

Completing this application form does not bind you into entering an insurance contract. The contents of this application form and any subsequent information requested help us to evaluate the risks we are offering to insure. Any quotation offered will be based upon the information being provided. The contents of this application will ultimately form the basis of the contract between us should the quotation be accepted by you. It is important therefore to provide accurate information and as much supporting material as possible.

Full Names of Proposers (including any Associated/Subsidiary Companies & Trading Partners Names)

Principal Address & Post Code

- other addresses

Tel No:		Fax No:	
Email:		Website:	
Principal Contact:		Co Reg No:	
Year Established:	If less than 12 months please provide CV's of directors/partners		

Please provide a full description of your business activities

What Trade Association are you members of ?	ABTA	Please provide all ABTA numbers	
AITO	FTO	Advantage	Worldchoice
Global Travel Group	Freedom Travel Group	Midconsort	UKInbound
Others; Please provide details			

What are your existing insurance arrangements ?	Insurers	Expiry / Renewal Date	Premium
Public / Tour Operators Liability	Name of insurance company	DD / MM / YYYY	£
Professional Indemnity	Name of insurance company	DD / MM / YYYY	£
Employers Liability	Name of insurance company	DD / MM / YYYY	£
Directors and Officers Liability	Name of insurance company	DD / MM / YYYY	£

Would you additionally like us to quote for the following insurance products ?

Office Insurance	Name of insurance company	DD / MM / YYYY	£
Please advise type of Insurance Product	Name of insurance company	DD / MM / YYYY	£

What insurance cover do you require?			Please select
<input type="radio"/> Employers Liability	Standard Limit	£10,000,000 UK Legal Liability	Optional
<input type="radio"/> Public / Tour Operators Liability <small>Compulsory Section of the policy, please select an appropriate limit of indemnity</small>	Optional Limit	£ 2,000,000 any one event	Optional
		£ 5,000,000 any one event	Optional
		£10,000,000 any one event	Optional
<input checked="" type="checkbox"/> Legal Defence Costs		£ 100,000 in any period of insurance	Standard <input checked="" type="checkbox"/> cover
<input type="radio"/> Professional Indemnity		£ 1,000,000 limit any one event	Optional
<input checked="" type="checkbox"/> Emergency Legal Assistance		£ 5,000 in any one event	Standard <input checked="" type="checkbox"/> cover
<input type="radio"/> Directors and Officers Indemnity <small>Available only if you are a 'limited company'</small>	Optional Limit	£ 250,000 Indemnity	Optional
		£ 500,000 Indemnity	Optional
		£ 1,000,000 Indemnity	Optional

1. Employers Liability		Gross Wageroll	
EL1. Total number of UK clerical / sales staff		EL1.1 UK clerical / sales	£
EL2. Number of homeworkers		EL2.1 Homeworking	£
EL3. Number of staff temporarily overseas		EL3.1 Temporary Overseas	£
EL4. Other staff - please advise duties		EL4.1 Other staff	£

2. Public & Products & Tour Operators Liability		Please provide a breakdown / profile of your business	
Tour Operating Activities (*1) By destination to:	Pax numbers last year	Estimated Pax this year	Percentage as "All Inclusive"
PL1. United Kingdom			%
PL2. Europe & Mediterranean (excl Turkey)			%
PL3. USA / N America &/or Australasia			%
PL4. South Africa, Africa & Turkey			%
PL5. Rest of the World (please break down into the regions visited)			%
			%
			%
PL6. Do you market tours IN America/N America for tours taking place IN America/N America ?		Yes	No

Activities Tours	Number Pax Last Year	Estimated Pax Next year
PL7, Winter Sports, motorised sports, scuba adventure water.		
PL8. Horse Riding		
PL9. Other adventure and activity		
Specialist Tours	Number Pax Last Year	Estimated Pax Next year
PL10. Children & Student		
PL11. Groups & Conferences		
PL12. Coach Tours		
PL13. Cruises		
PL14. Vulnerable Adults (*2)		

*2 Standard cover excludes "Abuse" - tick here [] to apply to extend the standard policy cover.

