

SPECIAL CONTINGENCY K&R INSURANCE APPLICATION - INDIVIDUAL OR FAMILY

PLEASE ANSWER ALL QUESTIONS USING BLOCK CAPITALS WHERE APPROPRIATE, CONTINUING ON THE BACK PAGE OR A SEPARATE SHEET IF NECESSARY.

Name of Applicant:

Address of Applicant:

City:	Province:	Postal Code:
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Date of Birth:	Details of Applicant's Occupation(s):
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Please list the name, age, relationship and city of residence of the individuals to be insured. <i>(Continue on a separate sheet if necessary)</i>			
Name	Age	Relationship	City of Residence

Please list the countries in which you require coverage.
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Have there been any kidnaps, attempted kidnaps or kidnap threats? <i>(If yes please give brief details)</i>

Do any of the proposed insured persons noted above travel outside of Canada & the USA? <i>(If yes, please give details, including locations (city/country), durations, frequency and, purpose of travel. Please also provide details of special security measures that are taken in high risk locations). Please attach a separate report if necessary.</i>

Does the applicant's net assets exceed: <i>(Please tick) Canadian Currency</i>
<input type="checkbox"/> \$250,000 <input type="checkbox"/> \$500,000 <input type="checkbox"/> \$1,000,000 <input type="checkbox"/> \$3,000,000 <input type="checkbox"/> \$5,000,000 <input type="checkbox"/> \$10,000,000

Limit(s) of liabilities requested:
Currency: <input type="checkbox"/> CDN <input type="checkbox"/> US 1. _____ 2. _____ 3. _____

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: _____
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"For purposes of the Insurance Companies Act (Canada), this document was issued in the course of Lloyd's Underwriters' insurance business in Canada."