



**ACE USA INTERNATIONAL ADVANTAGE®**  
**CORPORATE KIDNAP AND EXTORTION APPLICATION**  
 (Attach additional sheets when necessary)

1. Name of applicant: \_\_\_\_\_
2. Home office address: \_\_\_\_\_  
\_\_\_\_\_
3. Business or type of industry: \_\_\_\_\_
4. Financial information: (Attach latest Annual Report, if applicable) \_\_\_\_\_
5. Total Revenue: \$ \_\_\_\_\_
6. Employee census information: Total number of employees: \_\_\_\_\_

<u>Country</u>	<u>Number of Directors</u>	<u>Number of Officers</u>	<u>Number of Employees</u>	<u>Total Number</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

7. Details of anticipated business travel outside resident country: \_\_\_\_\_  
\_\_\_\_\_
8. Describe any previous kidnap, extortion or detention incidents, attempts or threats: \_\_\_\_\_  
\_\_\_\_\_
9. Describe any security or prevention measures taken to protect those persons in Question 8 above from an incident to which this coverage applies: \_\_\_\_\_  
\_\_\_\_\_
10. Limit of Insurance requested: \_\_\_\_\_
11. Do you or any of your Directors or Officers have knowledge or information of any fact or circumstance which may give rise to a claim under the proposed policy? \_\_\_\_\_

**THE UNDERSIGNED AUTHORIZED OFFICER OF THE CORPORATION DECLARES TO THE BEST OF HIS/HER KNOWLEDGE THE STATEMENTS SET FORTH HEREIN ARE TRUE.**

**SIGNING OF THE APPLICATION DOES NOT BIND THE UNDERSIGNED OR US, BUT IS AGREED THAT THIS FORM SHALL BE THE BASIS OF THE CONTRACT SHOULD A POLICY BE ISSUED.**

**SIGNED:** \_\_\_\_\_  
**DATED:** \_\_\_\_\_  
**TITLE:** \_\_\_\_\_

