

# **CREDIT INSURANCE PROPOSAL REQUEST**

# BROKER DATA

		BROKER DATA				
AGENCY :		PARTNER :				
TELEPHONE No : FAX No :						
	A	COMPANY DAT	A			
COMPANY NAME :		http ://	NAME OF PARI (IF EXISTING) :			
СПТҮ:	ZIP :	STREET :	NU	MBER :		
NATIONAL IDENTIFICATION NUMBER :	TAX AUTHORITY :	TEI	.: FA	<b>x</b> :		
ESTABLISHED :	LEGAL FORM :	co	OMPANY CAPITAL :			
ACTIVITIES :						
B. CREDIT RISK ANALYSIS						
1.	Fil	NANCIAL DATA				
Amounts in €	AMOUNTS BE	FORE V.A.T.	AMOUNTS INCLUDING V.A.T.	V.A.T. RATE		
	CUP					

		CURRENT YEAR		THREE PREVIOUS YEARS			
	FROM :	то:	YEAR :	YEAR :	YEAR :		
TURNOVER							
BAD DEBTS*							
COLLECTIONS*							
HIGHER BAD DEBT							
NUMBER OF BAD DEBTS							
* Fill in the total amount of had dabte and calls	ationa (reast arias) for	and waar annarately. Do not	transfer auros fram areadau		•		

Fill in the total amount of bad debts and collections (recoveries) for each year separately. Do not transfer sums from previous years.

ANTICIPATED TURNOVER FOR THE NEXT FINANCIAL YEAR :

2.

AMOUNT INCLUDING V.A.T.

## MAJOR LOSSES CAUSED BY BAD DEBTS DURING THE LAST THREE YEARS

	COMPANY NAME	ADDRESS	NATIONAL INDENTIFICATION NUMBER	AMOUNT	YEAR
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

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Credit Insurance S.A. V.A.T. No : EL 094432889 G.E.MI. 1833701000



## **BUYERS' GEOGRAPHIC DISTRIBUTION DURING THE PREVIOUS YEAR**

BUYERS' COUNTRY	NUMBER OF BUYERS	TOTAL TURNOVER
GREECE		
EUROPEAN UNION		
OTHER COUNTRIES :		

4.

5.

1.

3.

#### **BUYERS' SYNTHESIS \***

#### \* Distribution of previous year sales per buyers' categories

MANUFACTURERS	%	WHOLESALERS	%	PUBLIC SECTOR	%
HANDCRAFTSMEN	%	RETAILERS	%	INDIVIDUALS	%
AGENTS	%	OTHER	%	RELATED COMPANIES	%

## **RETENTION OF TITLE**

DO YOU FREQUENTLY PROCEED TO A RETENTION OF TITLE :

YES

NO

PARTIALLY

# **C. CREDIT POLICY**

# USUALLY APPLIED PAYMENT TERMS ( AS A PERCENTAGE OF YOUR TURNOVER )

Sales distribution based on the agreed credit period. Credit period is the time, as of the date of invoicing, within which the buyer must pay for the purchased goods or services (including the time for the accepted securities to be paid).

SALES IN CASH	%	SALES ON CREDIT FROM 61 TO 120 DAYS	%
SALES WITH IRREVOCABLE LETTER OF CREDIT	%	SALES ON CREDIT FROM 121 TO 180 DAYS	%
SALES ON CREDIT UP TO 60 DAYS	%	SALES ON CREDIT EXCEEDING 180 DAYS	%

AVERAGE INVOICE ISSUE TIME FOLLOWING THE GOODS' DELIVERY DATE :

# 2. USUAL SECURITIES RECEPTION MODE ( AS A PERCENTAGE OF YOUR TURNOVER )

RECEIPT UPON DELIVERY	%	RECEIPT AT A LATER STAGE AFTER DELIVERY	%
PAYMENT WITH CHEQUES ISSUED BY THE BUYERS	%	BILLS OF EXCHANGE	%
PAYMENT WITH THIRD PARTY CHEQUES	%	OPEN ACCOUNT	%
GUARANTEES / BONDS	%	OTHER, COLLATERAL OR NOT SECURITIES	%

OTHER AGREEMENTS WITH BUYERS (IF YES, PLEASE STATE COMPANY NAME, NATIONAL INDENTIFICATION NUMBER AND TERMS) :



<b>BUYERS</b> '	CREDIT RATING ASSESSMENT BY :
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SPECIAL DEPARTMENT	YES	NO	SITE VISIT	YES	NO	
BANK INFORMATION	YES	NO	DETRIMENTAL DATA AUDIT	YES	NO	
MARKET INFORMATION	YES	NO	BULLETINS ISSUED BY SPECIALIZED INFORMATION AGENCIES	YES	NO	

SPECIALIZED INFORMATION AGENCIES YOU COOPERATE WITH :

HOW OFTEN DO YOU UPDATE INFORMATION ON YOUR BUYERS ?	W OFTEN DO YOU UPDATE INFORMATION ON YOUR BUYERS ? 3 MONTHS		6 MONTHS	12 MONTHS	
DO YOU APPROVE NEW ORDERS BASED ON THE BUYER'S CREDIT BALANC	YES	NO			
DO YOU APPROVE NEW DELIVERIES BASED ON THE BUYER'S CREDIT BALA	YES	NO			

CREDIT LIMIT APPROVAL - INCREASE - REDUCTION APPROVED BY

(NAME):

1.

