

Business Confidential Information
-Political Risk Insurance Application-

1. Investor Information:

Name: _____

Contact: _____ Title: _____

Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Country: _____ Telephone: _____ Fax: _____

E-mail: _____ Website: _____

Parent Company Name (if applicable): _____

Applicant's (or parent company's) most recent consolidated annual sales (or stockholder's equity for non- industrial companies): \$ _____

2. Investor is:

- A U.S. Citizen
- An entity more than 50% beneficially owned by U.S. Citizens
- A foreign corporation more than 95% owned by one of more such U.S. Entities or U.S. Citizens

3. In what country will the project take place in? _____

4. Is the Project a

- New
- Existing business to be expanded or improved.

5. Investment to be Insured?

Total amount of investment: \$ _____