



**EXPORT INSURANCE AGENCY**

40 Front Street, Walpole, MA 02081

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**Application for Trade Receivable Insurance**

This application can be used for all multi-buyer credit insurance products. Please indicate in Question 6 the type of coverage for which you are applying and answer all questions that pertain to the requested coverage.

1.) Applicant's Name and Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Tel: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

2.) Primary Reason for Application (check appropriate box):

- Risk Mitigation \_\_\_\_\_
- Extend More Competitive Terms/Expansion of Sales \_\_\_\_\_
- Financing Name of Financing Bank \_\_\_\_\_
- Other (explain) \_\_\_\_\_

3.) Total Sales (last fiscal year) \$ \_\_\_\_\_ International Sales \$ \_\_\_\_\_

4.) Product Description: \_\_\_\_\_

5.) Selling Terms (e.g., net 90 days): \_\_\_\_\_

6.) Is coverage requested for domestic sales, international sales, or both? \_\_\_\_\_

*Please complete the remaining sections that pertain to the requested coverage.*

7.) Percent of Domestic Buyers

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 100%

% Manufacturers  
 % Wholesalers/Distributors/Dealers  
 % Retailers  
 % End Users  
 Total

Percent of International Buyers

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 100%

8.) Last Three Years' Sales:	20	\$ _____	20	\$ _____
	20	\$ _____	20	\$ _____
	20	\$ _____	20	\$ _____

9.) Credit Limit Projections by Buyer (projected for next twelve months):

Number of Domestic Buyers in Range	Credit Limit	Number of International Buyers in Range
_____	\$0 – 50,000	_____
_____	\$50,001 – 100,000	_____
_____	\$100,001 – 500,000	_____
_____	\$500,001 – 1,000,000	_____
_____	Over \$1,000,000	_____

## A. Domestic Sales Data

10.) Please list your five largest domestic buyers (based on high credit limits):

Buyer Name/City/ State	Last Twelve Months Shipment Volume	Next Twelve Months Projected Shipment Volume	Payment Terms	Projected Credit Limit Needed
	\$	\$		\$
	\$	\$		\$
	\$	\$		\$
	\$	\$		\$
	\$	\$		\$

11.) Total Domestic Receivables Outstanding as of: \_\_\_ / \_\_\_ / \_\_\_ \$\_\_\_\_\_

\$_____	\$_____	\$_____	\$_____	\$_____
Current	1-60 past due	61-120 past due	121-180 past due	over 180 past due

(Please attach an aging report and an explanation of any accounts over 60 days past due.)

12.) Have any domestic obligations been rescheduled during the last twelve months?

Yes  No  If yes, please provide details in a separate attachment.

13.) Domestic Losses over Last Three Years (give an explanation if over \$100,000 per loss):

Buyer	Amount	Explanation
20 _____	\$ _____	_____
20 _____	\$ _____	_____
20 _____	\$ _____	_____

## B. International Sales Data

14.) Please list your five largest international buyers (based on high credit limits):

Buyer Name/City/ State	Last Twelve Months Shipment Volume	Next Twelve Months Projected Shipment Volume	Payment Terms	Projected Credit Limit Needed
	\$	\$		\$
	\$	\$		\$
	\$	\$		\$
	\$	\$		\$
	\$	\$		\$

15.) Total International Receivables Outstanding as of: \_\_\_ / \_\_\_ / \_\_\_ \$\_\_\_\_\_

\$_____	\$_____	\$_____	\$_____	\$_____
Current	1-60 past due	61-120 past due	121-180 past due	over 180 past due

(Please attach an aging report and an explanation of any accounts over 60 days past due.)

16.) Have any international obligations been rescheduled during the last twelve months?

Yes  No  If yes, please provide details on a separate attachment.

17.) International Losses over Last Three Years (give an explanation if over \$100,000 per loss):

Buyer	Amount	Explanation
20__ _____	\$ _____	_____
20__ _____	\$ _____	_____
20__ _____	\$ _____	_____

18.) Is there a related company that should be added to this policy? \_\_\_\_\_

19.) Do you retain title to your products?  Yes  No

20.) Pre-delivery Coverage (optional):

• Are products customized?  Yes  No

• What is the time frame required to manufacture and ship the products?

• What is the salvage value of your products? \$ \_\_\_\_\_

*Please be advised that the information contained herein and/or attached hereto will be treated as confidential by EIA Global. Unless otherwise instructed by you, the referenced information will be shared with underwriters on a need-to-know basis.*

The applicant hereby appoints EIA Global as the broker of record for all matters pertaining to this application. Furthermore, the applicant certifies that the information set forth herein is true and correct to the best of your knowledge and beliefs.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

# International Sales Data

Country	Sales			Payment Terms			Most Recent Account Receivables Aging As of Date: _____			
	No. of Buyers	Last 12 Months	Projected Next 12 Months	Last 12 Months	Projected Next 12 Months	Country Limit Requested <small>*See #2 below</small>	Current	1-60 Days Overdue	61-120 Days Overdue	121+ Days Overdue
<i>Example: Brazil</i>	10	10mm	12mm	Net 90	Net 90	3mm	2mm			

- 1.) Please indicate range of payment terms.
- 2.) The country limit requested should represent the maximum anticipated INSURABLE outstandings over the next twelve months for the country named.
- 3.) Use additional pages if needed.