

ANALYSIS SHEET DEBT MANAGEMENT / PRELIMINARY DECLARATION OF COFACE

STRICTLY CONFIDENTIAL!

Company (full company name and address, registered head office):

Homepage: _____

Taxpayer-ID: _____ VAT-ID: _____

(obligatory entry)

Contact person: _____ Phone: _____

E-mail: _____ Fax: _____

Company's bank(s):

Term of business year: from: _____ until: _____

I. Business sector and production and delivery program (with percentage of turnover):

2.a Customer structure – to which business sectors do our customers belong (with percentage of turnover):

2.b Our customers are:¹⁾

- Traders General importers Manufacturers

3. Associated companies with external sales (shareholding in per cent):

(Please enter "Y" in the last column if you wish product proposals for this company also; in this case please add a separate analysis sheet per company).

Company	Country	City	Share	Type of participation	PP

4. Currency:¹⁾ a) All following statements in: € incl. VAT excl. VAT
b) Preferred contractual currency: € incl. VAT excl. VAT

5.a External sales (without sales within the group) of the current and the 3 past business years:²⁾

Year \ Turnover	Total		Thereof share in %:							
	Domestic	Export	Public buyers		Private individuals		Cash/adv. paym.		L/C	
			Dom.	Exp.	Dom.	Exp.	Dom.	Exp.	Dom.	Exp.
Expectation current year										
Previous year										
Previous year /.1										
Previous year /.2										

5.b Breakdown of the insurable external sales and the corresponding balances of the past business year by countries:

Country	Turnover ²⁾	Average balance ²⁾ incl. bills of exchange	Number of customers	Terms of payment
Sweden				
OECD countries (how many countries? _____)				
Other countries (please list in enclosure)				
Total (5.b plus enclosure)				

Enclosure with a breakdown of further countries is attached:¹⁾ Yes No

¹⁾ Please tick appropriate box

²⁾ In thousand of the currency mentioned under No. 4.a)

6. Breakdown of the insurable balances:

Balance margin ²⁾	Total balance ²⁾		Number of customers		Turnover ²⁾ of these customers	
	Domestic	Export	Domestic	Export	Domestic	Export
from 0 to						
from to						
from to						
from to						
from to						

7. Invoicing period after goods are supplied/services are rendered:

usually: _____ days, "drop shipment": _____ days,

unit billing: _____

others: _____

Receivables not yet invoiced:²⁾

Ø-Total _____ p.m.

8. Collection of accounts receivable by:¹⁾

Direct debiting (without time limit for contradiction), share of turnover _____ %

9. Our customers use the following credit periods:

	%	Up to days	%	Up to days	%	Up to days	Stating the value date		Share of paym. by bill of exchange	
							%	up to days	%	Ø bill exposure ²⁾
Domestic										
Export										

10. Stock on commission/consignment stock? Number _____ Ø-value of stock²⁾ _____

11.a We check the credit standing of our customers according to the following principles/methods:

11.b We check our customer's credit standing at the following intervals:

¹⁾ Please tick appropriate box

²⁾ In thousand of the currency mentioned under No. 4.a)

³⁾ Details in No. 12

⁴⁾ Before possible indemnification payments

12. Bad debt losses – Analysis of the current and the 3 past business years:

Year	Number of insolvencies		Countries concerned	Receivables at the suspension of payment ²⁾		Final loss ^{2), 4)}		Thereof largest individual losses ^{2), 3), 4)}	
	Dom.	Exp.		Dom.	Exp.	Dom.	Exp.	Dom.	Exp.
Current year									
Prev. year									
Prev. year /. 1									
Prev. year /. 2									

13. The five major losses of accounts receivable during the current and the 3 past business years:

Year	Country	Debtor	Receivables at the suspension of payments ²⁾	Final loss ^{2), 4)}

