



TRAVEL AGENTS / TOUR OPERATORS ERRORS AND OMISSIONS SUPPLEMENTAL APPLICATION

I. INSTRUCTIONS

- Complete in addition to the Richmond National Miscellaneous Professional Liability Application.**
- All application questions must be fully answered. If more space is needed, continue on a separate sheet and indicate the question number.
- If a question does not apply, write "N/A".

II. GENERAL INFORMATION

- Name of Applicant (include any DBA's) : _____
- Contact Name: _____ Contact Title: _____
Phone Number: _____ Email Address: _____
- Year Business was established (MM/DD/YYYY): ____ / ____ / ____
- Principal Address: _____
- Total Branch Locations: _____ List all addresses for additional branches: _____
- Applicant's website: www. _____
- Applicant is: ☐ Corporation ☐ Partnership ☐ Individual ☐ LLC ☐ Other _____
- Is the Applicant firm controlled, owned or associates with any other firm, corporation or company? ☐ Yes ☐ No
If yes, are services provided to such organization(s)? ☐ Yes ☐ No
If yes, to either of the above, attached detailed explanation.

III. PROFESSIONAL SERVICES

- Does the Applicant act as a: ☐ Travel Agent ☐ Tour Operator ☐ Tour Operator/ Guide
- How many tours does your company operate per year? _____
- What is the average number of participants per tour? _____
- What is the average length of a tour? _____
- What is the average cost of a tour? (Per Person) _____
- Indicate the percentage of receipts derived from:

Canada, Caribbean, Mexico, South America	
Europe	

Middle East	
Africa	
Asia, Australia	
USA	

7. Please provide a breakdown of all client groups you are involved in booking travel for:
- | | | | |
|-------------------|---------|------------------------------------|---------|
| Student/Youth | _____ % | Skydiving | _____ % |
| Adventure | _____ % | Corporate Travel | _____ % |
| Mountain Climbing | _____ % | Group Travel (8+ bookings at once) | _____ % |
| Cruises | _____ % | Deep Sea Fishing or Diving | _____ % |
| Spring Break | _____ % | Other (specify): _____ | _____ % |
8. Does the Applicant:
- Operate its own tours? ☐ Yes ☐ No
 - Sell tours to other travel agents, affinity and/or non-affinity groups? ☐ Yes ☐ No
 - Sell tours for affiliated companies? ☐ Yes ☐ No
9. Conference in which the Applicant holds appointments. Check all that apply:
- ☐ ARC ☐ TPPC ☐ IATAN ☐ ASTA ☐ AMTRAK ☐ IATA ☐ CLIA
10. Do any of the Applicant's agents hold the designation of Certified Travel Counselor? ☐ Yes ☐ No
11. Has the Applicant ever defaulted or have any of the Owners, Partners, or Officers of the Applicant ever been associated with any agency which has defaulted to a carrier, conference or supplier? ☐ Yes ☐ No
12. Does the Applicant sell sports or event tickets in conjunction on trips? ☐ Yes ☐ No
13. Describe Applicant's policy with regards to trip cancellation: _____
14. Does your agency currently offer Travel Insurance? ☐ Yes ☐ No
If so, which products: _____
15. What legal disclaimers, if any, does the Applicant use on its sales literature or other materials? _____
16. Are legal disclaimers used regarding the safety of any given location? ☐ Yes ☐ No
17. Does the Applicant require signed waivers of liability form all clients?
If no, please explain: _____
18. Do any of the Applicant's employees accompany clients on trips? ☐ Yes ☐ No
19. How often does the Applicant consult the U.S. State Department's advisories regarding which foreign countries are deemed safe for travel? ☐ Yes ☐ No

IV. FRAUD WARNINGS

General Fraud Warning: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Applicable Notice to Applicants in:

Alabama	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution, fines, or confinement in prison, or any combination thereof.
Alaska	A person who knowingly and with intent to injure, defraud, or deceive an insurance company files a claim containing false, incomplete, or misleading information may be prosecuted under state law.
Arizona	For your protection Arizona law requires the following statement to appear on this form: Any person who knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties.
Arkansas	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
California	For your protection, California law requires the following to appear on this form: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.
Colorado	It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable for insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.
Delaware	Any person who knowingly, and with intent to injure, defraud or deceive any insurer, files a statement of claim containing any false, incomplete or misleading information is guilty of a felony.
District of Columbia:	WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.
Florida	Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim containing any false, incomplete, or misleading information is guilty of a felony of the third degree.
Idaho	Any person who knowingly, and with intent to defraud or deceive any insurance company, files a statement containing any false, incomplete, or misleading information is guilty of a felony.
Indiana	A person who knowingly and with intent to defraud an insurer files a statement of claim containing any false, incomplete, or misleading information commits a felony.
Kentucky	Any person who knowingly and with intent to defraud any insurance company or other person files a statement of claim containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.
Louisiana	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Maine	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.
Maryland	Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
Minnesota	A person who files a claim with intent to defraud, or helps commit a fraud against an insurer, is guilty of a crime.
New Hampshire	Any person who, with a purpose to injure, defraud or deceive any insurance company, files a statement of claim containing any false, incomplete or misleading information is subject to prosecution and punishment for insurance fraud, as provided in RSA 638:20.
New Jersey	Claim: Any person who knowingly files a statement of claim containing any false or misleading information is subject to criminal and civil penalties. Application: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.
New Mexico	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.
New York	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 insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.
Ohio	Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.
Oklahoma	WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.
Pennsylvania	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 insurance act, which is a crime and subjects such person to criminal and civil penalties.
Rhode Island	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
Tennessee	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.
Virginia	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.
Washington	It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.
West Virginia	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

THIS TRAVEL AGENT PROFESSIONAL LIABILITY SUPPLEMENT IS ATTACHED TO AND FORMS A PART OF THE RICHMOND NATIONAL MISCELLANEOUS PROFESSIONAL LIABILITY APPLICATION. IT IS SUBJECT TO THE SAME PROVISIONS CONCERNING REPRESENTATIONS MADE AS IN THE BASIC APPLICATION.

Name of Applicant:		
Signature of person authorized to execute on behalf of the Applicant:		Date:
Print name and title of person authorized on behalf of the Applicant:		
Agent/Broker Name:		