



Credit limit application Domestic Business Builder policy

TO: Credit Guarantee
Tel no +27 (11) 889 7000
Unit
Unit fax no

Unique number (CGIC use)

POLICYHOLDER DETAILS:

Company name Company Name Reference no
Fax no Policy number Registration No
E-mail address

INFORMATION ABOUT THE BUYER:

*In order to expedite the consideration of the limit, please provide comprehensive information.
When applying for a limit on a new buyer, attach a copy the relevant buyer's credit application form.*

Credit Guarantee file number (if known)

Legal entity

Trade name/style

Registration number

Full address

Telephone number

Fax number

Bank

Acc no

Branch

Terms of payment Trading experience **Good** **Average** **Poor** **None**

Value of limit required

Existing annexure no

Amount

Outstanding balance

of which

is

days past due date.

(refer proviso 7 "Automatic suspension of cover")

Value of orders on hand

Shipment/delivery period

Is security held? If yes specify:

Goods delivered under limit of discretion?

Yes

No

If yes, please submit supporting documentation with your application.

Written bank report R

Dated

Remarks

We know of no adverse information other than that disclosed in this form, which might influence Credit Guarantee's decision.

You may /may not contact the buyer directly, thereby referring to our company, if you are unable to obtain sufficient information through your sources.

Name

Signed

Date