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LETTER OF APPOINTMENT CREDIT INSURANCE

Contract / policy number \_\_\_\_\_

Name Credit Insurer \_\_\_\_\_

Contact person Credit Insurer \_\_\_\_\_

We appoint, effective from the signed date:

**Xolv BV**

**Julianaplein 8**

**5211 BC 's-Hertogenbosch**

**The Netherlands**

as our exclusive broker for all of our credit insurance contracts with your company, including co-insured companies and excluding all other broker companies.

We ask you to provide Xolv BV with all necessary information and requirements at request.

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Name undersigned \_\_\_\_\_

Job Title undersigned \_\_\_\_\_

Date

Signature

\_\_\_\_\_

Business relation hereby grants his/her unequivocal permission to Xolv B.V. to process his/her personal details by Xolv B.V. itself as well as by insurance companies in case the processing of personal details is essential for the correct implementation of the agreement that was made between Xolv B.V. and the relevant business relation and in case it serves a legitimate interest. Business relation is aware of the fact that Xolv B.V., as intermediary, is required to forward these personal details to the financing companies, for which business relation also hereby grants its unequivocal permission. Xolv B.V. will handle these personal details with complete discretion and will take any and all measures it is required to take by applicable privacy laws.