



**Advantage**  
Financial Services

**COMPANY DETAILS**

<b>AGENT/APPLICANT NAME:</b>	
<b>AGENT/APPLICANT ADDRESS:</b>	
<b>TRADING AS: (if different to the above name)</b>	
<b>COMPANY REGISTRATION NUMBER:</b>	
<b>AGENT ABTA NUMBER:</b>	
<b>AGENT IATA NUMBER:</b>	
<b>OTHER ASSOCIATION NUMBER: (please state name)</b>	
<b>CONTACT NAME &amp; TELEPHONE NUMBER:</b>	
<b>EMAIL ADDRESS</b>	
<b>NAME &amp; ADDRESS of AUDITORS:</b>	
<b>TELEPHONE &amp; FAX NUMBER:</b>	

1.	Name of Company who may use the Applicant's bond, and indication of the relationship with the Applicant :	
2.	Names of Holding and Subsidiary Companies:	
3.	Business of Applicants:	
4.	Date Applicant Company commenced trading:	
5.	Last audited accounts made up to:	
6.	Issued Share Capital:	£
7.	Names in full, marital status, home address, position, and shareholding of all directors/business partners, senior staff, and shareholders:	<p>Name:</p> <p>Marital Status: Single/Married/Divorced/Registered Civil Partnership (delete, as appropriate).</p> <p>Address:</p> <p>Position:</p> <p>Number of Shares held:</p> <p>Shareholding:                      %                      £</p> <hr/> <p>Name:</p> <p>Marital Status: Single/Married/Divorced/Registered Civil Partnership (delete, as appropriate).</p> <p>Address:</p> <p>Position:</p> <p>Number of Shares held:</p> <p>Shareholding:                      %                      £</p> <hr/> <p>Name:</p> <p>Marital Status: Single/Married/Divorced/Registered Civil Partnership (delete, as appropriate).</p> <p>Address:</p> <p>Position:</p> <p>Number of Shares held:</p> <p>Shareholding:                      %                      £</p>

		<p><b>Name:</b></p> <p><b>Marital Status:</b> Single/Married/Divorced/Registered Civil Partnership (delete, as appropriate).</p> <p><b>Address:</b></p> <p><b>Position:</b></p> <p><b>Number of Shares held:</b></p> <p><b>Shareholding:</b>                      %                      £</p>
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<b>Has the applicant or any of the directors, Partners and senior management:-</b>		
<b>8.</b>	<b>Been declared bankrupt?</b>	<b>If yes, provide details separately</b>
<b>9.</b>	<b>Been a Director, Partner or senior management of a firm which has been placed in receivership and/or liquidation ?</b>	
<b>10.</b>	<p><b>Has the Company (ies) or controlling shareholders or Partners or any persons named in question 7:</b></p> <p>a) Ever found it necessary to make arrangements or seek assistance for any form of moratorium in respect of their obligations towards creditors?</p> <p>b) Been involved in legal proceedings concerning breach of contract or similar?</p>	
<b>11.</b>	<b>Has the Applicant Company(ies) or those named in question 7 been bonded for the type of bond requested herein before ? Please give full details, including renewal date of existing bond and name of Obligor:</b>	
<b>12.</b>	<b>Has the Applicant Company(ies) or those named in question 7 ever been refused bonding previously ? If so, please give details:</b>	
<b>13.</b>	<b>Has the Applicant Company(ies) or those named in question 7 ever been connected with a company where a bond has been called ?</b>	
<b>14.</b>	<b>Type and amount of bond required:</b>	<p><b>Type:</b>                      ABTA / IATA / Other</p> <p><b>Amount:</b>                      £</p>
<b>15.</b>	<b>Details of other Bonds/Guarantees/Indemnities currently in existence in respect of the Company(ies) and those named in question 7:</b>	

**PLEASE ENCLOSE:** Please tick to confirm all items have been enclosed.

i)	For new business, copy of audited accounts for the last two years for the Company and for all Holding, Subsidiary and Associated Companies. For renewals, only the most recent year's accounts are required.	<input type="checkbox"/>
ii)	If the Company has been formed within the last two years, or is newly formed and does not have two years' audited accounts, a projected Budget showing anticipated income and expenditure for the current trading year.	<input type="checkbox"/>
iii)	A Bank Position Form completed by your bank.	<input type="checkbox"/>
iv)	A copy of the bonding decision letter (amount of bond, period, etc).	<input type="checkbox"/>

