

\* All Credit Limit Requests must be in Policy Currency.

Date :

**CREDIT LIMIT REQUEST**

**Your Details** \_\_\_\_\_

Company name : \_\_\_\_\_

Credit Insurance contract number : \_\_\_\_\_

**Your Customer Details** \_\_\_\_\_

Buyer legal name : \_\_\_\_\_

Full Address : \_\_\_\_\_

Country : \_\_\_\_\_ Registration number : \_\_\_\_\_

Tel : \_\_\_\_\_ Fax : \_\_\_\_\_ email : \_\_\_\_\_

**Details on Credit Limit** \_\_\_\_\_

New Buyer  Existing Buyer  Reduction  Deletion

Coface buyer reference # : \_\_\_\_\_ / \_\_\_\_\_

Credit Limit requested : \_\_\_\_\_

Sales Projections (\* For Countries not covered): \_\_\_\_\_

Payment terms : Open account  D/A  D/P

Tenure : 30 days  60 days  90 days  120 days  150 days   
Others  (please specify \_\_\_\_\_)

Nature of goods or services : \_\_\_\_\_

Country of destination : \_\_\_\_\_

Securities held : None  Personal Guarantee  Mortgage  Letter or Credit

Does your sales contract has a Retention of Title clause : Yes  No

**Previous experience with this Customer** \_\_\_\_\_

Traded for \_\_\_\_\_ Years \_\_\_\_\_ Months

Maximum credit allowed \_\_\_\_\_

Present balance \_\_\_\_\_ Past D.S.O. \_\_\_\_\_(days)

**Our Contacts** \_\_\_\_\_

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