

Proposal Form - Single Customer

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 details:

Business activities

Do you act as an agent or principal?

What goods / services do you sell?

To which trade sector do you sell?

Do you manufacture the goods that you sell?

Yes

No

Is your business seasonal?

Yes

No

If yes, please provide details:

Buyer to be insured

Buyer name:

Buyer address:

Registered number:

Is cover required on any other company associated with this Buyer?

Yes

No

If yes, please provide details:

Contract to be insured

Please describe the contract to be insured:

Why are you looking to insure this Buyer / contract?

Is the contract in respect of revolving business or a specific project? Please provide details:

Do you have a written supply contract with the Buyer?

Yes No

If yes, please attach

Attached

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

What are the terms of payment?

Do these differ from your standard terms of payment?

Yes No

If yes, please provide details:

What is the expected maximum exposure under the contract?

Other credit insurance policies, guarantees, securities

Do you presently hold any insurance policy, guarantee or security in connection with the credit risk on this Buyer?

Yes No

If yes, please provide details and date of expiry.

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:

Trading history and terms

How long have you traded with this Buyer?

Have you ever experienced payment delays or other problems in dealings with the Buyer?

Yes

No

If yes, please provide details:

What is the expected turnover with this Buyer in the forthcoming 12 months?

Current aged debt analysis for the Buyer to be insured (please state currency)

Range	Outstanding debt	
	Total debt	Buyer to be insured
Current (not yet due)		
1-30 days overdue		
31-60 days overdue		
61-90 days overdue		
Over 90 days overdue		
Total		

Financial information

Please attach:

• your internal credit assessment on the Buyer

Attached

• any financial information that you have on file

Attached

Sanctions

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

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
100 Leadenhall Street
London EC3A 3BP

trade.credit@chubb.com

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.



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UK business address: 100 Leadenhall Street, London EC3A 3BP. Supervised by the French Prudential Supervision and Resolution Authority (4, Place de Budapest, CS 92459, 75436 PARIS CEDEX 09) and authorised and subject to limited regulation by the Financial Conduct Authority. Details about the extent of our regulation by the Financial Conduct Authority are available from us on request. You can find details about the firm by searching 'Chubb European Group SE' online at <https://register.fca.org.uk/>.

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