### **DECLARATION**

**I/We hereby declare that :-**

a)	I/We have no reason to doubt that I/We will be able to comply with all my/our obligations.
b)	To the best of my/our knowledge, information and belief, the information contained herein is correct.
c)	<b>I/We are not aware of any circumstances which I/We have not disclosed to you which might influence you or your principal's acceptance of the risk.</b>
d)	In the event of you issuing the indemnity I/We am/are requesting, I/We will, during the period of you and your principal's liability upon your request immediately make available to you and allow you to examine and take copies of any accounts or other documents in my/our possession relating to my/our holding and/or any subsidiary financial affairs.
e)	If I/We shall receive any information, threat or other notice that ABTA or any other organisation to whom the indemnity has been given, intends to terminate my/our Membership or Appointment, I/We shall immediately inform you in writing of such information, threat or notice.

I/We declare that any material facts relating to the current trading status of the company during the currency of the Bond, will be notified immediately to The Independents' Advantage Insurance Company Limited.

I/We hereby warrant that any change in material circumstances relating to this Bond(s) application during the operational period of any Bond(s) issued as a result of acceptance of this application, will be notified immediately to The Independents' Advantage Insurance Company Limited. I/We understand breach of this warranty may result in the cancellation of the Bond(s) in question.

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

I/We hereby declare that I/We are duly authorised to complete this application for Travel Bonding.

**This proposal form, together with any supporting documentation supplied by you, forms the basis of the contract between The Independents' Advantage Insurance Company Limited and yourselves.**

<b>NAME:</b>	<b>NAME:</b>
<b>SIGNED:</b>	<b>SIGNED:</b>
<b>POSITION:</b>	<b>POSITION:</b>
<b>PRIVATE ADDRESS:</b>	<b>PRIVATE ADDRESS:</b>
<b>DATE:</b>	<b>DATE:</b>

Please return this form to:

**Advantage Financial Services Limited, 21 Provost Street, London, N1 7NH**

**BANK POSITION STATEMENT**

<b>NAME OF COMPANY</b>		
I would confirm that at close of business.....the bank position relating to the above-named company was as follows :		
<b>CURRENT ACCOUNT NUMBER: (REQUIRED)</b>		£
<b>DEPOSIT ACCOUNT NUMBER: (REQUIRED)</b>		£
<b>ANY OTHER ACCOUNTS: (REQUIRED)</b>		£
<b>DETAILS of BANK OVERDRAFT – TOTAL FACILITY:</b>		£
<b>CURRENT OVERDRAFT POSITION:</b>		£
<b>PLEASE ADVISE:</b> details of any charges, calls of debentures held by the bank on or over the assets of the Company:		

<b>ADDITIONAL INFORMATION:</b>				
<b>A)</b>	<b>If the Company has been or is at present using its overdraft, please advise:</b>			
	i)	How is the overdraft facility secured:		
	ii)	Are additional facilities likely to be available:	Yes/No	
	iii)	If so, what total upper limit:	£	
	iv)	How will any additional overdraft be secured:		
<b>B)</b>	i)	For approximately how long has the Company been actively using its overdraft facility:		
	ii)	Is the present level of overdraft Normal for this time of year:	Yes/No	
	iii)	If “no”, what would be the expected level for this time of year:	£	
<b>C)</b>	i)	Is it anticipated that the trading position of the Company over the next 3 months will bring an increase or decrease in the level of the overdraft:	Increase/Decrease	
	ii)	If an “increase”, to what anticipated maximum level:	£	
	iii)	If a “decrease”, to what approximate level:	£	
	iv)	Do you know of any steps being taken to introduce additional funds into the business or action being taken to improve liquidity:	Yes/No	
	v)	If “yes”, please provide details:		
<b>D)</b>	<b>Month</b>	<b>Current Account</b>	<b>Deposit Account (if any)</b>	
		<b>Highest</b>		<b>Lowest</b>
		Latest		
		2		
		3		
		4		
	5			
	Oldest			
<b>E)</b>	Does the Company have any funds not held on deposit, but invested outside such as money market investments ? If so, please state amount:		£	
<b>F)</b>	We confirm that we have verified and obtained satisfactory evidence of the identity of all signatories to the banking accounts			

