IPP

Part of DUAL

GLOBAL TRAVEL INSOLVENCY PROTECTION

Application for quotation (turnover £5 million or over)

FOR TOUR OPERATORS, TRAVEL AGENCIES, CRUISES AND AIRLINES

CLIENT APPLICATION: TURNOVER £5 MILLION AND OVER

FOR TOUR OPERATORS / ONLINE TRAVEL AGENCIES / CRUISES / AIRLINES

Please complete all sections of this form unless otherwise indicated. Ensure that all information provided is accurate and up to date. Submit the completed form along with any required supporting documents. Incomplete or inaccurate submissions may result in delays to the application and quotation process.

Section 1 – Company information

(New and renewing clients: to complete)

1) Please complete the below table with the relevant details

	Company requiring cover	Broker (if applicable)
Company / Broker name		
Full address (head office)		
Contact name		
Telephone number		
Trading names		
Email address		
Company registration number		
Date established		
Full registered address (if different to above)		
Web address		

(New clients: to complete, renewing clients: only complete if details have changed)

2) Based on UK definitions, past indicate the size of your company.

Is your business classified as:

- ☐ Small-sized enterprise
  Employs fewer than 10 persons and has a turnover or annual balance sheet of EUR 2 million or less.
- ☐ Medium-sized enterprise
  Small business is an enterprise which is not a micro-enterprise and has an annual turnover of less than £6.5 million, and employs fewer than 50 persons or has a balance sheet total of less than £5million.
- ☐ Large-sized enterprise
  A large commercial business is an enterprise which is exceeds the criteria to be small-sized business

Section 2 – Client service and activities

(New clients: to complete, renewing clients: only complete if details have changed)

3) Please describe the company's business activities:

Please describe your main services. For example, "We're a ski travel company specialising in Europe trips during the peak season, from December to April."

(New clients: to complete, renewing clients: only complete if details have changed)

4) Please select the relevant trade association memberships the company is a part of.

Select all that apply and provide membership numbers

Trade association		Membership number
ABTA	☐	
ATOL	☐	
IATA	☐	
ETOA	☐	
Other _____	☐	

(New and renewing clients: to complete)

5) Please confirm your Professional Indemnity Insurance details:

Insurer		
Policy number		
Sum insured	£	
Expiry date (dd/mm/yyyy)		

Section 3 – Sales territory and destinations

(New and renewing clients: to complete)

6) Where are the passengers you sell to based?

UK ☐ EU/EFTA ☐ Worldwide ☐

(New and renewing clients: to complete)

7) Do you have any passengers based in France, Austria or Belgium? ☐ Yes ☐ No

Section 4 – Estimated turnover and passengers

(New and renewing clients: to complete)

8) Please provide your estimated gross turnover broken down by category and region for the upcoming 12-month policy period, along with the total estimated number of passengers expected during this period.

(If a category does not apply, enter "0")	UK (£)	EU (£)	Worldwide (£)	No. of passengers (Pax)
Package travel				
Flights *(Linked Travel Arrangement)*				
Car hire *(Linked Travel Arrangement)*				
Hotel *(Linked Travel Arrangement)*				

Section 5 – Business profile

(New clients: to complete, renewing clients: only complete if details have changed)

9) Please select your company's ownership type and provide the relevant details:

☐ Private equity (PE)

- Date of last ownership change (dd/mm/yyyy)
- Has the company ever been denied a surety bond? ☐ Yes (provide details below) ☐ No

☐ Public Limited Company

- Can the company provide collateral? ☐ Yes ☐ No (provide details below)
- Has the company ever been denied a surety bond? ☐ Yes (provide details below) ☐ No
- Listed Stock Exchanges:

☐ Private Limited (Ltd)

☐ Other:

Section 6 – Supplier payments and payment profile

(New clients: to complete, renewing clients: only complete if details have changed)

10) When are air tickets typically issued after a booking is made?

- ☐ Immediately after booking
- ☐ 1–30 days after booking
- ☐ 30–45 days after booking
- ☐ Other:

(New clients: to complete, renewing clients: only complete if details have changed)

11) How are the Hotel suppliers typically paid?

- ☐ Before trip >> How many days before?
- ☐ After trip >> How many days after?

(New and renewing clients: to complete)

12) Please list the Top 5 destinations most frequently travelled to by your passengers

Country	Estimated number of passengers (Pax)

(New clients: to complete, renewing clients: only complete if details have changed)

13) Does your company have any end suppliers with whom annual billing represents 20% or more of your total spend? If yes, please list them below.

(e.g. 25% of the company's estimated annual billings are with British Airways)

Supplier name	Estimated annual billing (%)

(New clients: to complete, renewing clients: only complete if details have changed)

14) Who is your company's current merchant acquirer?

(i.e. the provider that processes card payments on your behalf)

☐ Worldpay ☐ Barclaycard Payment Solutions ☐ Elavon (U.S. Bancorp)

☐ Global Payments ☐ Trust Payments ☐ Other

(New and renewing clients: to complete)

15) Please confirm below your total Package and Linked Travel Arrangements turnover split by the following:

Payment method	Turnover amount (£)	% of Total turnover
Debit Card		
Visa / Mastercard Credit Card		
Other Credit Card		
PayPal		
Bank transfers / Cheques / Direct Debit		
Others (specify)		
Total Sales:		

Section 7 – Deposit and balance payment schedule

(New clients: to complete, renewing clients: only complete if details have changed)

16) Please provide details on when deposits are typically due for your packages or tickets.

a) Deposit due (in days before departure):

e.g. 60 days before departure

Days

b) Percentage of deposits paid in advance:

e.g. 30% of total package price

%

(New clients: to complete, renewing clients: only complete if details have changed)

17) Please provide details on when the final balance is typically due for packages or tickets.

a) Balance due (in days before departure):

e.g. 30 days before departure

Days

b) Percentage of balance paid as final payment:

e.g. 70% of total package price

%

Attachments checklist for new business

Private equity (PE):

- [ ] Past 3 years audited accounts. If you are looking for coverage for the subsidiaries, we will need individual financials of the Subsidiary and the Parent company's Financials/ alternatively, please provide links to the company's investment/financial section.
- [ ] Provide the company's Cash flow forecast by month for the next 12 months (projections)
- [ ] Provide details about the organisational chart for Holding and subsidiaries
- [ ] Latest Management accounts
- [ ] Signed application form by the company's Authorised director

Publicly owned:

- [ ] Past 3 years audited accounts. If you are looking for coverage for the subsidiaries, we will need individual financials of the Subsidiary and the Parent company's Financials/ alternatively, please provide links to the company's investment/financial section.
- [ ] Signed application form by the company's authorised director

Once completed, please return this form and supporting information to:
IPPTOFI@dualgroup.com

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.

Director Authorised Signature:

Director Name:

Position

Date:

If you have any questions or need further information, please feel free to contact us at IPPTOFI@dualgroup.com.
We aim to respond within 2–3 working days.

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