



New Renewal

WorldRisk®

Foreign Commercial Package General and Casualty Insurance Application

Application Information	Broker Information
First Named Insured:	Brokerage Name:
Address of Insured:	Address of Brokerage:
Desired Effective Date:	Producer Name:
Requested Quote Date:	Producer License Number:
Business Website:	Phone #:
	Email Address:

Application Information

Description of Business Operations (Please include details of products, activities, etc.):

Past loss history (describe losses outside the US, Canada and Puerto Rico during past 5 years):

Any international policy cancelled or non-renewed during past 3 years? If so please explain:

Current International Insurance Carrier, if any?

Expiring International Premium?

Trip Information (Employees on business travel overseas; if Travel Accident coverage requested, please declare any non-business trips on a separate sheet)

Describe all trips and travelers (list each trip separately, provide additional pages of spreadsheet if needed)

Country of Destination	Number of Trips*	Duration	State or Province of Hire	Activities – What is purpose of trip?

*The formula for calculating the # of ratable trips is number of employees x number of trips. For example, 3 employees making 8 trips each (whether solo or in groups) = 24 trips.

Do any employees work on permanent or long-term assignment overseas? No Yes If yes, please list countries and describe:

U.S./Canadian Expatriate payroll:

Local National Employee Payroll (For example, a French employee hired to work in France):

Third Country National payroll (For example, a French employee hired to work on long-term assignment in Japan.):

(If yes, please detail country of hire and country where assigned):



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Any flight on non-commercial aircraft (charter, corporate, helicopter)? No Yes (If yes, explain, including # of employees):

Do employees ever travel in groups of 5+ on one commercial flight? No Yes (If yes, explain):

Travel, Accident & Sickness: \$10,000 Medical Expense/\$100,000 AD&D Other:

Foreign General Liability: \$1,000,000 Occurrence Other:

Check here if you would like optional quotations for: Pollution Legal Liability (will require completion of supplemental application)

Total Estimated Foreign Sales/Revenues:

Do employees perform any manual labor/installation/repair work on third party premises? No Yes (If yes, please describe):

Any Discontinued or Sold Foreign Operations No Yes (If yes, please explain):

Auto Liability \$1,000,000 Occurrence Other:

Estimated Number of Foreign Auto rentals:

Estimated Number of owned/leased Foreign Autos:

Foreign Kidnap, Ransom & Extortion Coverage: \$250,000 Occurrence \$1,000,000 Occurrence ☐ Other:

Estimated Assets/Revenue:

Worldwide Employee Count:

NOTICE TO APPLICANTS: This application is for the purpose of obtaining a quotation and does not bind the applicant or the Company to complete the insurance. The Undersigned declares that to the best of his/her knowledge, the statements set forth herein are true and that no other material information has been withheld. This form shall be the basis of insurance should a policy be issued. If the information supplied herein changes between the date completed and the effective date of the insurance, the undersigned shall notify the Company of the changes and the company reserves the right to modify or withdraw any offer for insurance. All written statements, materials or documents furnished to the Company in conjunction with this application, regardless of whether such documents are attached to the policy, are hereby incorporated by reference into this application and made a part hereof, including without limitation any supplemental applications or questionnaires.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR, CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT ACT, WHICH IS A CRIME AND MAY SUBJECT SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

Signature:

Date: