



THE PACKAGE TRAVEL AND LINKED TRAVEL ARRANGEMENTS REGULATIONS

Application Form for Tour Operators Failure Insurance

Tour Operators with a package turnover of less than £5 million

I wish to be provided with a quotation for Tour Operators Failure Insurance to comply with the Package Travel and Linked Travel Arrangements Regulations

Company:	Tel No:
Contact:	
Address:	Fax No:
	E-mail:
Post code:	
Date Established:	Company Reg No:
Website address:	

Are you currently Bonded or Insured? Yes No If Yes, please advise:	Name of Insurer: Amount Paid/Rate:
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How are you currently protecting your client's money? i.e. Trust Account/Insurance/Bond/Other. Please advise.

Please confirm your Professional Indemnity Insurance details:-	
Insurer:	Sum Insured: £
Policy Number :	Expiry Date:

Will you be just selling into the UK ?	Yes	No
Will you be selling into ALL EU Countries including the UK ?	Yes	No
If not which countries will you be selling into ?		
If you are selling into France what percentage of your sales does this represent? _____ %		
If you are selling into Belgium what percentage of your sales does this represent? _____ %		



What is your estimated turnover for packages for the next 12 months:	£ (insert total package turnover)		
Estimated Number of passengers travelling to: (Please provide separate details of those passengers travelling from outside the UK)	UK:	EU:	World-wide:
Average Holiday Cost:	UK £	EU £	WW £
Maximum Holiday Cost:	UK £	EU £	WW £

Linked Travel Arrangements that include a Flight - What is your estimated turnover for LTAs including a flight (including Repatriation) for the next 12 months

£ (insert LTA turnover)	EEA	Worldwide
Estimated no. of Passengers resident in the UK travelling to:		
Average Flight Cost (including taxes)	£	£
Maximum Flight Cost (including taxes)	£	£

Linked Travel Arrangements that include Car Hire (no flight)

What is your estimated turnover for LTAs including car hire (excluding Repatriation) for the next 12 months

£ (insert LTA turnover)	EEA	Worldwide
Estimated no. of Passengers resident in the UK travelling to:		
Average Cost of Car Hire arrangements	£	£
Maximum Cost of Car Hire arrangements	£	£

Linked Travel Arrangement that include Hotel (no flight)

What is your estimated turnover for LTAs including Hotel (Excluding Repatriation) for the next 12 months

£ (insert LTA turnover)	EEA	Worldwide
Estimated no. of Passengers resident in the UK travelling to:		
Average Cost of Package arrangements	£	£
Maximum Cost of Package arrangements	£	£

Additional Information Required

	Before Event	After Event
When are Hotels paid?		
When are Car Hire companies paid?		
When are all other end suppliers paid?		

Air Tickets

	Immediately	How Many Days in Advance
When are air tickets issued?	Yes No	

Do you require cover to include sales into the EEA and beyond YES NO
If **Yes** please supply the same information as above separately.



Are you involved with any other type of business than Travel ? Yes No

If so please confirm details:-

Payment Profile

Who is your Merchant Acquirer?

Please confirm below your total Package and Linked Travel Arrangements turnover split by payment method:-

Cash	£
Cheques	£
Invoices	£
Discover	£
JCB	£
Mastercard	£
Visa	£
American Express	£
Diner's Club	£
Carte Bleue	£
Connect (Visa)	£
Delta	£
Electron (Visa)	£
ELV	£
Maestro	£
Solo	£
Switch	£
Visa Debit	£
Visa Delta	£
Other	£
TOTAL SALES	£



DECLARATION

I agree that enquiries may be made in connection with this application with any parties mentioned within this application.

I hereby declare that:

- I have no reason to doubt that the Applicant will be able to comply with its obligations.
- To the best of my knowledge, information, and belief and after due careful enquiry, the information contained herein is correct.
- I am not aware of any circumstances which I have not disclosed to you which might influence you and/or your principal's acceptance of the risk.
- In the event of you issuing the insurance applied for, the Applicant will during the period of your principal's liability and upon your request, immediately make available to you and allow you to examine or take copies of any accounts or other documents in its possession relating to its own, and any Holding and/or subsidiary Company financial affairs.
- I am duly authorised by the Applicant to complete this form on its behalf and to make this declaration on its and my own behalf.

We hereby agree to indemnify you and your principals against actions, proceedings, claims and demands which may be brought against you or your principals and all liabilities, losses, damages, costs, and expenses of whatsoever nature which you or your principals may suffer, incur, or sustain through a breach of this declaration.

Signed:	Date:
Print Name:	
Position:	

This form must be signed by a Director, Partner or Proprietor of an Applicant Company.

I enclose the following (please tick):

The latest 3 years (1 year if a renewal application) FULL signed Audited Accounts including any Holding, Subsidiary, or Associated Companies. We will not accept filleted or abridged accounts, or applications where your last financial year has not been audited within 6 months of year end. If your accounts are NOT audited we will only consider them if your turnover is less than £1 million.

Full name & address of all partners for a non-Limited Company.

Details of any gift / credit voucher sales.

Incomplete applications will not be processed. Please do not send your application until you have fully completed the form and are in a position to submit all requested documentation at the same time.