



# Renewal

### Important Notice

1. This is a proposal for a contract of insurance, in which 'Proposer' or 'you/your' means the individual, company, partnership, limited liability partnership, organisation or association proposing cover.
2. This proposal must be completed in ink, signed and dated. All questions must be answered to enable a quotation to be given but completion does not bind you or Underwriters to enter into any contract of insurance. If space is insufficient to answer any questions fully, please attach a signed continuation sheet. You should retain a copy of the completed proposal (and of any other supporting information) for future reference.
3. All facts material to the proposed insurance must be disclosed, fully and truthfully to the best of your knowledge and belief. Failure to do so may make the contract of insurance voidable or severely prejudice your rights in the event of a claim. A material fact is one likely to influence Underwriters' assessment or acceptance of the proposal; if you are uncertain what may be a material fact, you should consult your broker.
4. You are recommended to request a specimen copy of the proposed policy wording from your insurance broker and to consider carefully the terms, conditions, limitations and exclusions applicable to the cover.

**Policy Number:** \_\_\_\_\_

**Insured's name:** \_\_\_\_\_

**Insured's Registered Number:** \_\_\_\_\_

**1. With regard to the expiring policy period, please provide us with details of your estimated insurable turnover\* by country to the end of the current policy period:**

Country	Estimated Turnover	Maximum exposure at any one time	Number of customers	Terms of Payment

*Please continue on a separate sheet if necessary.*

2. With regard to the forthcoming policy period, please provide us with details of your estimated insurable turnover\* by country:

Country	Estimated Turnover	Maximum exposure at any one time	Number of customers	Terms of Payment

Please continue on a separate sheet if necessary.

\* Turnover figures to exclude the following: sales to any associated or subsidiary companies; government departments, public authorities or nationalised undertakings except where you require cover in respect of Public Buyer Default, sales taxes unless these are to be covered.

### 3. Current aged debt analysis

As at: \_\_\_\_\_

Currency: \_\_\_\_\_

Range	Value	% of Past Due resulting from Disputes
Current (not yet due)		
1-30 days overdue		
31-60 days overdue		
61-90 days overdue		
Over 90 days overdue		
Total		

**4. Accounts Receivable Profile**

As at: \_\_\_\_\_

Currency: \_\_\_\_\_

Please amend the debtor ranges if appropriate.

Range	Total debt outstanding	Number of Buyers	Range	Total debt outstanding	Number of Buyers
0 – 5,000			75,001 – 100,000		
5,001 – 10,000			100,001 – 250,000		
10,001 – 25,000			250,001 – 500,000		
25,001 – 50,000			500,001 – 1,000,000		
50,001 – 75,000			1,000,000 +		

**5. Please provide details of any Losses or potential Losses exceeding the Non Qualifying Loss Amount, which you have not notified to us in writing on an Markel International Claim Form.**

Buyer's Name & Country	Loss Amount (excluding tax)	Earliest Outstanding Invoice

6. Please provide a list of all accounts more than 60 days overdue, accounts giving cause for concern and/or where deliveries have been put on stop.

Name & Country	Gross Value	Original due date	Action taken

Please continue on a separate sheet if necessary.

7. Please provide details of Buyers with exposures in excess of the Discretionary Credit Limit or which are likely to exceed the Discretionary Credit Limit during the forthcoming Policy Period.

Buyer Name & Address	Credit Limit	Estimated Turnover

Please continue on a separate sheet if necessary.



## Proposal Form

The information provided in this Proposal will be treated in the strictest confidence and, if fully completed, will enable us to assess the risk and determine whether we can indicate terms.

## Declaration

I hereby declare that I am authorised to complete this proposal on behalf of the Proposer; and the statements and particulars in this proposal are true and complete; and no material facts have been misstated or suppressed; and I am not aware of any circumstances that I have not disclosed to you which might influence your assessment of the risk; and I undertake to inform Insurers of any material alteration or addition to these statements or particulars which occurs before any contract of insurance based on this proposal is effected; and I acknowledge that this proposal (together with any other information supplied to Insurers) shall be the basis of such contract.

Name of signatory: \_\_\_\_\_

Position in the company: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For and on behalf of: \_\_\_\_\_ (Proposer's Name)

## About Us

Markel International Limited is the London based subsidiary for the international operations of Markel Corporation and is one of the UK's leading specialist insurance companies. The company has developed its expertise through understanding and catering for niche markets. In each of these markets Markel aims to provide quality products and excellent customer service thereby establishing the Markel brand as a market leader.

The company operates in the UK through two commercial entities: Markel International Insurance Company Limited, its London based insurance company and Markel Syndicate 3000, its 100 per cent owned Lloyd's syndicate. In both of these business environments Markel International offers a wide range of products, with its considerable underwriting expertise organised around the following product lines: Marine & Energy, MGA, Specialty, Professional Liability and Retail.

For more details about our products, please visit our website at [www.markelintl.com](http://www.markelintl.com)