Trading Pattern – income derived from:

TP1. Tour Operating (Gross Turnover)	Last Year £	Next year £
TP2. Travel Agency (Gross Turnover)	Last Year £	Next year £
TP3. Insurance sales (net commission income)	Last Year £	Next year £

	Last Year		Next Year Estimated	
	Pax numbers	Turnover	Pax numbers	Turnover
TP4. Flight Only Activities (Gross Turnover)		£		£
TP5. Accommodation (with Principal Status) Activities (Gross Turnover)		£		£

(*1) Tour Operating Activities include creating your own packages by either:

1. combining travel services and advertising them for sale,
2. by combining travel services and setting your own price,
3. by putting together tailor made or dynamic holidays for which you charge a single inclusive price.

(*1) Travel Agent Activities include selling:

1. the package holidays offered by tour operators, either dynamically packaged, tailor made, or brochured.
2. accommodation as an agent.

(*2) Vulnerable Adults, are adults aged 18 or over who are in need of assistance by reason of mental, physical or learning disability, age or illness and who are unable to take care of themselves or unable to protect themselves against significant harm or serious exploitation which may be occasioned by the acts or omissions of other people

Risk Management

To enable us to fully understand your business and the contractual relationships between you, your customers and your suppliers, it is important that the questions below are answered as fully as possible. Where applicable please attach specimen documentation

RM1	Do you use standard booking conditions ? (please attach copies)	Yes	No
RM2	Do your standard booking conditions with customers follow the current ABTA model ?	Yes	No
RM3	Do your standard booking conditions with customers accept liability for all suppliers, local excursions and/or services ?	Yes	No
RM4	Do you permit any alterations to RM1, RM2 or RM3 ?	Yes	No
RM5	Do you or any parent or subsidiary company, own or operate any accommodation or transport ? (if yes please provide details)	Yes	No
RM6	Do you or any parent or subsidiary company, own or operate any overseas booking office ? (if yes please provide details below)	Yes	No
RM7	Do you offer Excursions ?	Yes	No
	If "yes" are they operated by you (US) or by independent supplier (IND) ?	US	IND
	If "IND" do you obtain full indemnity from the suppliers ?	Yes	No
	What percentage of excursions are sold "pre-departure"		%
RM8	Do you/your agents inspect accommodation regularly and keep records, that safety and fire precautions are adequate and that local regulations and standards are observed ?	Yes	No
RM9	Do you annually check the insurance arrangements of your accommodation suppliers and annually retain evidence of such ?	Yes	No
RM10	Do you use standard contracts with your suppliers which ensure that they are contractually liable for their activities ? (refer to your supplier agreements)	Yes	No
RM11	What Health and Safety, Risk Assessment and / or Complaints Handling training do you provide ?		
RM12	How do you / your suppliers or your local agents maintain Risk Assessments and Health and Safety standards in resort ?		
RM13	If "all Inclusive" packages are offered do hotels follow and evidence HACCP/ and or EC Directive 93/43 The hygiene of Foodstuffs?	Yes	No

Claims Experience

CE1	In relation to the risks to which this request for insurance relates, have there been any accidents, incidents, notifications or claims in the last 5 years, whether insured or not ? (if yes please provide a summary of details below or on an attaching sheet)	Yes	No
Date	Circumstances	Claims Paid	Claims Reserved
CE2	Is any partner, principal, director, officer, consultant or employee after enquiry, aware of any circumstance, or prosecution brought, which might give rise to a claim against a) the Company b) any director, officer, trustee, committee member or employee, in respect any neglect, error or other wrongful act committed in their capacity as a director, officer, trustee, committee member or employee during the last 5 years whether in relation to the activities of the Company or any other entity in which they have held office?	Yes	No

Directors and Officers

DO1	Limit of indemnity required	£250,000 []	£500,000 []	£1,000,000 []
D02	Does the business have any equity/assets/debt(s) or subsidiary companies in the USA or Canada ?	Yes	No	
D03	Has the operating profit of the business been positive in at least one of the last 2 years ?	Yes	No	
D04	The Net Asset Value of the business has been positive in each of the last 2 years (fixed and current assets less current and long term liabilities)	Yes	No	
D05	The business is able to pay its debts when they fall due	Yes	No	
D06	IF the business is required to have audited accounts, the accounts for the last financial period have an auditors opinion, which is not "qualified" in any way	Yes	No	
D07	Are there any proposals at the present time, which have been publicised relating to the acquisition of the business by, or its merger with, any other entity ?	Yes	No	
If you are unsure of how to answer D04 or D06 please speak with your accountant, or forward a copy of your latest audited accounts.				

