

## APPLICATION FORM FOR FAMILY KIDNAP & EXTORTION

1. NAME OF APPLICANT: .....
2. ADDRESS OF APPLICANT:.....
3. APPLICANTS COUNTRY OF BIRTH:.....
4. DETAILS OF APPLICANT'S OCCUPATION (S):.....
5. PLEASE LIST ALL THE NAMES AND CITY OF RESIDENCE OF THE PEOPLE TO BE INSURED:  
.....  
.....
6. HAVE THERE BEEN ANY KIDNAPS, ATTEMPTED KIDNAPS OR THREATENED KIDNAPS?  
(If so please give brief details) : .....
7. PLEASE GIVE BRIEF DETAILS OF ANY TRAVEL PLANS, OUTSIDE THE COUNTRY OF  
RESIDENCE, OF ALL PEOPLE TO BE INSURED: .....
8. DOES THE APPLICANT'S NET ASSETS EXCEED: .....
- (i) US\$ 500,000                      YES/NO
- (ii) US\$ 1,000,000                    YES/NO
- (iii) US\$ 2,500,000                   YES/NO
- (iv) US\$ 5,000,000                   YES/NO
- (v) US\$ 10,000,000                   YES/NO
9. LIMIT(S) OF LIABILITY REQUESTED: .....

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 to complete the insurance but it is agreed that this form shall be the basis of the contract should a policy be issued.

DATE:

Signature of Applicant: