|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Explanatory Notes** | **About this application form:**  By submitting this form you are applying to Atradius Dutch state Business (Atradius) for insurance. We will send you an acknowledgement of receipt upon receiving your application.  An incomplete application form or the failure to provide relevant financial information may cause delays in the processing of the application. | Provision of incorrect or incomplete information or failure, prior to the conclusion of the insurance agreement, to provide facts or information of which you were aware at the time, or ought to have understood were or might be relevant for the assessment of (i) the risk to be insured, (ii) the social and environmental impacts or possible impacts related to the execution of the Export Contract or | | (iii) the risk of bribery, may result in, inter alia, the loss of the right to indemnity under the insurance agreement or to its termination.  **If you have any questions** **please refer to:**  [atradiusdutchstatebusiness.nl/en](https://atradiusdutchstatebusiness.nl/en/) or call 020-553 2693. | |
|  |  | | | | |
| Company details as registered with the KVK Netherlands Chamber of Commerce  e. The ultimate beneficial owner (UBO) of a legal entity is the natural person who holds directly or indirectly more than 25 percent of the capital of the legal entity, or more than 25 percent of the voting rights at a general shareholders’ meeting.  You can also use [this](https://atradius.nl/documents/ubo-form.pdf) form for this purpose.  i. This application form is for insurance for either export financing in the form of a buyer credit or for exporter working capital financing. If you require insurance for both of these, please complete a separate application form for each. | 1. Applicant | | | | |
| 1. Applicant | |  | | |
|  | | name of company | | |
|  | |  | | |
|  | | company registration number with Chamber of Commerce | | |
| 1. Address | |  | | |
|  | | street | | |
|  | |  |  | |
|  | | postal Code | location | |
| 1. Postal Address | |  | | |
|  | | post Office Box number | | |
|  | |  |  | |
|  | | postal Code | location | |
| 1. Company | |  | | |
|  | | name of parent company (if any) | | |
| 1. Who is the ultimate beneficial owner (UBO) | |  | |  |
|  | | full name | | date of birth |
| 1. Website | |  | | |
|  | | website url | | |
| 1. Bank details | |  | | |
|  | | IBAN | | |
| 1. Name of contact | |  | | |
|  | | name | | |
|  | |  | | |
|  | | telephone number | | |
|  | |  | | |
|  | | e-mail address | | |
| 1. Would you like to apply for export financing or working capital insurance? | |  | |  |
|  | | working capital financing insurance | | export credit insurance  (continue to 2) |
| If this application is for working capital financing insurance, do you wish to pay the premium in advance or by pro rata instalments on each working capital financing interest payment date? | |  | |  |
|  | | in advance | | by instalments |
| Please state the maximum amount for the working capital financing, if known at this stage. | |  | | |
|  | | currency and amount | | |

Version Dec 2022

|  |  |  |  |
| --- | --- | --- | --- |
| **Explanatory Notes**  a. Name of company as registered with the commercial, trade or company register.  b. The ultimate beneficial owner (UBO) of a legal entity is the natural person who holds directly or indirectly more than 25 percent of the capital of the legal entity, or more than 25 percent of the voting rights at a general shareholders’ meeting.  You can also use [this](https://atradius.nl/documents/ubo-form.pdf) form for this purpose.  e. These questions also pertain to any transactions and payment experience of any companies belonging to your group with this buyer, as well as any transactions and payment experience of your company with any affiliates of the buyer.  f. If complete annual financial statements are not available for the two prior years, please contact Atradius before proceeding. | 1. Buyer | | |
| 1. Buyer |  | |
|  | name of buyer | |
| 1. Is the buyer a local, regional or central government? |  | |
|  | yes no | |
| If not, does the buyer have a parent company? |  | |
|  | name of parent company | |
| Who is the ultimate beneficial owner (UBO)? |  |  |
|  | name | date of birth |
| 1. Address |  | |
|  | street | |
|  |  |  |
|  | postal code | location |
|  |  | |
|  | country | |
| 1. Contact details |  | |
|  | telephone number | |
|  |  | |
|  | e-mail address | |
|  |  | |
|  | website url | |
| 1. Have you concluded any transactions with this buyer previously? |  | |
|  | yes no (continue to f) | |
| If so, were all payments received when due? |  |  |
|  | yes no | if not, please explain |
| 1. Have you enclosed a copy of the buyer’s and any guarantor’s two most recent annual financial statements? |  | |
|  | yes no | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Explanatory Notes**  For insurance applications for export financing, we require information about the relevant transaction. We therefore require the exporter to submit a pro-forma insurance application for the export of capital goods or the contractor to submit an application for construction works. | 1. Export contract | | |
| 1. To which export transaction does this loan agreement apply? |  |  |
|  | name of exporter | description of transaction |
| 1. Please state the export transaction contract price. |  | |
|  | currency and amount | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Explanatory Notes**  c. You may attach a spreadsheet with the definite or preliminary loan disbursement and repayment schedule to this application form.  g. Commitment fee and/or other fees can be included in the loan amount and are therefore co-insured. If these are charged separately, you can choose to have them co-insured.  i. The insurance agreement will cover late-payment interest only if such interest has been agreed in the contract.  j. If you are providing any other loans for this transaction we would like to know for which percentage of the contract price or contracting sum. | 1. Loan agreement | | | |
| 1. Has the loan agreement with debtor entered into force? |  |  | |
|  | yes no | if so, please state date | |
| 1. Please state the size of the loan in relation to the export contract price or total contracting sum. | *%* | | |
|  | % of export contract price | | |
| 1. Please state the amounts of the loan disbursements and at which point in time they are to be made. |  | *%* | |
|  | *%* | |
|  | *%* | |
|  | point in time | % of loan amount | |
| 1. Will the loan proceeds to be paid directly to the exporter? |  |  | |
|  | yes no | if not, to whom? | |
| 1. Please state the interest rate on the loan. |  | | |
|  | interest rate | | |
| 1. Will interest accruing during the loan disbursement period be financed as well? |  | | |
|  | yes no | | |
| 1. Will you be charging borrower a commitment fee and/or other fees? |  | | |
|  | yes no (continue to h) | | |
| If so, are the commitment fee and/or other fees to be financed as well? |  |  | |
|  | yes no | (if so, continue to h) | |
| If not, do you wish to insure these fees? |  |  | *months* |
|  | yes no | if so, please state amount | credit period |
| 1. Is the credit insurance premium to be financed as well? |  | | |
|  | yes no | | |
| 1. Will you be charging the borrower late payment interest if it is in arrears? |  |  | |
|  | yes no | if so, % per annum | |
| 1. Will you be providing any loans for this transaction other than the one for which you are herewith applying for insurance? |  |  | |
|  | yes no | if so, for which part | |
| 1. Do you wish to transfer the uninsured portion of the financing (deductible) to another party? |  |  |  |
|  | yes no | if so, for which part | name party |
| 1. In how many instalments and at which points in time is the loan to be repaid? |  |  | |
|  |  | |
|  |  | |
|  |  | |
|  |  | |
|  | amount or % | moment of payment | |
| 1. In which currency and which country is the loan to be repaid? |  |  | |
|  | currency | country | |
| 1. When will interest be due? |  | | |
|  | points in time interest will be due | | |
| 1. Other details |  | | |
|  | explanatory note | | |

|  |  |  |
| --- | --- | --- |
| **Explanatory Notes**  If the transaction has been underwritten subject to the condition that satisfactory security must be provided (letter of credit, guarantee, etc.), the insurance agreement will stipulate this as a condition for indemnification. | 1. Security |  |
| 1. Does your contract stipulate that you are to receive payment guarantees? |  |
|  | yes no (continue to 6) |
| 1. Which types of security are to be provided? |  |
|  | please state type of security, e.g. guarantee letter of credit, mortgage |
| Please state the value of the security to be provided as an amount or as a percentage of the contract price. |  |
|  | amount or % |
| When is the security to be provided? |  |
|  | time of issue |
| Name of company and address of all entities which are to provide security. |  |
|  | name of company and address |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Explanatory Notes**  For more information please refer to these websites: [Export Credit Guarantee](https://atradiusdutchstatebusiness.nl/en/products/export-credit-guarantee.html) and [CIRR](https://atradiusdutchstatebusiness.nl/en/products/cirr-finance.html).  a. Questions pertaining to the ECG and CIRRare irrelevant for applications for working capital finance cover.  You may submit an application for an ECG or for CIRR financing up to three months after the loan agreement for the export transaction has entered into force. In case you may wish to do so, you can save this application form as a digital document, and if desired, complete this section later, sign it anew and submit it to us.  If you are acting as agent for a syndicate of banks and you wish to apply for an ECG or CIRR financing for your own bank, please complete the rest of this section. If any of the other banks participating in the syndicate wish to apply for an ECG or for CIRR financing, they must submit a separate application form for the amount of their participation in the syndicate.  d. Irrespective of the type of refinancing, you will remain the Insured under the Insurance Agreement. An ECG may be issued for refinancing through the following means:  - your **transfer** of the export loan to the investor refinancing it  - your conclusion of a separate export loan **refinancing** agreement with an investor  - German **mortgage bonds (Pfandbrief**): the export loan is refinanced in the German bond market through a specific type of mortgage bond known as a Pfandbrief  - your transfer of the export loan to a special purpose vehicle (SPV) for which you have provided a guarantee.  The SPV will then raise the required funding by issuing **bonds.** | 1. Export Credit Guarantee and CIRR | | | | | | |
| 1. Do you or one of the syndicate banks wish to apply for an export credit guarantee (ECG) or for CIRR financing? |  | |  | |  | |
|  | yes, as applicant | | yes, as bank in a syndicate (continue to 7) | | no (continue to 7) | |
| 1. Please state the amount you wish to apply for and whether this is for an ECG or CIRR financing. |  | | or | | | |
|  | amount | | ECG CIRR (continue to 7) | | | |
| 1. Please state the name of the investor and proposed beneficiary of the ECG. |  | | | | | |
|  | name of company | | | | | |
|  |  | | | | | |
|  | company registration number with Chamber of Commerce | | | | | |
| Address: |  | | | | | |
|  | street | | | | | |
|  |  | |  | | | |
|  | postal code | | location | | | |
| Bank details: |  | | | | | |
|  | IBAN | | | | | |
| Name of contact: |  | | | | | |
|  | name | | | | | |
|  |  | | | | | |
|  | telephone number | | | | | |
|  |  | | | | | |
|  | e-mail address | | | | | |
| 1. For which type of refinancing do you require an ECG? |  |  | |  | |  |
|  | loan transfer | refinancing | | mortgage bonds (German pfandbrief) | | bonds |
| 1. Other details: |  | | | | | |
|  | explanatory note | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Explanatory notes**  a- g. The Dutch state does not want to be associated at any time, in any way or under any circumstances with any transactions involving bribery. This includes bribery of domestic public officials or foreign public officials as well as of private individuals. The term bribery is to be understood in its broadest sense. A few examples are:  - offering or making payment, in any form;  - making any promise;  - providing or offering any service;  - offering or providing any benefit, regardless of its nature (including immaterial benefits and benefits in kind);  whether or not subject to the fulfilment of a certain condition or conditions, whereby the payment, gift, promise, service or benefit could be perceived as an occurrence of bribery or attempted bribery at that time or in the future, or, could even be perceived as being used to gain or attempt to gain, in an improper manner, a competitive advantage, a better negotiating position, more advantageous contract conditions or any other advantage.  You must also include in your reply any form of bribery which has not been explicitly stated or any suspicion of such a form of bribery. You should be aware that the question also applies to bribery (in the broadest sense) committed by parties other than the applicant or your buyer. In any affirmative reply you must clarify the situation such that the Dutch state will be able to properly consider whether or not to enter into the insurance agreement.  Please note that bribery as per Articles 177, 178, 178a and 328ter of the Criminal Code of the Netherlands is expressly prohibited. Public officials means people in or formerly in the public service of a state, a foreign state or a public international organisation.  If there is any suspicion of bribery, the Dutch state is obliged to report this to the relevant Dutch investigative authorities pursuant to Article 162 of the Criminal Code of the Netherlands and to section I of [Recommendation of the Council on bribery and officially supported export credits](http://www.oecd.org/tad/xcred/oecd-recommendation-on-bribery-and-export-credits-14-december-2006.htm). Also [Convention on Combating Bribery of Foreign Public Officials](http://www.oecd.org/corruption/oecdantibriberyconvention.htm) has been drawn up.  By virtue of the Recommendation and the anti-bribery policy of the Dutch export credit insurance facility, Atradius Dutch state Business is bound to request the type of information asked for in Questions 10 a-g and, if any of these questions is answered in the affirmative, undertake an investigation.  In these questions, “you” explicitly includes any legal entities related to this company. | 1. Corporate Social Responsibility: bribery | | |
| 1. Are you or any party acting on your behalf aware of, or involved in the bribery of any public officials or any foreign public officials as per Articles177, 178 or 178a of the Criminal Code of the Netherlands or of private individuals as per Article 328ter of the Criminal Code of the Netherlands? |  |  |
|  | yes no | if so, please explain |
| 1. During the five years prior to this application for insurance, have you, or any party acting on your behalf, been found guilty in any legal proceedings or equivalent administrative proceedings related to cases of bribery or involvement in bribery? |  |  |
|  | yes no | if so, please explain |
| 1. During the five years prior to this application for insurance, have you or any party acting on your behalf been found, in any civil law or arbitration proceedings, to have engaged in or been involved in any way in bribery? |  |  |
|  | yes no | if so, please explain |
| 1. During the five years prior to this application for insurance, have you, or any party acting on your behalf, reached a settlement related to bribery or involvement in bribery? |  |  |
|  | yes no | if so, please explain |
| 1. Are you, or any party acting on your behalf, currently involved in any ongoing proceedings related to bribery? |  |  |
|  | yes no | if so, please explain |
| 1. Are you, or anyone acting on your behalf, listed on one of the publicly available debarment lists of the following international financial institutions: World Bank Group, African Development Bank, Asian Development Bank, European Bank for Reconstruction and Development and the Inter-American Development Bank? |  |  |
|  | yes no | if so, please explain |
| 1. In relation to the contract which is the subject of this application, are you aware of you yourself, any party acting on your behalf, any party involved in the project, any domestic or foreign public official or any private individual having committed, committing or intending to commit any instance of bribery or attempt at bribery at any time in obtaining the contract for your company? |  |  |
|  | yes no | if so, please explain |
| Is your contract as part of a sub contract related to a main contract that has been or will be signed by your buyer? |  |  |
|  | yes no (continue to h) | if so, please explain |
| If yes, are you aware if in obtaining the main contract bribery or an attempt to bribery has taken place or will take place? |  |  |
|  | yes no | if so, please explain |
| 1. Are you to pay any remuneration to a third party or parties (whether private individuals or legal entities) acting on your behalf (for example an agent or intermediary) if you are awarded the contract and/or during your execution of the contract? |  |  |
|  | yes no (continue to 8) | |

|  |  |  |  |
| --- | --- | --- | --- |
| i. Atradius applies a guideline based on national policy for remunerations of agents. See also our [website](https://atradiusdutchstatebusiness.nl/en/article/glossary-and-faq.html).  l. The ultimate beneficial owner (UBO) of a legal entity is the natural person who holds directly or indirectly more than 25 percent of the capital of the legal entity, or more than 25 percent of the voting rights at a general shareholders’ meeting.  You can also use [this](https://atradius.nl/documents/ubo-form.pdf) form for this purpose. | 1. Please state the amount of remuneration. |  | |
|  | fixed amount or % of the contract price | |
| 1. Is this remuneration included in the contract price? |  |  |
|  | yes no | partially, e.g. |
| 1. Please give details for the party to which you are to pay remuneration. |  | |
|  | name of company | |
|  |  |  |
|  | initials | surname |
|  |  |  |
|  | date of birth | title |
|  |  | |
|  | address | |
|  |  |  |
|  | postal code | location |
|  |  | |
|  | country | |
| 1. Who (natural person or legal entity) is the agent’s ultimate beneficial owner (UBO)? |  |  |
|  | name | date of birth |
| 1. What is the nature of this remuneration? Is it for example, a performance-related commission or is it a fixed amount? |  | |
|  | explanation | |
| At which time or times is this remuneration to be paid? |  | |
|  | explanation | |
| Are you obliged to pay the remuneration in all cases, including if the buyer is in default on its payment obligations? |  | |
|  | yes no | |
| Where is the remuneration to be paid?? |  |  |
|  | location | country |
| 1. Which services have been/are to be provided? Please be specific and describe them as clearly as possible. |  | |
|  | description of services | |
| Have you concluded an agreement for these services? |  | |
|  | yes no | |
| 1. If so, does this agreement describe the services to be provided by the counterparty? |  | |
|  | yes no | |
| Is this description identical to that stated in the answer to question n? |  | |
|  | yes no | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Explanatory Notes**  For information about the environmental and social review please refer to [website](https://atradiusdutchstatebusiness.nl/nl/documenten/44.101.01.e-crs-brochure.pdf).  b. Please enclose a copy of your CSR policy with this form.  c. Atradius DSB screens all transactions relating to an application for an exporter’s or financing policy in accordance with CSR policy for export credit insurance. This is necessary in order to determine whether an environmental and social due diligence review is required. We would like to work together with you for this purpose. | 1. Corporate Social Responsibility: environmental and social aspects | | |
| 1. Is your organisation a member of the Equator Principles Association? |  |  |
|  | yes no | if not, please explain |
| 1. Can you share your organisation’s corporate social responsibility (CSR) policy with us? |  | |
|  | yes no already shared with Atradius for another application | |
| 1. Have you conducted an environmental and social due diligence review for the transaction to be financed by the loan? |  | |
|  | yes no | |
| If so, can you share the relevant documentation with us? |  | |
|  | yes no | |
| 1. Name of contact for environmental and social due diligence matters |  | |
|  | name | |
|  |  | |
|  | telephone number | |
|  |  | |
|  | e-mail address | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Explanatory Notes**  b*.* If it subsequently appears that, after this application was submitted, you were or ought to have been aware of such facts or circumstances, this can result in, inter alia, the insurance agreement not being concluded or the loss of the right to indemnity under the insurance agreement. | 1. Final questions |  | |
| 1. Do you have any objection to our consulting other official export credit insurance agencies? |  |  |
|  | yes no | if so, please explain |
| 1. Are there any facts or circumstances which are not specifically addressed in this application form which could be relevant for Atradius in its assessment of this application? |  |  |
|  | yes no | if so, please explain |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Explanatory Notes**  The right of inspection is one of the conditions of the insurance agreement. If requested to do so, you are obliged, within a reasonable period of time, to allow the Dutch state (insurer) access to, as well as provide it with a copy of, all documents and records at your disposal and those which you can reasonably obtain, which the Insurer deems necessary to verify whether you are complying with all your obligations under the Insurance Agreement and/or whether all conditions for indemnification have been met. If the Insurer deems that the Insured is uncooperative or lacking in co-operation with respect to such a request, the Insurer has the right to take action. If documents or records show that you are not complying or have not complied with any of the obligations under the Insurance Agreement, you will be obliged to reimburse, on first demand, all reasonable costs incurred by insurer for engaging an expert third party.  For the OECD Guidelines for Multi-national Enterprises, please refer to [oecdguidelines.nl](https://www.oecdguidelines.nl/).  Atradius and the Dutch state will treat information confidentially unless legally obliged to disclose it.  In accordance with international agreements and national policy, Atradius is obliged to publish a number of details of your (export) contract shortly after issue of your insurance agreement. The details to be disclosed include the country of delivery, the name of the exporter and any financier, a short description of the transaction, the maximum liability, the name of the buyer and any guarantor, the outcome of any environmental and social impact due diligence and various details from this due diligence, and any financial assistance from The Netherlands. Furthermore, depending on the outcome of the CSR screening, the environmental and social impact assessment conducted for the transaction may be published on our website for a minimum of 30 days prior to the effective date of the insurance agreement. | 1. Signature | | | | |
| The undersigned declares that | | | | |
| * he/she has answered all questions accurately and completely, has not withheld any information relevant for the assessment, and is aware that the withholding of any information can have consequences for the processing of the application or can result in the application not being processed; | | | | |
| * that he/she is aware of the Insurer’s right to access information pursuant to the terms of the insurance agreement; | | | | |
| * that the information provided on this application form gives a complete and accurate picture of the risk to be insured, the social and environmental impacts or possible impacts related to the execution of the export contract (and/or the project) and the risk of bribery; | | | | |
| * that he/she will immediately report to Atradius any facts or circumstances relevant for the assessment of the risk to be insured, the social and environmental impacts or potential impacts related to the execution of the export contract or the risk of bribery of which he/she becomes aware after the date of submission of this application; | | | | |
| * that if the Dutch state is prepared to enter into an insurance agreement and the export agreement has come into force, he/she will accept the policy and pay the required premium | | | | |
| * he/she will at all times refrain from committing bribery as per Question 7 a of the application form and the accompanying explanatory notes, as well as from encouraging bribery and from complicity with such practices; | | | | |
| * that he/she agrees that if the insurance agreement comes into being, it will be subject to the laws of the Netherlands, and that he/she will submit any disputes to the judgement of the competent courts in Amsterdam | | | | |
| * that he/she has taken note of the OECD Guidelines for Multi-national Enterprises and will endeavour to apply these in his/her business to the best of his/her ability. | | | | |
|  | | | | |
|  | | | | |
|  | | | | |
| *Place* |  | |  | |
| *Date* |  | |  | |
| *Name* |  | |  | |
|  |  | |  | |
| *Signature* |  |  |  |  |
|  |
|  | | | | |

version Dec 2022