3

**POSITION :** 

#### **D. DEBTORS' ANALYSIS**

# DEBTORS' TOTAL BALANCES \* BY THE END OF THE MONTH :

\* All amounts should include any unpaid securities

MARCH 201			SEPTEMBER 201			
JUNE 201			DECEMBER 201			
ARE THERE ANY SEASONAL SALES	? YES	NO	IF YES, WHEN AND WHAT PERC	ENTAGE		
			OF THE TURNOVER DO THEY REP	RESENT ?		
2. DEBTORS' LIST PER CREDIT LIMIT AT THE END OF THE PREVIOUS YEAR						

# DEBTORS' LIST PER CREDIT LIMIT AT THE END OF THE PREVIOUS YEAR

Fill in the aggregate balance of your debtors at the previous financial year closing. This amount should include unpaid securities (bills of exchange, cheques, etc.) per credit limit category. The credit limit is defined as the maximum, during the year, receivables amount from the specific buyer, including unpaid securities. The general total of your debtors' balances must agree with the total debtor balances in December of the previous year.

CREDIT LIMIT	NUMBER OF BUYERS	PERCENTAGE OF TURNOVER	AGGREGATE BALANCES	TOTAL TURNOVER
UP TO 10,000 €				
10,001 – 15,000 €				
15,001 – 20,000 €				
20,001 – 50,000 €				
50,001 - 100,000 €				
100,001 - 150,000 €				
150,001 - 300,000 €				
300,000 € +				
TOTAL				

# E. MAJOR BUYERS ON CREDIT TERMS

**MAJOR BUYERS** 

AMOUNTS

AMOUNTS

1.

#### BEFORE V.A.T. INCLUDING V.A.T. NATIONAL NAME INDENTIFICATION COUNTRY CREDIT LIMIT CREDIT PERIOD PREVIOUS YEAR TURNOVER NUMBER 1 2 3 4 5 6 7 8 9 10

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# **BUYERS SERIOUSLY DELAYING PAYMENT OR CAUSING PROBLEMS**

	NAME	NATIONAL INDENTIFICATION NUMBER	COUNTRY	CREDIT LIMIT	PREVIOUS YEAR TURNOVER
1					
2					
3					
4					
5					

#### F. GENERAL

#### LEGAL PROCEDURES

HOW MUCH TIME AFTER THE INITIAL DUE DATE OF YOUR RECEIVABLE DO YOU USUALLY :

SEND REMINDER LETTERS :

START WITH COLLECTION PROCEDURES:

STOP DELIVERIES : **START WITH LEGAL PROCEDURES :** 

WHICH ACTIONS DO YOU TAKE IF YOU ARE NOTIFIED ABOUT THE PRESENCE OF UNFAVOURABLE DATA (DETRIMENTALS) FOR A BUYER :

	2.			BA	NKS				
ſ	COOPERATING BANKS :								
	WOULD YOU LIKE TO ASSIGN YOUR RIGHTS FOR INDEMNIFICATION TO A BANK OR A FINANCIAL INSTITUTION ? YES NO								
ĺ	IF YES, FILL IN THE BRANCH'S NAME AND ADDRESS :								
	3. EXISTING CREDIT INSURANCE OR FACTORING POLICIES								
	DO YOU HAVE A CURRENTLY VALID POLICY ?	NO		YES		EXPIRY DATE : INSURANCE COMPANY / FAC	TORING CO	MPANY :	

CANCELL	DATE ·
CANCELL	DAIL.

**CANCELLATION REASONS:** 

#### **BALANCE SHEETS**

PLEASE ATTACH YOUR COMPANY'S BALANCE SHEETS FOR THE LAST TWO YEARS

#### ATTENTION

The information requested within this Insurance Proposal Request is entirely confidential and its aim is to facilitate the study and elaboration of the proposal, as well as to draft the Insurance Policy terms.

In particular, we would like to draw your attention to the following :

Both the Insurance Proposal Request and declarations made by the POLICY HOLDER are an integral part of the Insurance Policy and its amendments. This Policy is based on the accuracy and reliability of the data provided by the POLICY HOLDER, especially those objectively relevant to the risk assessment.

If the POLICY HOLDER omits to notify the INSURER or wrongly declares any of the above mentioned data, be it without malice, the INSURER is entitled to terminate the Policy or request its modification. Furthermore, the INSURER is disengaged from its obligation to indemnify the POLICY HOLDER.

Signing this Request does in no case imply or entail an obligation on behalf of the INSURER to insure the resulting risks.

DATE : ..... / ..... / .....

#### STAMP AND SIGNATURE

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#### SIGNATORY'S NAME AND POSITION

Credit Insurance S.A. V.A.T. No : EL 094432889 G F MI 1833701000