



VANTAGE INSURANCE SERVICES
CRISIS MANAGEMENT INSURANCE
PROPOSAL FORM

1. ABOUT YOUR BUSINESS

(a) Full Name & Address of Proposer (including any Subsidiary Companies & Trading Names)

(b) Contact Name & email address

(c) Full Description of Business:

(d) Year Established

(e) Website address:

2. BREAKDOWN OF YOUR BUSINESS

	Passenger numbers last 12 months	Estimated passengers for next 12 months
Packages *	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
Accommodation Only	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>

Vantage Insurance Services Ltd, 41 Eastcheap, London, EC3M 1DT
Tel: 020 7655 8060 Web: www.vantageinsurance.co.uk



Please specify the **five** principal destination countries of your **PACKAGE HOLIDAYS &/or ACCOMMODATION ONLY (AS PRINCIPAL)** programme, together with the passenger numbers that they represent:-

TERRITORIAL DESTINATIONS	PACKAGES	ACCOMMODATION AS PRINCIPAL
Of the holidays sold how many have a duration of 4 days or less		

Please specify all activities that you offer that form part of your **Package Holidays** and the passenger numbers: i.e. scuba diving/horse riding/cycling/skiing or snowboarding where tuition is pre-arranged

ACTIVITY HOLIDAYS	PASSENGER NUMBERS

Please continue on separate sheet if required

SPECIALIST HOLIDAYS	PASSENGER NUMBERS
Children & Student Tours	
Groups & Conferences	
Coach Groups	
Vulnerable Adults	

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3. GROUP ACTIVITIES

[Please tick]

a) Do you handle Coach Tours	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If YES, please state average coach size	<input style="width: 50px;" type="text" value="%"/>	
b) Do you handle other group tours	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If YES, please state average group size	<input style="width: 50px;" type="text" value="%"/>	
c) Do you organise Off Piste Skiing?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
d) What % of your passengers relate to the following groups?		
i) Safaris	<input style="width: 50px;" type="text" value="%"/>	
ii) Overland Adventures	<input style="width: 50px;" type="text" value="%"/>	
iii) Trekking	<input style="width: 50px;" type="text" value="%"/>	
iv) White Water Rafting	<input style="width: 50px;" type="text" value="%"/>	

4. COVER REQUIRED

Standard Cover	£250,000	
Excess (please tick as appropriate) Standard	£2,500	<input type="checkbox"/>
	£1,000	<input type="checkbox"/>
	£5,000	<input type="checkbox"/>
	£10,000	<input type="checkbox"/>
Other	£	<input style="width: 150px;" type="text"/>

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DECLARATION

IMPORTANT INFORMATION – YOUR DUTY TO MAKE A FAIR PRESENTATION OF THE RISK

You must make a fair presentation of the risk to us at inception, renewal and variation of your Policy. You must therefore tell us about all facts and circumstances which may be material to the risks covered by your Policy in a clear and accessible manner or give us sufficient information to alert us of the need to make enquiries about such facts or circumstances.

Material facts are those which are likely to influence us in the acceptance of or assessment of the terms or pricing of your Policy. If you are in any doubt as to whether a fact is material, you should tell us about it.

If you fail to make a fair presentation of the risk, we may avoid your Policy (that is treat it as if it had not existed) and refuse to pay any claims where any failure to make a fair presentation is:

- a) deliberate or reckless; or
- b) of such other nature that, if you had told us about a material fact or circumstance, we would not have issued, renewed or varied your Policy.

In all other cases, if you fail to make a fair presentation of the risk, we will not avoid your Policy but we may instead:

- a) reduce proportionately the amount payable on any claim by reference to the ratio which the premium actually charged bears to the premium which we would have charged had you told us about a material fact or circumstance (eg if we would have charged you double the premium, we will only pay half the amount of any claims under your Policy); and/or
- b) treat your Policy as if it had included such additional terms as we would have imposed had you told us about a material fact or circumstance. Payment of any claim you make will be subject to the application of any such additional terms.

For these reasons it is important that you check all of the facts, statements and information set out in this form are complete and accurate. You must check with anyone you employ in your business that the facts and statements set out in this form are complete and accurate.

IF ANY OF THE FACTS, STATEMENTS AND INFORMATION SET OUT IN THIS FORM ARE INCOMPLETE OR INACCURATE, YOU MUST CONTACT US IMMEDIATELY. FAILURE TO DO SO COULD INVALIDATE YOUR POLICY OR LEAD TO A CLAIM NOT BEING PAID.

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DECLARATION

I/we declare that:

- a) I/we have read this form and understand that I/we are under a duty to make a fair presentation of the risk and that failure to do so could result in my/our Policy being invalidated and/or a claim not being paid**
- b) the facts, statements and information contained within this form, whether provided by me/us or by others on my/our behalf, are true and complete**
- c) any facts, statements and information which are not contained within this form but which have been provided to you separately by me/us or by others on my/our behalf are true and complete**
- d) I/we have declared all material facts and circumstances which may affect the risk being accepted by you under this Policy even if you have not asked me/us any questions about such facts**
- e) I/we have made all reasonable enquiries of those who work for or with me/us to ensure that all facts, statements and information provided to you are accurate and correct.**

Signature Name (please print)
(Partner/Director)

Date Position