Travelers Casualty and Surety Company of America
Hartford, Connecticut

MAIL INSURANCE APPLICATION

I.   Insured: _____

II.   Address: _____
        _____
        _____

III.   Address from which most Mailings are sent:
        _____
        _____
        _____

IV.   Number of Branches: _____

        List foreign locations: _____
        _____

V.   Limits Requested:

Domestic & Foreign Locations	Registered Mail/Outside Courier
Non-Negotiable Securities	$
Negotiable Securities, Postage & Revenue Stamps, Money Orders, Certificates of Deposit, Checks, Drafts, Promissory Notes, Bills of Lading, Warehouse Receipts and other Documents and Papers of Value	$

Domestic Locations	First Class Mail
Non-Negotiable Securities	$
Negotiable Securities	$

VI.   Most Common Types of Instruments Sent:

Type of Negotiable Security	Type of Non-Negotiable Security	Other Instruments

Does the Insured act as Transfer Agent?   Yes   No

Note: All items must be replaceable by a Lost Instrument Bond.

VII.   Total dollar value of mailings ("**TDV**") during the twelve month period beginning

_____

TDV and MSA for Registered Mail and Outside Courier Shipments

Registered Mail/Outside Courier	TDV Domestic Shipments*	Maximum Shipment Amount	TDV Foreign Shipments**	Maximum Shipment Amount
Non-Negotiable Securities	$_____	$_____	$_____	$_____
Negotiable Securities, Postage & Revenue Stamps, Money Orders, Certificates of Deposit, Checks, Drafts, Promissory Notes, Bills of Lading, Warehouse Receipts and other Documents and Papers of Value	$_____	$_____	$_____	$_____
Bullion, Platinum and Other Precious Metals	$_____	$_____	$_____	$_____
Currency, Jewelry, Watches, Necklaces, Bracelets, Gems, Precious and Semi-Precious Stones, etc.	$_____	$_____	$_____	$_____

TDV and MSA for First Class Mail Shipments

First Class Mail	TDV Domestic Shipments	Maximum Shipment Amount	--KEY--
Non-Negotiable Securities	$_____	$_____	**TDV**=Total Dollar Value of mailings for the year.
Detached Coupons	$_____	$_____	**MSA**=Maximum Shipment Amount for one single package for the year
Negotiable Securities	$_____	$_____	**Outside Courier:** i.e. UPS, Federal Express, etc.

VIII.   List all losses within the last three years by type of property, mail and amount:

*Domestic includes mailings to Canada or Puerto Rico.

**Foreign means mailings to or from a country other than the United States, Puerto Rico or Canada.

THE UNDERSIGNED AUTHORIZED AGENT OF THE APPLICANT DECLARES THAT TO THE BEST OF HIS/HER KNOWLEDGE AND BELIEF, AFTER REASONABLE INQUIRY, THE STATEMENTS SET FORTH HEREIN ARE TRUE AND COMPLETE. IF THE INFORMATION IN THIS APPLICATION CHANGES PRIOR TO THE INCEPTION DATE OF THE POLICY, THE APPLICANT WILL NOTIFY THE COMPANY OF SUCH CHANGES, AND THE COMPANY MAY MODIFY OR WITHDRAW ANY OUTSTANDING QUOTATION.   THE COMPANY IS AUTHORIZED TO MAKE INQUIRY IN CONNECTION WITH THIS APPLICATION.

Attention: Insureds in AR, CO, DC, FL, KY, LA, ME, NJ, NM, NY, OH, OK, PA, TN, and VA
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 may also be subject to a civil penalty.

(In New York, the civil penalty is not to exceed five thousand dollars and the stated value of the claim for each such violation.) (In Colorado, 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 from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.)

_____

Signature of Applicant   Date
(Risk Manager or Insured Representative)

_____

Name (printed)

_____

Title   Address

_____

Signature of Agent/Broker   Date

Please send your completed form via email to
sanjiv.sabade@getamba.com / steve.miller@getamba.com.