

# QBE TRADE CREDIT SINGLE ACCOUNT



## Proposal Form

### Please read the following information carefully

This document sets out the important information that you, or your insurance advisor on your behalf, have provided to us and we rely on it in assessing your insurance cover. It is very important that the information you provide is up-to-date and substantially correct; otherwise your insurance could be invalidated, a claim payment reduced or your claim refused.

### What you need to do next

Please:

- a) check that the information set out below is correct before signing and returning;
  - b) also read the Important Notes that explain how your information will be used;
- and
- c) inform any other persons who it is proposed should be covered under this insurance of the contents of this document including the Important Notes and Declaration, and obtain their consent to the processing of their personal information (including sensitive personal data) in this way.

If there is not enough space provided for you to give a complete answer, please enter the full details in Additional Information at the end of the document.

<b>1.</b>	<b>Your Company</b>
<b>1.1</b>	Please complete each statement and answer each question in full
	Company name(s) (correct legal entities) <input type="text"/>
	National ID <input type="text"/>
	Registered address <input type="text"/>
	Postcode <input type="text"/> Country <input type="text"/>
	Telephone <input type="text"/> Facsimile <input type="text"/>
	Email address <input type="text"/>
	Contact name <input type="text"/>
	Position <input type="text"/>
<b>2.</b>	<b>Nature of your business</b>
<b>2.1</b>	Describe your business activities
	<input type="text"/>
<b>2.2</b>	How long have you been trading in this sector? <input type="text"/>



4.	<b>Credit management procedures</b>
4.1	<p>What action will be taken if an account is overdue:</p> <p>Upon receipt of an order?</p> <div data-bbox="193 398 1481 495" style="border: 1px solid #ccc; height: 43px;"></div> <p>Prior to delivery/despatch of an order?</p> <div data-bbox="193 562 1481 658" style="border: 1px solid #ccc; height: 43px;"></div>
4.2	<p>How many days after due date do you contact your customer and by what means?</p> <div data-bbox="193 730 1481 826" style="border: 1px solid #ccc; height: 43px;"></div>
4.3	<p>At what point would you put an account on stop?</p> <div data-bbox="193 902 1481 999" style="border: 1px solid #ccc; height: 43px;"></div>
4.4	<p>If payment is not forthcoming what action do you take?</p> <div data-bbox="193 1072 1481 1169" style="border: 1px solid #ccc; height: 43px;"></div>
4.5	<p>Would you pass accounts to a third party for collection?      Yes <input data-bbox="1171 1193 1219 1238" type="checkbox"/>      No <input data-bbox="1437 1193 1485 1238" type="checkbox"/></p> <p>If yes, to whom?</p> <div data-bbox="193 1301 1481 1397" style="border: 1px solid #ccc; height: 43px;"></div>

