XOL - EXCESS OF LOSS



1. General Information							
Company name:							
Registered address:							
Administrative address:							
Contact name:							
Company Registration number:		V	AT number:				
Telephone number:		Fo	ax number:				
E-mail:		W	/ebsite:				
If applicable please give the nar	me, address and c	ompany registrat	ion number of your parent	company:			
Are you currently credit insured?				Yes - No			
If yes, please give the name of yo	our insurer and polic	y expiry date:					
Do you use a broker?				Yes - No			
If yes, please give the name of your broking house and contact:							
Are you currently factoring your	invoices?			Yes - No			
If yes, please give the name:							
2. Nature of Applicant's	business						
Detailed description of business:							
Specify the economic sector of y							
Specify the economic sector of y Customers' economic se		percentage per s	ector Customers' econd	omic sector	Percentage		
				omic sector	Percentage		
Customers' economic se				omic sector	Percentage		
	ector P	ercentage		omic sector			
Customers' economic se	ector Pr				Percentage Percentage		
Customers' economic set Specify the kind of customers Ma	Punufacturers:	ercentage		Intercompany:			
Customers' economic set Specify the kind of customers Ma	Position Pos	ercentage	Customers' econo				
Customers' economic set Specify the kind of customers Ma Service	Properties of the properties of the providers:	ercentage	Customers' econo	Intercompany:			
Customers' economic set Specify the kind of customers Ma Service	Position Pos	ercentage	Customers' econo	Intercompany:			
Customers' economic set Specify the kind of customers Ma Service Put	Properties	ercentage	Customers' econo	Intercompany:			
Specify the kind of customers Ma Service Pul 3. Turnover per country	Punufacturers: Wholesalers: be providers: blic debtors:	ercentage	Others: Others:	Intercompany:			
Customers' economic set Specify the kind of customers Ma Service Put	Punufacturers: Wholesalers: be providers: blic debtors:	ercentage	Others: Others:	Intercompany:			
Specify the kind of customers Ma Service Pul 3. Turnover per country	Properties	ercentage ercentage s, private debtors	Others: Others:	Intercompany:			
Specify the kind of customers Ma Service Put 3. Turnover per country (excl. intercompany, public, cash	Properties	ercentage ercentage s, private debtors	Others: Others:	Intercompany:			
Specify the kind of customers Ma Service Put 3. Turnover per country (excl. intercompany, public, cash	Properties	ercentage ercentage s, private debtors	Others: Others:	Intercompany:			
Specify the kind of customers Ma Service Put 3. Turnover per country (excl. intercompany, public, cash	Properties	ercentage ercentage s, private debtors	Others: Others:	Intercompany:			
Specify the kind of customers Ma Service Put 3. Turnover per country (excl. intercompany, public, cash	Properties of the past 2 years	ercentage ercentage s, private debtors	Others: Others:	Intercompany: Private debtors:			
Specify the kind of customers Ma Service Put 3. Turnover per country (excl. intercompany, public, cash	Properties of the past 2 years	ercentage ercentage s, private debtors	Others: Others:	Intercompany: Private debtors:			

3.2. Estimated A	nnual Insurable II	urnover per coun	try (If you trade in	more than 10 cou	untries, please pro	ovide an Excel list	in appendix)	
Country	_Estimate	d Annual H	d Annual Highest Individual		nte of	Terms of Payment		
Turnover		(excl. VAT) Outstanding		number o customer		andard	Maximum	
TOTAL								
		total turnove						
Paymen		Percentage of t	the Total Turnover		Payment Terms		Percentage of the Total Turnover	
0 -					- 120			
30 -				120) - 150			
60 -	90			OVE	er 150			
David average		_						
. Past expe								
nsolvencies and	d unpaid accoun	nts over 180 days						
			(If there o	ire more than 5 lo	Individual Los sses per vear, ple	sses ease add an Excel	list in appendix)	
Year	Total Ultimate	Number of	(di ilitaria					
(at least 5 years)	Loss Suffered	Losses	Debtor's	Total	Indemnity	Credit Limit		
			Country	Loss	Received	Internal	From Credit Insure	

