



Specific Buyer/Financial Institution

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.

Proposer

Name: _____

Registered Number: _____

Address: _____

Post Code: _____

Website address: _____

Contact name: _____

Position: _____

Tel. No.: _____

E-mail: _____

Is cover required for any other group company? Yes No

If yes, please provide details: _____

Vendor

Name: _____

Registered Number: _____

Address: _____

Past Experience

How many years have you dealt with the Vendor? _____

Has your organisation experienced any bad debts in any dealing with this Vendor?

If yes, please provide details of largest individual losses:

Financial Year	Name of Buyer	Cause of Loss	Value	Recoveries

Buyer to be Insured:

Name: _____ Registered Number: _____

Address: _____ Post Code: _____

Website address: _____

Is cover required on any other company associated with the Buyer? Yes No

If yes, please provide details: _____

Contract Details

Credit Limit required: _____

Describe the nature of the financing contract that you are seeking to insure: _____

Please attach a copy of the Receivables Purchase Agreement (RPA) or equivalent: _____

What goods /services provided by the Vendor are subject of the RPA? _____

To which trade sector are they sold? _____

Is the business seasonal? If yes, please provide details: _____

Is the contract in respect of on-going business or a specific project?

Goods/services being supplied: _____

What is the expected volume of business to be financed over the next 12 month period?

Terms of payment/financing terms

(a) granted to the Buyer _____

(b) with the Vendor _____

Is the Vendor expected to trade in excess of the limit being financed? _____

What rights of recourse do you hold against the Vendor? _____

Can you instruct the Vendor to stop shipments?

Is the Vendor responsible for the collection process? _____

Do you acquire rights to the goods being supplied? _____

Reasons for seeking insurance _____

Other credit insurance policies, guarantees, securities

Do you hold any insurance policy, guarantee or security in connection with the credit risk on any of your vendor/buyer financing contracts? Yes No

If yes, what is it and when does it expire? _____

Do you enter into participation agreements? Yes No

If yes, please provide details: _____

Have you ever had an insurance policy cancelled or a renewal refused by an insurer? Yes No

If yes, please provide details: _____

Current aged debt analysis for the Buyer to be Insured

As at: _____

Currency: _____

Current (not yet due)	
1-30 days overdue	
31-60 days overdue	
61-90 days overdue	
Over 90 days overdue	
Total	

Financial Information

Please attach your internal credit assessment and any financial information that you have on file. This may include audited and/or management financial accounts, visit reports, credit agency reports and any additional background information on the Buyer.

Attached

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