<b>5.</b>	<b>Policies, guarantees and/or securities held or applied for</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>5.1</b>	<p>Do you at present hold, or are you currently negotiating, any policy of insurance or guarantee, factoring arrangement, invoice discounting arrangement or any security in connection with the credit risk on any of your customers?</p> <p>If yes, please provide full details</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>5.2</b>	<p><b>Policy of insurance</b></p> <p>With <div style="border: 1px solid black; width: 100%; height: 20px;"></div></p> <p>Policy number <div style="border: 1px solid black; width: 100%; height: 20px;"></div></p> <p>Expiry date <div style="border: 1px solid black; width: 100%; height: 20px;"></div></p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>5.3</b>	<p>Has the customer to which this proposal relates, any connection with you or any director of your company?</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>5.4</b>	<p>Has any insurer declined a proposal, refused renewal or terminated an insurance?</p> <p>If yes, please provide full details</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>5.5</b>	<p><b>Factoring arrangement or invoice discounting</b></p> <p>Please provide copy of agreement</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>5.6</b>	<p><b>Personal guarantees</b></p> <p>Please provide list</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>5.7</b>	<p><b>Is retention of title in your conditions of sale?</b></p> <p>Please provide copy</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>5.8</b>	<p><b>Other security</b></p> <p>Please provide list</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>6.</b>	<b>Additional Information</b>
	<p>Please use the space provided below for any additional information</p> <div style="border: 1px solid #ccc; height: 300px; width: 100%;"></div>
<b>7.</b>	<b>Your duty of fair presentation</b>
<b>7.1</b>	<p>The insured must make a fair presentation of the risk (as set out in the Insurance Act 2015 or successor or amending legislation) in proposing for, or proposing to vary, this insurance.</p> <p><b>Remedies for breach of the duty of fair presentation – proposing for this insurance</b></p> <p>If the insured or anyone acting on its behalf breaches the insured’s duty of fair presentation then the insurer’s remedies shall be as follows:</p> <ul style="list-style-type: none"> <li>a) if such breach is deliberate or reckless, the insurer may: <ul style="list-style-type: none"> <li>i) treat this policy as having been terminated from its inception; and</li> <li>ii) retain the premium;</li> </ul> </li> <li>b) if such breach is not deliberate or reckless and the insurer would not have entered into this policy but for the breach, the insurer may by notice to the insured treat this policy as having been terminated from its inception in which case the insurer shall return the premium; and</li> <li>c) in all other cases if, but for the said breach, the insurer would have entered into this policy but: <ul style="list-style-type: none"> <li>i) on different terms (other than terms relating to the premium), the insurer may require that this policy is treated as if it had been entered into on those different terms from the outset; or</li> <li>ii) would have charged a higher premium, the insurer may reduce proportionately the amount to be paid on a claim (and, if applicable, the amount already paid on prior claims). In those circumstances, the insurer shall pay only X% of what it would otherwise have been required to pay, where X = (premium actually charged/higher premium) x 100.</li> </ul> </li> </ul> <p><b>Material changes during the policy period</b></p> <p>The insured must notify the insurer within thirty (30) days of any material change to the insured, its business or the risks insured if indemnity under this insurance is sought in relation to any such change.</p> <p>The insurer shall not indemnify the insured for any liability arising out of a material change for which indemnity would otherwise have been available under this insurance unless the insurer has provided valid confirmation of cover, whether by an express term of this policy, endorsement, written confirmation or otherwise.</p>
<b>7.2</b>	<p><b>Co-insurance</b></p> <p><b>Under the terms of your policy, you will be your own insurer for:</b></p> <ul style="list-style-type: none"> <li>a) An agreed percentage of any loss you may suffer;</li> <li>b) So much of any indebtedness owing to you as exceeds the permitted limit; and</li> <li>c) Any deductibles applicable to your policy.</li> </ul>

<b>8.</b>	<b>Declaration</b>
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<b>8.1</b>	<p>I/we declare that this proposal contains every material circumstance of which I/we are aware following a reasonable search and that the information contained in this proposal (including all attachments, if applicable) is substantially correct.</p> <p>I/we undertake to inform the insurer of any material alteration to the information contained in this proposal as may be necessary to comply with my/our duty of fair presentation as set out in the Insurance Act 2015.</p> <p>If this proposal has been completed on my/our behalf, I/we agree the person is deemed to be my/our agent and not an agent for QBE Europe SA/NV and QBE UK Limited and that I/we have read the information provided before signing the form.</p> <p>I/we confirm that I/we have read and understood the above Declaration and the Important Notes overleaf.</p>
Company stamp or full name of company(s)	<input style="width: 100%; height: 40px;" type="text"/>
Signature	<input style="width: 100%; height: 40px;" type="text"/>
Date	<input style="width: 100%; height: 40px;" type="text"/>
Name of signatory	<input style="width: 100%; height: 40px;" type="text"/>
Position in company	<input style="width: 100%; height: 40px;" type="text"/>
Email	<input style="width: 100%; height: 40px;" type="text"/>

