

Corporate Cover Proposal Form

Name of Company:.....

Head Office Address:.....

Business Website Address:.....

Nature of Business:.....

Number of Employees to be covered

Directors:.....

Officers:.....

Employees:.....

Total Turnover:.....

Net Assets:.....

Do you have any permanent overseas operations? Yes No

If yes, please list the locations of all permanent overseas operations with the approximate number of employees at each location and, if possible, the number of years experience in that location.

Country	Location(s) City/Town	No. of Years in Country	No. of Personnel

Please list all foreign travel below including the number of personnel and time spent in each country.

Territory / Regions	No. of Personnel	No. of Visits	Average stay at any one time

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Please provide any relevant information regarding security precautions and/or procedures that are undertaken by overseas employees and/or travelers.

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Have there been any incidents which would have given rise to a claim under the policy? Yes No

If yes please provide details

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Limit(s) of Liability requested (Please state currency).

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Requested policy extensions:

- Business Interruption Coverage
- Computer Virus Interruption
- Product Loss Extensions
- Emergency Political Repatriation.....

I have read the above and declare that to the best of my knowledge and belief the statements are true and complete

Signing this form does not bind the applicant(s) to complete the insurance but it is agreed that this form will be the basis of the contract should a policy be issued

Signature: **Date:**.....