



FEDERAL INSURANCE COMPANY – SINGAPORE
One of the Chubb Group of Insurance Companies

18 Cross Street, #11-08 China Square Central, Singapore 048423
Telephone: 6333 8113 Facsimile: 6333 8112

PROPOSAL FORM FOR KIDNAP/RANSOM INSURANCE

1. Name of Insured: _____

2. Address of Insured's Principal Location _____

3. **GENERAL INFORMATION**

Countries with Operations	Number of Locations	Sales or Revenues	Number of Employees	Type of Operation
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Total	_____	_____	_____	_____

4. **TRAVEL INFORMATION**

Countries Visited	Number of Annual Trips	Average Stay	Number of Employees
_____	_____	_____	_____
_____	_____	_____	_____
Total	_____	_____	_____

5. Limits desired : _____

6. **Provide details of any kidnap attempts or threats against your staff, directors or their immediate families (including date)** _____



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DECLARATION

The undersigned declares that to the best of his or her knowledge and belief the statements set forth herein are true. Although the signing of the Proposal Form does not bind the undersigned, on behalf of the Organisation, to effect Insurance the undersigned, on behalf of the Organisation, agrees that this form and the said statements shall be the basis of the Contract should a Policy be issued and will be incorporated in the Policy. Any person who, knowingly and with intent to defraud any insurance company of other person, files a proposal for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

Dated: _____

Signed: _____
(Name and title of person completing this form for Insured)