6. Debtors analysis							
Ranges	Total Amount Outstanding in the Range		Num	ber of Aco	% of Total Outstanding		
Over 2.500.000							
Between 1.000.000 and 2.500.000							
Between 500.000 and 1.000.000							
Between 250.000 and 500.000							
Between 100.000 and 250.000							
Between 50.000 and 100.000							
Between 20.000 and 50.000							
Between 15.000 and 20.000							
Between 10.000 and 15.000							
Between 5.000 and 10.000							
Between 2.500 and 5.000							
Between 0 and 2.500							
TOTAL							
101/12							
7. Total Debtors balances	of the last 4 quarters						
As at last	Total Debtors Outstanding	As at las	t		Total Debtors	Outstanding	
31st March Year n-1		30 th Sept	ember Year n-1				
30 th June Year n-1		31 st Dece	31 st December Year n-1				
DSO = (average outstanding / ann	nual turnover) * 360				ı		
, , ,	<u> </u>						
8. Credit Management Pr	rocedures: Credit Limit As	sianme	nt				
o. Cican ivianagement	occadica. Cicali EliTili 7 la	3191 II 1 IC	1 11		_		
Is there a written Credit Procedure	Manual?			☐ No			
				Yes - S	Since:		
				Extern	nal credit repo	rts	
			Bank information Public Accounts debte				
Where do you get the information	for solvency analysis?						
				Directly from the debtor			
				U Other	S:		
				Months:			
How often do you update your and	alvsis and review Credit Limits?			Payment Incident			
new oner de you apadie your and	arysis aria review crean Entins:			Negative information received			
			Others:				
				□No			
Do you assign Credit Limits using an External Credit Limit Provider?			Yes - Since:		Pinoo:		
, 0					oii ice.		
Comments regarding your Credit N	Management (attach Credit Man	raement N	Manual):	Name:			
Comments regarding your cream r	vianagement (anaon orean man	agemenn	viariaary.				

9. Recovery actions						
Once a Due Date has not been honored:						
First contact for recovery	Days maximum after D Date:	oue			_	
Method of contact:	Telephone	Visit [Letter/emo	ail Others:		
Second contact for recovery	Days maximum after D Date:)ue				
Method of contact:	Telephone	Visit [Letter/emo	ail Others:		
Submission Legal actions / professional recovery	Days maximum after D Date:)ue				
Delivery Stop and Credit Limit cancellation	Days maximum after D Date:)ue				
	No					
Do you use a Recovery Agency and /or a Recovery professional?	Yes - Since:					
	Name:					
On average, how many collection/recovery	files do you submit per	year?				
Total amount of debt submitted a year on a	verage:					
Average success rate of Recovery Agency /	Recovery Professional:				%	
10. To be filled by the insurer						
				Credendo / Signature	e and Company Seal	
11. Attachments						
Latest annual report						
Recent ageing balance						
Excel list of losses and overdue accounts	(see 5)					
Credit management manual If you are credit insured, please provide	an Excel list of your c	ustomers wi	th credit limit	ts required, credit limit	s agreed and current	
outstanding.	an Execution of year ex	4010111010 W	orodii iiiiiii	io roquirou, oroun iiriii	o agreed and canoni	
12. Declaration						
The communication of customer names and						
they are reported at the beginning or after the start of the policy does not imply any cover on the specific customer. Condition of cover within this policy is only a credit limit granted by the Insured based on the solvency of the debtor and in application of the Credit Management Procedures						
which are part of the policy and as describe best of our knowledge, all information supp						
influence the acceptance of the risk.						
Company Name or Company Seal		Signature				
		Name:				
		Title:				
		Date:				