name

Occupation

Sex

DOB

Relationship



























Do all of the people above live at the same address? If no, please specify complete address.

## D. FOREIGN TRAVEL AND SECURITY

Please provide detailed information on where covered individuals will live, work or travel during this period, including frequency of travel and lengths of visits in any high-risk country or region.

Please provide details of the security surrounding those to be insured.

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## E. EXISTING THREATS AND COVERAGE

Please provide details of any kidnappings, attempts or threats against any person to be insured.

Please provide details of any existing coverage in place on any of the persons to be insured.

Are any of the persons to be insured particularly exposed to a kidnapping risk due to pursuits, business, social or political activities, or for any other reason?

## F. ADDITIONAL DETAILS OR INFORMATION

Please provide any other details or information which may affect your insurability for the product(s) you have requested, including any risk management strategies or security arrangements.

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## G. DECLARATION

To the best of my/our knowledge and belief, the information provided in connection with the proposal, whether in my/our hand or not, is true and I/we have not withheld any material facts. I/We understand that non-disclosure or misrepresentation of a material fact may entitle Underwriters to void the insurance. (NB. A material fact is one likely to influence acceptance or assessment of this proposal by Underwriters. If you are in any doubt as to whether a fact is material or not you must disclose it.)

I/We understand that Underwriters will determine their terms and conditions upon the information provided in connection with this proposal and I/we further understand that the signing of this proposal does not bind me/us to complete or Underwriters to accept this insurance.

Signature of proposer

Date

M	M	D	D	Y	Y	Y	Y
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