14. Imminent losses of receivables: Number and total amount²⁾; details for larger cases:

15. Are there returned cheques, returned bills of exchange, returned debit notes, default summons or anything similar?

16.a Description of the inhouse default action/debt collection:

Reminder	As from due date plus	Measures ¹⁾
1st reminder	_____ days	Delivery suspended: <input type="checkbox"/> Yes! <input type="checkbox"/> No, further deliveries: <input type="checkbox"/> on credit <input type="checkbox"/> cash only Others: _____
2nd reminder	_____ days	Delivery suspended: <input type="checkbox"/> Yes! <input type="checkbox"/> No, further deliveries: <input type="checkbox"/> on credit <input type="checkbox"/> cash only Others: _____
3rd reminder	_____ days	Delivery suspended: <input type="checkbox"/> Yes! <input type="checkbox"/> No, further deliveries: <input type="checkbox"/> on credit <input type="checkbox"/> cash only Others: _____
Last reminder	_____ days	Delivery suspended: <input type="checkbox"/> Yes! <input type="checkbox"/> No, further deliveries: <input type="checkbox"/> on credit <input type="checkbox"/> cash only Others: _____

16.b We take the following steps _____ days after the 1st 2nd 3rd last reminder:¹⁾

- Lawyer Debt collection agency (see no. 28)
- Court order to pay Receivable is written off
- Others: _____

¹⁾ Please tick appropriate box

²⁾ In thousand of the currency mentioned under No. 4.a)

⁴⁾ Before possible indemnification payments

16.c Amount of the average accounts receivables claimed by debt collection proceedings:

Ø:²⁾ _____ No. of cases per year: _____
thereof: _____ % companies, _____ % private individuals, _____ % public sector

16.d Do you charge default interests?¹⁾ Yes No

If "Yes": Are they collected in addition to the principal debt? Yes No

17. Number of legal collection procedures (per year): _____

18. Number of legally established debts (per year):

Total, domestic: _____ Total, export: _____

19. Defence to actions for breach of warranty of quality or title/disputed debts:¹⁾

Yes No

If "Yes": share: _____ %

Treatment: _____

20. Do / did you have contracts for credit management?¹⁾

No, none of the following **Yes**, as stated below:

Credit insurance	with _____, since _____, until _____, terminated by _____ scope: _____
Factoring contract	with _____, since _____, until _____, terminated by _____ scope: _____
Debt collection contract	with _____, since _____, until _____, terminated by _____ type and scope: _____
Other risk covering or similar contracts	with _____, since _____, until _____, terminated by _____ type and scope: _____

We received a copy of this analysis sheet.

Our General Terms of Business, Delivery, Payment are attached:¹⁾ Yes No

A list of our customers (name/address) and the outstanding balances is attached:¹⁾ Yes No

Available data as well as all other data submitted during the preliminary negotiations or during the business relationship shall provide the basis for product offers within Coface* and the basis for the business relationship.

The same applies to the following appendices:¹⁾

- Additional information provided on financing
- Additional information provided on credit management
- Additional information provided on Credit Instalment Insurance

¹⁾ Please tick appropriate box

Upon conclusion of a contract, this analysis sheet shall become an integral part of the relevant contract.

We assure that the stated data are correct. We agree that such data are transmitted to the necessary extent within Coface* for the purpose of internal examination and decision with respect to the issuing of an offer as well as to reinsurers and other insurers for the purpose of risk assessment or – if any – claims and settlement of reinsurance. We further agree that such data may also be used for the purpose of assessing the credit standing of our company, the result of which will also be available to third parties. Coface* shall use our data only for the purpose of informing us on interesting offers and services. We are entitled to object to our data being used for advertising purposes by notifying Coface* accordingly.

Place/Date

Company stamp and signature

Please send the completed Analysis sheet to: Coface Sverige, branch office of Coface Kreditversicherung AG, Germany, Kungsgatan 33, 11156 Stockholm, Sweden or by fax to: +46 (0) 8 534 81 529

Please visit our website: www.coface.se

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