Travel Insurance Sales Questions (FSA related Professional Indemnity cover)

Applicable to insurance policies renewing on or after 1.1.2008 only

IQ1	TRAVEL Insurance Sales Limit of indemnity required	£250,000 []	£500,000 []	£1,000,000 []
IQ2	Do you sell other insurance products/services ?	Yes	No	
IQ3	Do you have at least one fully qualified (ABTA Level 2) member of staff ?	Yes	No	
IQ4	Have all other members of staff who sell insurance passed/qualified to ABTA Level 1 ?	Yes	No	
IQ5	Which insurance sales software will you be using beyond January 2008 ?			

General Details

GD1	Please give details below of partners / directors (including sole principals)				
Full Name	Age	Qualifications / Experience	Date Qualified	No. Years in this capacity	
GD2	In respect of any of the covers to which this proposal relates and any business in which you or any of your partners or directors or officers are or have been engaged, has any insurer ever declined a proposal, refused renewal, terminated any insurance or imposed special terms ?			Yes *	No
GD3	Does the business/practice or any of the partners/directors act on behalf of, or work for any firm company or organisation, in which the business/ practice or any partner/director has a financial interest or any partner/director perform an executive role or hold a position whereby he/she is able to make major decisions on behalf of such firm, company or organisation?			Yes *	No
GD4	Do you keep detailed records of				
	i. the original holiday / travel / booking form ?			Yes	No
	ii. subsequent amendments whether made in writing, verbally or in a telephone call ?			Yes	No
	iii. verbal agreements (including telephone calls)			Yes	No
GD5	Do you obtain recruitment references for all new employees ?			Yes	No

* please provide further details on a separate sheet

Declaration

To the best of my/our knowledge and belief the information provided in connection with this proposal, whether in my hand or not, is true and I/we have not withheld any material facts. I/We understand that non-disclosure or misinterpretation of a material fact may entitle Insurers to void the insurance.

(N.B. a material fact is one likely to influence acceptance or assessment of the risk by insurers. If you are in doubt as to whether a fact is material or not, please disclose it). I/We understand that signing this declaration does not bind me/us to complete, or Insurers to accept, this insurance. I/We agree that this proposal will form the basis of the contract with Insurers.

Name (Please Print)	REQUIRED	Signature	REQUIRED
Position in Company	REQUIRED	Date	REQUIRED

**WE RECOMMEND THAT YOU KEEP A RECORD, INCLUDING COPIES OF LETTERS AND THIS PROPOSAL FORM, OF ALL INFORMATION SUPPLIED TO US FOR THE PURPOSE OF ENTERING INTO THIS CONTRACT.
A COPY OF THIS PROPOSAL FORM WILL BE ISSUED ON REQUEST**



**Underwritten by
Royal & Sun Alliance Insurance plc**

Registered in England and Wales No. 93792
Registered office at St Mark's Court, Chart Way, Horsham, West Sussex RH12 1XL Authorised and Regulated by the Financial Services Authority



**Arranged by
Arnold Fisher Insurance Services Ltd**

Registered in England No2923166
Authorised and Regulated by the Financial Services Authority

Law Applicable

The parties to the Policy have the right to choose the law applicable to the Policy. Unless the parties agree otherwise in writing any disputes concerning the interpretation of this Proposal or the Policy shall be governed and construed in accordance with English law and shall be resolved within the non-exclusive jurisdiction of the courts of England and Wales

Data Protection

All personal information supplied by you will be treated in confidence by Arnold Fisher Insurance Services Limited and the Royal & Sun Alliance Insurance Group of companies and will not be disclosed to any third parties except where your consent has been received or where permitted by law. In order to provide you with products and services this information will be held in the data systems of Arnold Fisher Insurance Services Limited and the Royal & Sun Alliance Insurance Group of companies or our agents or sub contractors
The Royal & Sun Alliance Insurance Group of companies may pass your personal data to other companies for processing on its behalf. Some of these companies may be based outside Europe in countries which may not have laws to protect your personal data, but in all cases the Group will ensure that it is kept securely and only used for the purpose for which you provided it. Details of the companies and countries involved can be provided to you on request

YOUR BROKER DETAILS

Name of company
Address line 1
Address line 2
Address line 3
Address line 4 postcode

Telephone / fax