<b>9.</b>	<b>Broker/Agent</b>
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<b>9.1</b>	<p>Company name</p> <p>Address</p> <p>Contact name</p> <p>Email</p>
	<input style="width: 100%; height: 40px;" type="text"/>
	<input style="width: 100%; height: 40px;" type="text"/>
	<input style="width: 100%; height: 40px;" type="text"/>
	<input style="width: 100%; height: 40px;" type="text"/>

<b>10.</b>	<b>Important notes</b>
<b>10.1</b>	<p><b>Choice of contract law</b></p> <p>Unless it is agreed otherwise, the law that applies to this contract is the law of that part of the United Kingdom where your principal premises is located.</p> <p>In addition any legal proceedings between you and us in connection with this contract will only take place in the courts of that part of the United Kingdom where your principal premises is located and are subject to the exclusive jurisdiction of that court.</p>
<b>10.2</b>	<p><b>Compensation</b></p> <p>QBE is covered by the Financial Services Compensation Scheme (FSCS). This provides compensation in case any of its members are unable, in specified circumstances, to meet any valid claims under their policies. Compensation for non-compulsory insurance will be paid at 90% with no upper limit and at 100% if the insurance is legally compulsory with no upper limit. Compensation is only available to commercial customers in limited circumstances.</p> <p>Further information can be obtained from QBE at the address below, or from the Financial Services Compensation Scheme at the following address: Financial Services Compensation Scheme, PO Box 300, Mitcheldean, GL17 1DY; or from their website (<a href="http://www.fscs.org.uk/">www.fscs.org.uk/</a>)</p>
<b>10.3</b>	<p><b>Data Privacy Notice</b></p> <p>Any personal data provided to the insurer will be processed in compliance with all applicable laws and regulations and in accordance with the privacy notice which can be found at <a href="https://qbeeurope.com/privacy-policy/">https://qbeeurope.com/privacy-policy/</a>. Alternatively the insured may contact the insurer's Data Protection Officer to request a copy of the full privacy notice by email: <a href="mailto:dpo@uk.qbe.com">dpo@uk.qbe.com</a> or by writing to: the Data Protection Officer, QBE European Operations, Plantation Place, 30 Fenchurch Street, London EC3M 3BD.</p>
<b>10.4</b>	<p><b>Fraud Act 2006</b></p> <p>If you provide an answer/information which you know is untrue, or deliberately fail to provide information that we have requested (e.g. previous accidents) you may be committing a criminal offence.</p>
<b>10.5</b>	<p><b>Records</b></p> <p>The insurer may hold documents relating to this insurance and any claims under it in electronic form and may destroy the originals. It is hereby agreed that an electronic copy of any such document will be admissible in evidence to the same extent as, and carry the same weight as, the original.</p>
<b>10.6</b>	<p><b>The language applicable to the policy</b></p> <p>The language used in this policy and any communications relating to it will be English.</p>
<b>10.7</b>	<p><b>Your insurer</b></p> <p><b>QBE UK Limited</b> (registered in England number 01761561; Home State - United Kingdom. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority; registration number 202842)</p> <p><b>QBE Europe SA/NV</b> QBE Europe SA/NV Limited is a public limited liability company (VAT BE 0690.537456) and is Authorised by the National Bank of Belgium (NBB) (de Berlaimontlaan 14 Boulevard de Berlaimont, 1000 Brussels, Belgium) under licence number 3093.</p>
<b>10.8</b>	<p><b>Your insurer's Head Office</b></p> <p>QBE UK Limited, Plantation Place, 30 Fenchurch Street, London, EC3M 3BD Tel: +44 (0) 20 7105 4000 Fax: +44 (0) 20 7105 4019</p> <p>QBE Europe SA/NV , Regentlaan 37 Boulevard du Régent, 1000 Brussels Tel: +32 2 504 82 11 Fax: +32 2 504 82 00</p>



### **QBE European Operations**

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