**PLEASE COMPLETE ALL SECTIONS BEFORE SIGNING**

<b>SIGNED:</b>	
<b>FOR and ON BEHALF OF:</b> Bank plc	
<b>BRANCH:</b>	
<b>SORT CODE:</b>	

Please return this form to: Advantage Financial Services Limited, 21 Provost Street, London, N1 7NH

ADVANTAGE FINANCIAL SERVICES LIMITED: INITIAL DISCLOSURE DOCUMENT AND CLIENT TERMS OF BUSINESS  
COMMERCIAL CUSTOMERS

1. **ADVANTAGE FINANCIAL SERVICES LIMITED.** (Company number 03404728) also trades as AFS and is authorised and regulated by the Financial Conduct Authority (FCA). Our registration number is 308377. You can check this on the FCA's Register by visiting the FCA's website [www.fsa.gov.uk/register](http://www.fsa.gov.uk/register) or by contacting the FCA on tel (0845) 6060 1234. Registered office 21 Provost Street, London N1 7NH.
2. **Interpretation:** In this document, insurance refers to a contract of general insurance as defined in the Financial Services and Markets Act 2000 (Regulated Activities) Order 2001. This definition includes surety bonds.
3. **Service Standards:** we aim to give the highest level of service and conduct ourselves with the highest possible professional standards at all times. We place the interests of our clients before our own and will, declare any conflict of interest to you.
4. **Communication:** We will communicate with you by post, telephone, fax or e-mail, as appropriate. You and we each accept that electronic communication is acceptable and that such communications constitute written confirmation.
5. **Language:** whilst we have some ability in foreign languages, if you are in another EEA state we will ask you to request communication in English.
6. **Client Money and Insurer Money:** We will hold money you pay us in either:-
  - a) a Statutory Trust Account or a Non Statutory Trust Account in accordance with FCA Client Assets Sourcebook (CASS) rules, in which case some monies which you pay to us may be held in the account as client money whilst other money may be held as agent of an insurer to the extent permitted by the FSA. Money may include sums relating to premiums and claims; or
  - b) in respect of money paid to us and held as agent of an insurer under a delegated authority, in an account on behalf of the insurer, in which case the money is insurer money
7. We will keep client money in a general client bank account unless you specifically request and we agree that we keep money that you pay us in a client account designated for you.
8. We may earn interest on money held in client money accounts and such interest is retained by us.
9. If we place insurance for you through another broker we will obtain confirmation from them via a terms of business agreement that they are holding such money either in a client money account or as agent of the insurer with whom they place the insurance.
10. **Confirming cover:** Payment of cleared funds will assume that you wish to proceed and there is no need for additional written confirmation from you, that you accept a quotation and ask us to place cover, or if you wish to renew or make a change to an existing insurance. Payment signifies that you are entering into a contract.
11. **Demands and needs:** You WILL NOT receive advice or a recommendation from us for insurance. We may ask some questions to narrow down the selection of products that we will provide details on. You will then need to make your own choice about how to proceed. We will provide you with information about the insurance which you must use to assess your demands and needs.. The bond, guarantee or indemnity or other type of insurance cover will suit the Demands and Needs of a company who require certain travel company related insurance products. Full details of the specific cover and terms and conditions can be found in the policy information/booklet.
12. **Whose products do we offer?** We only offer surety bonds from a single insurer/obligor, the Independents' Advantage Insurance Company Limited (IAICL), company number 27624 (Guernsey), IAICL is authorised and regulated by the Guernsey Financial Services Commission. AFS and IAICL are wholly owned subsidiaries of Advantage Travel Centres Limited, company number 04698963. We offer Financial Protection Insurance from Mapre Asistencia and ATOL bonds, from a range of insurers including Northern & Western Insurance Company Ltd.
13. **Payment of premiums:** we will send an invoice (or debit note) for each insurance arranged or for amendments or adjustments thereto, and, unless stated otherwise, such sum will be due for immediate payment. We cannot grant extended credit as we have to comply with insurers' terms of credit. In some circumstances we may request payment of the premium before being able to confirm cover with an insurer.
