

COFACE NORTH AMERICA INSURANCE COMPANY

GLOBALLIANCE POLICY

Trade Credit Insurance

GA1-App.01

With _____ (hereinafter called the "Company"),
 _____ (also referred to as "we", "our" or "us") hereby makes application to the
 Company for a Policy of Credit Insurance in the amount of \$ _____. Said policy, if issued, is to be on the
 _____ form, the terms and conditions whereof are agreed by us.

We herewith tender our **application fee** of \$ _____. Such fee is only refundable if no policy is issued.
 In addition, we herewith tender our check for \$ _____ to the order of said Company as a premium
 payment, but the check shall be returned to us if no policy is issued. We hereby agree:

- (A) That the policy term shall be for the period of one year, beginning _____, 20____ and
 ending _____, 20____;
- (B) That the primary loss shall be calculated on sales made during said year, but not less than
 \$ _____ at the rate of _____ percent; the said minimum primary loss to be not less
 than \$ _____;
- (C) That no loss shall be covered by said policy that arises from any account sold on terms longer than
 _____ days, including dating.
- (D) That the rating of _____ mercantile agency shall govern coverage on shipments on
 said policy.

We warrant and represent that our answers to the following questions are true.

- 1) What is your line of business? **Domestic:** _____ **Export:** _____
- 2) How long in this line of business? _____
- 3) Have you kept books of account throughout that period? Yes No
- 4) Are you: Jobbers or Manufacturers?
- 5) What line of merchandise constitutes the largest volume of business? **Domestic:** _____
Export: _____
- 6) To what line of trade is the greater part of your sales made? **Domestic:** _____
Export: _____
- 7) To what territory do you make your principal shipments? **Domestic:** _____
Export: _____
- 8) What are your terms of sale? Open account _____% Letter of Credit _____% Other _____%
- 9) For open account sales, what are your regular terms of sale:
Domestic: _____ percent _____ days, net _____ days
Export: _____ percent _____ days, net _____ days
- 10) What are your longest terms of sale, including dating? **Domestic:** _____ **Export:** _____
- 11) About what percentage of sales to Manufacturers? _____ Jobbers? _____, Retailers? _____

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- 12) Have you any information detrimental to the credit or responsibility of any individual, firm, co-partnership or corporation to which you have made or contemplate making any sale or shipment, to said policy, if issued, will apply? Yes or No If yes, state particulars _____
- 13) Have you within the past year, or do you contemplate making any change in your terms of sale, in the articles or commodities dealt in, in the territory mentioned above, in the proportion of sales to manufacturers, jobbers or retailers, or in the manner of conducting your business? Yes or No. If the answer is Yes, state particulars _____
- 14) Have you any agreement to ship, or have you shipped, any merchandise at a price higher than its current market price to which shipments said policy, if issued, will apply? Yes or No
If the answer is yes, state particulars _____
- 15) How many accounts did you place with attorneys or collection agencies for collection during the past year?

- 16) What was the average amount of such accounts? _____
- 17) Have you ever carried credit insurance? Yes or No If so, state with what company and when the latest policy expired or expires _____
- 18) How many active customer accounts are dealt with? **Domestic** (a) _____ What is the amount of your present outstandings? (b) _____ How much of same is now past due under original terms of sale? c) _____ **Export:** (a) _____ (b) _____ (c) _____

As a basis for the policy hereby applied for, and for any Policy of Credit Insurance which may hereafter be issued to us, we warrant the following statement of our sales, losses and amounts owing by debtors under or seeking general extension to be correct and represent the combined experience of our company and that of all entities to be insured under this Policy.

Maximum amount outstanding at any one time by buyer on export sales for the last twelve months:

DOMESTIC SHIPMENTS		EXPORT SHIPMENTS	
Maximum Outstanding by Buyer (Last 12 Months)	Number of buyers in range	Maximum Outstanding by Buyer (Last 12 Months)	Number of buyers in range
\$0-25,000		\$0-25,000	
\$25,001-50,000		\$25,001-50,000	
\$50,001-75,000		\$50,001-75,000	
\$75,001-100,000		\$75,001-100,000	
\$100,001-300,000		\$100,001-300,000	
\$300,001-500,000		\$300,001-500,000	
\$500,001-1,000,000		\$500,001-1,000,000	
Over \$1,000,000		Over \$1,000,000	

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Domestic Sales and Loss Experience:

Term- During the year ending:	Gross sales in the United States, Territories thereof and Canada less allowances and returns	All losses due to insolvency of debtors (after deducting any cash and merchandise recovered from such debtors):
_____ 20 _____	\$ _____	\$ _____
_____ 20 _____	\$ _____	\$ _____
_____ 20 _____	\$ _____	\$ _____
During the fractional year to date _____ 20 _____	\$ _____	\$ _____

Amount owing at date of application by debtors under or seeking general extensions: \$ _____

Export Sales and Loss Experience:

Term- During the year ending:	Gross export sales outside the United States, Territories thereof and Canada, less allowances and returns	Gross export sales sold on open account outside the United States, Territories thereof and Canada, less allowances and returns	All losses due to insolvency of foreign debtors (after deducting any cash and merchandise recovered from such Debtors):
_____ 20 _____	\$ _____	\$ _____	\$ _____
_____ 20 _____	\$ _____	\$ _____	\$ _____
_____ 20 _____	\$ _____	\$ _____	\$ _____
During the fractional year to date _____ 20 _____	\$ _____	\$ _____	\$ _____

Amount owing at date of Application, by debtors under or seeking general extensions: \$ _____

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A POLICY CANNOT BE ISSUED UNLESS THE APPLICATION IS PROPERLY SIGNED AND DATED

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties, including but not limited to fines, denial of insurance benefits, civil damages, criminal prosecution and confinement in state prisons.

Applicable in Colorado: Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies."

This application and said policy, if issued, shall, with the terms and conditions therein, constitute the entire agreement between the undersigned and the Company; any verbal or written statement, promise or agreement, by any agent of the said Company, or notice to or knowledge of such agent or any other person, to the contrary notwithstanding. It is also agreed that this application, whether as respects anything contained therein or omitted therefrom has been made, prepared, and written by the applicant or by his own proper agent.

If corporation, so state; if firm or co-partnership, give the names of the members; if "style name" used, so state.

Dated at: _____
this _____ day of _____ 20____

Signature of applicant _____

By _____

Address _____