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Renewal Form

Your Company Details

Company Name

Contact Name

Position

Telephone

Policy Number

Company ID Number

E-mail

Turnover

Please provide your insurable turnover in the currency of the policy from the policy inception date to the present and your estimate for the whole policy period.

Insurable Turnover year to date

Estimated Insurable Turnover for full policy year

Please confirm your Estimated Insurable Turnover for the next 12 months:

Country

Sales

Number of Customers

Totals

Totals

Bank Details

Please supply details of the account to which any debit / credit of premium should be made:

Name(s) of Account Holder(s)

Bank/Building Society account number

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Branch Sort Code

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Trading Losses

Are there any details of trading losses relating to the current policy period which you have not previously notified us about in writing?

Yes No

If yes, please provide details:

Name of Debtor

Amount of Loss

Debtor Profile

	Number of debtors	Total amount		Number of debtors	Total amount
Up to 500			25,001-50,000		
501-1,000			50,001-100,000		
1,001-2,500			100,001-250,000		
2,501-5,000			250,001-500,000		
5,001-10,000			500,001-1,000,000		
10,001-25,000			Over 1,000,000		
			Total:		

Overdue Accounts

Do you have details of any customers whose balances are seriously overdue or giving cause for concern, which you have not previously notified us about?

Yes No

If yes, please provide details:

Name of customer	Balance outstanding	Due date of earliest invoice
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Salvage

Have you received any recoveries by way of dividends or other amounts in respect of debts where we have paid a claim?

Yes No

If yes, please provide details:

Name of Debtor	Amount Received
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Binding Contracts

Do you enter into any Binding Contracts? If so, what is the maximum period of these contracts? If yes, please provide details

Yes No

Terms of Payment

Have you agreed any terms of payment with your customers that are different to those stated on your proposal form or reflected within your current policy?

Yes No

If yes, please provide details:

Name of customer	Agreed terms	Average size debt
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Statement of Credit Control

Have there been any changes to your credit control procedures from those described in your proposal form or reflected within your current policy?

Yes No

If yes, please complete Appendix 1.

Authorised Signature

Position

Name

Date

Broker / Intermediary

Company

Branch

Contact

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Declaration

We declare that to the best of our knowledge and belief the answers in the original proposal form are still correct and there have been no material changes other than those documented here and that the above statements and all other information given to the insurers, are true and complete and that we have not withheld any material fact or circumstance.

Your Personal Data

In this notice “we”, “us” and “our” means Nexus CIFS Limited. We are the data controller in respect of any personal data we collect, hold and use about you.

We collect your personal data directly from you, but we may also collect it from brokers and other intermediaries who provide information to us for the purpose of providing your policy of insurance.

We will mainly use your data for the purpose of providing and administering this policy of insurance and claims you make under it. If you decline to provide your data when requested, or you give us false or inaccurate data, we may be unable to process your enquiry, and this could give us the right to void coverage or could impact your ability to claim under your policy.

In some circumstances, we may need to collect and use particularly sensitive data, such as data about your health or ethnicity. Where this is required, we will usually seek your consent to use that data. You can withhold or withdraw your consent at any time by contacting us, but if you do, we may be unable to process your enquiry or claim or continue to provide coverage.

We will exchange data about you with other parties in order to provide our services and administer this policy and any claims. This may include insurers, claims handlers and loss adjusters and providers of emergency medical services. In some cases, this may involve a transfer of data outside the UK and the European Economic Area (“EEA”) to countries that have less robust data protection laws. Any such transfer will be made in accordance with data protection laws. We will not use your data or pass it to any other party for marketing products or services to you unless you have given your consent.

Our full privacy notice explains how we use your data in more detail. Our privacy notice also explains the rights you have in respect of your data, including the right to request a copy of the personal data we hold about you. A copy of our full privacy notice is available on our website at www.nexusunderwriting.com, or can be provided on request by contacting us at: Data Protection Manager, 52-56 Leadenhall Street, London, EC3A 2EB, or by emailing us at compliance@nexusunderwriting.com. If you are not satisfied with the way we have managed your personal data, you may complain to the Information Commissioners Office (ICO) at www.ico.org.uk/concerns.

“Note, if you elect to pay for your insurance in instalments, we will transfer your details to a third party who will manage instalment payments on our behalf.”

Appendix 1

Statement of Credit Control

a. Your Credit Control Department

Is your credit control system computerised?

Is your department centrally located? If so, where?

How many people does your department employ?

b. Who has the day-to-day responsibility for credit management?

Name

Position

To whom do they report?

c. How do you investigate your customers' credit-worthiness before a debt is incurred?

Status Reports	Yes	No
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If yes, which credit reference agencies?

Bank Reports	Yes	No
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Trade References	Yes	No
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Other Sources	Yes	No
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Details – Above what level?

d. Is the status of the account checked before:

New orders are accepted?	Yes	No
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Further supplies are made?	Yes	No
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If no, why not and when are they vetted?

Do you visit your customers regularly?	Yes	No
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If yes, please detail process

e. Debt Collection Process

How soon after delivery/supply are invoices raised?

Do you raise invoices for each amount due? Yes No
 (If not how are debts evidenced?)

When are invoices sent out?

Are statements prepared? Yes No
 If so, how often are they rendered?

Do you use a debt collection company/solicitor? Yes No
 If yes, who?

What action is taken to chase overdue customers and at what point beyond due date? (Please complete chart below)

	Number of Days Beyond Due Date	Details
Telephone		
Letter		
Stop Deliveries		
Legal Action		
Collection Agents		