

# Proposal Form - Credit

For Chubb use only:

Date received:

Reference number:

The information provided in this Proposal will be treated in the strictest confidence and, if fully completed, will enable us to assess your risks and determine whether we can indicate terms.

Before an insurance contract is entered into, the Applicant must make a fair presentation of the risk to the Company. An Applicant must disclose to the Company every material circumstance which the Applicant knows or ought to know. The disclosure must be made in a reasonably clear and accessible way. Every material representation of fact must be substantially correct and every material representation of an expectation or belief is made in good faith.

Before answering the questions in the proposal form and making a fair presentation to the Company, the Applicant must make a reasonable search of information available to it. The information may be held within the Applicant’s organisation, or by a third party (including but not limited to subsidiaries, affiliates, an insurance broker or agent or any other entity who will be covered by the insurance)

## Applicant’s details

Company name:

Registered number:

Contact name:

Position:

Address:

Postcode:

Website:

Email:

Is cover required for any other Group company?

Yes

No

If yes, please provide full details:

## Business activities

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In your business do you act as an agent or principal?

What kind of goods / services do you sell (Goods Insured)?

To which trade sector do you sell them?

What is the period from date of contract to date of shipment?

Do you manufacture the goods that you sell?

Yes

No

If yes, where are the goods manufactured?

What are your normal terms of payment?

What extended terms of payment do you sell on?

What extended terms of payment do you sell on?

What is your average days' sales outstanding?

Is your business seasonal?

Yes

No

If yes, please provide details:

Do you require any special features of cover?

- Binding contracts cover
- Consignment stock
- Preferential claim
- Pre-shipment/work in progress
- Political risk
- Self-billing
- Other

Yes

No

Yes

No

Yes

No

Yes

No

Yes

No

Yes

No

Yes

No

If yes, please specify:

**Other credit insurance policies, guarantees, securities**

Do you at present hold any credit insurance policy, guarantees or security in connection with the credit risk on any of your Buyers? Yes No

If yes, what is it?

Do you factor, discount or otherwise assign your debts? Yes No

If yes, please provide details:

Have you ever had an insurance policy cancelled or a renewal refused by an insurer? Yes No

If yes, please provide details:

**Past experience** (please state currency if not £)

Financial year - M/Y	Turnover	Losses* (net of VAT)	Largest individual Loss	Number of Losses
1				
2				
3				
4				

Year to date:

To:

\* Please indicate if Losses given are (a) arising from Shipments made during the year, or (b) in respect of Losses occurring during the year. Please do not give write-offs made during the year.

Please provide details of largest individual Losses:

Financial year - M/Y	Buyer	Losses* (net of VAT)
1		
2		
3		
4		

Year to date:

To:

\* Please indicate if Losses given are (a) arising from Shipments made during the year, or (b) in respect of Losses occurring during the year. Please do not give write-offs made during the year.

**Debtor balances** (please state currency if not £)

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As at last:

31 March	30 June
30 September	31 December

**Current aged debt analysis** (please state currency if not £)

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As at:

Range	Total debt outstanding
<b>Current (not yet due)</b>	
<b>1-30 days past due date</b>	
<b>31-60 days past due date</b>	
<b>61-90 days past due date</b>	
<b>Over 90 days past due date</b>	
<b>Total</b>	

**Buyer Profile** (please state currency if not £, and amend the range values if appropriate)

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Range	Total debt outstanding	Number of buyers
0 - 5,000		
5,001 - 10,000		
10,001 - 25,000		
25,001 - 50,000		
50,001 - 75,000		
75,001 - 100,000		
100,001 - 250,000		
250,001 - 500,000		
500,001 - 1,000,000		
1,000,000 +		

**Projected turnover details** (please state currency if not £)

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Please provide details of your projected turnover excluding the following: sales to any associated or subsidiary companies; government departments, public authorities or nationalised undertakings except for export business where such cover is expressly required

Period from:

To:

Country	Estimated turnover	Maximum exposure at any one time	Terms of payment

**Principal Buyers** (please state currency if not £)

Registered name	Registered address	Maximum exposure at any one time
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**List of accounts more than 60 days overdue, accounts giving cause for concern and/or where deliveries have been stopped**

As at:

Name & Address	Amount outstanding	Original due date	Action taken

## **Credit procedures**

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We need a fully completed Chubb Credit Procedures Questionnaire before a policy can be issued.

Do you have a credit procedures manual? Yes      No

If yes, please attach Attached

## **Sanctions**

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Do you currently trade with any Buyers, individuals or Buyer Countries that are subject to US, EU or UK Sanctions? Yes      No

If yes, please provide details:

Do you carry out checks on your Buyers to ensure that they are not subject to and US, EU or UK Sanctions? Yes      No



## Declaration

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On behalf of the Applicant, I declare that:

I have made a fair presentation of the risk in a clear and accessible way after making a reasonable search of information available to the Applicant (including information held by third parties) by disclosing all material matters which the Applicant knows or ought to know.

To the best of my knowledge and belief, the statements set out in the this Credit Procedures Questionnaire and the presentation of the risk are true and complete and that I am not aware of any circumstances that I have not disclosed to you which might influence your assessment of the risk.

Name of Signatory

Position in company

Signature

Date

For and on behalf of:

When you have completed and signed this form, please forward it to:

### Trade Credit

Chubb Global Markets  
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Please be informed and inform your customers that Chubb uses the personal information which you supply to us for underwriting, policy administration, claims management and other insurance purposes, as further described in our Master Privacy Policy, available at [www.chubb.com](http://www.chubb.com).

This document respects the WCAG guidelines however the complexity of the form might make the reading order difficult. If you need assistance please contact [ecomunications@chubb.com](mailto:ecomunications@chubb.com).



**Chubb. Insured.<sup>SM</sup>**

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