14. If there is a credit balance on your account with us then we may offset sums due against such credit and then either pay a net refund or render an account for the net balance due. We will refund any sums due to you by issuing a credit note and refunding the sum to you without undue delay. If there is a debit balance on your account with us then we may set credits off against any sum due to us.
15. **Security of Insurers:** we do not guarantee the security of any (re)insurer and shall not be liable for any losses which you may incur as a result of any solvency difficulties of any (re)insurer.
16. **Cancellation:** Unless we tell you otherwise, you should assume that the total premium under any insurance is due in full at inception and there is no option to cancel or obtain a refund.
17. **Premium Finance:** if applicable, we may be able to arrange premium finance with a third party finance company. This must be done immediately after the inception or renewal of the insurance and you must complete and return any documentation required to set up such a credit facility without delay. If you do not complete the documentation in time for us to complete the credit and pay the insurer in accordance with their terms of credit, then the whole of the premium due must be paid immediately without the use of a finance company.
18. **Fees:** We are generally remunerated by commission payable by insurers, and no fee is payable for our services unless we agree with you in advance. Quotations will tell you about any other fees relating to any particular insurance policy. We can provide details of our remuneration on request
19. **Remuneration:** Our normal means of remuneration is from commission or brokerage earned on insurances placed, or by way of a fee negotiated and agreed with you. We will not impose on you any fees or additional charges without prior notification or discussion with you. Brokerage and fees are earned for the policy period on placement and we will be entitled to retain all fees and brokerage in respect of the full policy period in relation to policies placed by us. We may also act as a reinsurance broker and/or service provider to insurers with whom we have placed your insurances and receive remuneration by way of administrative fees or commissions for services so provided to underwriters. Some insurers will also pay additional amounts to insurance intermediaries, usually at the end of their accounting period and normally on a contract by contract basis, in recognition of profitability (sometimes called "profit commissions"), prompt payment or based on a volume incentive. These are not "PSAs"(Placement Service Agreements) nor "MSAs" (Market Service Agreements). We do not operate PSAs or MSAs for any service we provide to insurers. We may receive remuneration from premium finance and credit agencies.
20. **Claims.** You must notify us immediately you become aware of any circumstance which may give rise to a claim at the following address: Advantage Financial Services Limited, 21 Provost Street, London N1 7NH; by telephone: 020 7324 3938; fax 020 7324 3999; or by e-mail: [afs@advantagetravelcentres.com](mailto:afs@advantagetravelcentres.com). You must provide us with every co-operation and all information required in order to facilitate the claim. You must not withhold any material information or make any false or inaccurate statement in connection with any claim.
21. **Material Facts:** Please note that in connection with any insurance contract you have a duty to disclose all circumstances material to the insurance. Failure to do so may invalidate the insurance or enable the insurer to decline claims. The obligation to disclose material facts exists both at the time when the insurance contract commences and throughout the duration of the contract. If you are in any doubt as to what constitutes a material fact you should consult us.
22. **Complaints:** if you wish to register a complaint, please contact us: In writing by letter to: the Compliance & Risk Manager, Advantage Financial Services Limited, 21 Provost Street, London N1 7NH; by fax: 020 7324 3999; by e-mail to: [afs@advantagetravelcentres.com](mailto:afs@advantagetravelcentres.com). Any complaint will be dealt with promptly in accordance with our complaints procedure, a copy of which is available on request. If you cannot settle

your complaint with us, you may be entitled to refer it to the Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, LONDON, E14 9SR; tel (0845) 080 1800, fax 020 7964 1001.

23. **We are covered by the FSCS.** You may be entitled to compensation from the Financial Services Compensation Scheme (FSCS) if we cannot meet our obligations. This depends on the type of business and the circumstances of the claim. Insurance advising and arranging is covered for 100% of the first £2,000 and 90% of the remainder of the claim, without any upper limit. For compulsory classes of insurance, insurance advising and arranging is covered for 100% of the claim, without any upper limit. Further information about compensation scheme arrangements is available from the FSCS.