

Insurance of turnover on one buyer.

1. Our details

Company name	Chamber of Commerce reg.
Address	VAT number
Postal code	City
Contact person	m/f Job title
Phone number	Email
Website	
Main business activity	

2. Details of the buyer

Company name	Company registration number
Address	Country
Contact name	Phone number
URL Website	
Main activities buyer	

3. Details of contract goods and services

Description of the goods/services to be supplied to the buyer:

◆ Goods:

◆ Services:

Are the goods/services manufactured provided entirely by you? No Yes

◆ If not, please explain:

What is the destination of the goods/services?

Has the contract with the buyer already started? No Yes

◆ Contract date

Does the contract contain provisions for delivery to take place all at once or in parts?

◆ With regard to the goods With regard to the services

What percentage of your total turnover is covered by this buyer?

4. Turnover, terms of payment

Total turnover on this buyer:

Next year 2022 € _____

Current year 2021 € _____

Last year 2020 € _____

What is the payment term? _____

In what currency must the contract price be paid? _____

Days Sales Outstanding (DSO) _____

Total outstanding quarterly (€)

31-03: _____ 30-09: _____

30-06: _____ 31-12: _____

Highest expected outstanding next 12 months? in € _____

5. Collection and security

Do you require a security for the payment such as letter of credit, retention of title, surety, mortgage or bill of exchange?

How much of the contract price needs to be covered by the above mentioned security? € _____

When must this security be provided? _____

Name and address of the parties providing the above mentioned security:

6. Required cover

What percentage do you require to be covered? (ex VAT) 75 80 85 90

What type of insurance do you require? credit risk pre-credit risk and credit risk

Regarding pre-credit risk. What is the period between the contract date and final delivery? _____

Maximum (months): _____

7. Start date insurance

1 _____ 20 _____

8. Other information

Do you have a credit insurance at the moment? No Yes

◆ If so, what is the name of the insurer?

What is the due date of this contract?

Has a credit insurance policy ever been rejected to your company? No Yes

Why do you want to insure this buyer instead of your total turnover?

Did you have payment issues with this buyer before?

Is there any other information that may be relevant for the assessment of the risk?

9. Signature

We ask you to process this application in full confidence and appoint Xolv B.V. as our exclusive broker excluding any other broker, effective from the signed date. We declare that we have answered the questions above truthfully and fully and that we have not withheld any information that could be relevant to the Underwriting Credit Insurer. If we instruct a Credit Insurance Company to draw up a policy, insurance cover will be provided on the reliance of the above information.

Name

Place

Signature

Date

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.