

Proposal Form – SME

This information will be treated in complete confidence.

1. Your company details

Registered Company Name

Address

Company Registration Number	<input type="text"/>	VAT Number	<input type="text"/>
Contact Name	<input type="text"/>	Contact Telephone Number	<input type="text"/>
Contact Position	<input type="text"/>	Contact Email	<input type="text"/>

2. Your business

Your projected credit sales for next 12 months (excluding, VAT, sales to associated* & subsidiary companies, public buyers, CILC & cash sales). If you wish to seek cover for any of these exclusions (except cash) please notify us.

Domestic Turnover Export Turnover Currency

What are your terms of payment?

Type of goods sold or services provided?

Do you always act in capacity of contractual principal?
i.e. the party to the contract who is legally entitled to take recovery action Yes No

If No please give brief details

3. Turnover and Losses - Details of your credit sales per annum (year to date & previous 3 years).

Exclude: VAT, sales to associated* & subsidiary companies, public owned buyers, CILC & cash sales.

Financial Period	Annual Turnover	Bad Debts	Number of bad debts	Largest Bad Debt
Year To Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Year 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Year 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Year 3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

* Associated buyers are companies where there is any of the following circumstances between you and the buyer, either directly or indirectly - shareholding, common/shadow directors, family relationships, loans or guarantees.

4. Debtor Balances for the last 4 financial quarters

Q1 Q2 Q3 Q4

5. Debtor Analysis - Current amounts owing by your debtors listed by the value currently outstanding

Debtor range	number	value	Debtor range	number	value
over 500,000			10,001-25,000		
250,001-500,000			5,001-10,000		
100,001-250,000			2,501-5,000		
50,001-100,000			1,001-2,500		
25,001-50,000			up to 1,000		
			TOTALS		

6. Overdue Accounts - The value outstanding by the number of days overdue past the due date of payment

1-30 days overdue	31-60 days overdue	61-90 days overdue	>90 days overdue

7. Credit Control

When do you place accounts on stop?

When do you start legal action?

Does your contract of sale include all monies Retention of Title? Yes No

Please list any seriously overdue accounts

Name	Amount	Action

8. Countries - Your estimated turnover for each country you sell to (for those companies seeking export cover)

Country	Estimated turnover for next 12 months
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

9. Key Customers - List your key customers and the credit limit required

	Name	Address	Country	Registration Number	Required credit limit
1					
2					

		Registration Number	Required credit limit
3	Name Address Country		
4	Name Address Country		
5	Name Address Country		

10. Beneficial Owners - Complete all of the details of your Ultimate Beneficial Owner (UBO) see explanatory notes below

Please tick the appropriate box and complete the details that apply to your company

- 1 We do not have an Ultimate Beneficial Owner having an Interest in us of 25% or more
- 2 We are a listed company trading on the following stock exchange or a supervised institution
- 3 We have one (or more) direct or indirect shareholders of 25% or more, which is a listed company or a supervised financial institution

Name of listed company/supervised financial institution	Registered address	Name of Stock exchange or regulator

- 4 We have one or more Ultimate Beneficial Owner(s) with an Interest in us of 25% or more. Details below.

	First Name(s) and Surname UBO	Full address of UBO	Date of Birth of UBO DD/MM/YY	Percentage of (in)direct interest
1				
2				
3				
4				

You must provide a copy of the original photo identity document (e.g. a driver's licence or a passport) for each person indicated/named above as Ultimate Beneficial Owner.

If sending a copy of the identity document electronically, you acknowledge that e-mailing is inherently insecure.

Explanatory Notes

Why does Atradius require details of the company's ultimate beneficial owners?

Due to the regulations on the prevention of the use of the financial system for laundering of money, the financing of terrorism and the obligation to adhere to sanction regulations, financial institutions are obliged to comply with national and international rules and regulations. As an insurer, there is a regulatory requirement for Atradius to identify the persons with whom it has a 'relation'.

Ultimate Beneficial Owner(s) (UBO)

The UBO being a person owning, directly or indirectly, 25% or more of the share capital, voting rights or effective control of the company needs to be identified with: full name and address, date of birth and listed in the registered annual accounts.

11. Your Directors of the company

First Name(s) and Surname	Address	Date of Birth DD/MM/YY

Is this a full list of the company directors? Yes No If No please provide further details separately

12. Broker Nomination

We nominate the following broker to our policy.

By appointing this broker we acknowledge that they are our agent and any communications shall be deemed as being between us and you and the broker is authorised to process confidential and personnel data on our behalf. The agreement shall be valid until we or our broker notify you otherwise in writing.

Broker Name	Broker Address

13. Privacy

The information provided within this Proposal will be treated by Atradius in confidence and in compliance with applicable regulation and legislation. We may send it, in confidence, for processing outside the European Economic Area. In submitting this Proposal to Atradius you consent to the Atradius group of companies using the information we may hold about you or others related to your policy, whether or not derived from this proposal, for the purposes of providing insurance and related services, and handling claims, if any. In using the information, Atradius may give some details to third parties such as, claims adjuster, fraud detection and prevention, service providers, reinsurers, regulatory authorities, dispute resolution organisations, professional advisors such as lawyers, recovery agents, or to other persons whom you authorise such as brokers or joint insureds.

Atradius will not pass on your details to third parties for the purposes of marketing; however Atradius may contact you from time to time to inform you about our product offering. You or others related to your policy may have a right to apply for a copy of this information (for which Atradius reserves the right to charge a small fee) and to have any inaccuracies corrected.

14. Declaration and Signature of the Company Representative

Your Declaration

We declare that we understand that a contract of insurance is one of utmost good faith and that the information we provide must be accurate, complete and not misleading and that all circumstances, facts or matters that may affect your consideration of the Proposal must be disclosed. We declare that the information given is, to the best of our knowledge and belief, correct, the risk has been presented fairly and that we are not aware of any circumstances that we have not disclosed to you which might influence your assessment of and willingness to accept the risk. We acknowledge that a failure by us in this regard may entitle Atradius to invoke the remedies available to it by law, which may in certain circumstances treat the insurance, if a Policy is issued, as never having existed. This Proposal is deemed to be restated upon each renewal; you declare that you will undertake to inform Atradius of any material alteration of the information contained within promptly upon becoming aware of such alteration. By submitting this Proposal you are inviting Atradius to consider your application for an insurance policy to be issued to you. Atradius is not obliged to offer a policy to you and if approved the terms of any policy issued will be at Atradius' discretion.

The undersigned is an authorised representative of the company and authorised to act on behalf of the company.

Name		Position	
Signed		Date	

If you are not a director of the company please provide a letter signed by a company director on your company letterhead confirming that you are authorised to sign this proposal on the company's behalf.

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