## Date of receipt at HBOR

## **APPLICATION FOR INSURANCE**

**OF DIRECT DELIVERIES OF GOODS AND SERVICES**

**(Supplier Credit)**

No.\_\_\_\_\_\_\_\_\_\_\_\_(*to be filled out by HBOR*)

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| --- | --- | --- | --- |
| **1. Exporter/Applicant:** | | | |
| Legal name: |  | Ownership structure: |  |
| Address: |  | Contact person: |  |
| Company registration number/PIN: |  | Telephone: |  |
| Code of activity in accordance with NKD (National classification of activities): |  | Fax: |  |
| Corporate account number: |  | E-mail: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Has the financing of an export transaction been applied for? | | | | YES | NO |
| If yes, what amount? | |  | | | |
| Financing applied for via commercial bank | Legal name: | |  | | |
| Address: | |  | | |

|  |  |
| --- | --- |
| **2. Foreign buyer:** | |
| Legal name/name and surname: |  |
| Address: |  |

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| --- | --- | --- | --- |
| **3. Country of export:** |  | Code *(filled out by HBOR)* |  |

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| --- | --- | --- | --- |
| **4. For the same transaction, a Letter of Intent has been issued:** | | | |
| Number: |  | Date: |  |

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| --- | --- | --- |
| **5. Export contract/bid/order *(hereinafter: Export contract)*:** | No: | Date: |
|  |  |

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| --- | --- | --- | --- |
| **Value of contracted business pursuant to the Export contract:** | Amount: | Currency: | Currency code (*filled out by HBOR*): |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Export goods /services:** | Name: | Tariff code: |
|  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date:** | Start of production: | Start of delivery: | End of delivery: | Date of commissioning (*in case of capital goods*): |
|  |  |  |  |

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| --- | --- | --- | --- |
| **Agreed payment deadlines:** | |  | |
| **If there is agreed collateral for payment of the Export contract:** | |
| Type: |  |
| Amount: |  |
| Date of issue: |  |
| Legal name/name  of insurance issuer: |  |
| Address of insurance issuer: |  |
| Notes: |  |

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| --- | --- |
| **Terms of delivery (INCOTERMS):** |  |

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| --- | --- | --- | --- |
| **6. Requested Sum insured:** | Currency: | Sum insured: | Contractual interest % p. a. |
|  |  |  |

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| --- | --- | --- |
| **7. Insurance requested for the period:** | From: |  |
| To: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **8. Certification of the Croatian Chamber of Economy or Custom’s authorities on domestic origin of goods:** | Exists |  | or | **Domestic share:** | ........ %  of contracted price |
| Can be obtained |  |
| Cannot be obtained |  |

Parts of the contract qualified for obtaining a certification on the Croatian origin of goods and services provided by Croatian persons are deemed values created in Croatia; therefore, it is considered that the domestic share is 100%.

**9. Experience in doing business with the Foreign buyer:**

|  |  |
| --- | --- |
| Since: |  |
| Turnover 2 years ago: |  |
| Turnover of the last year: |  |
| Turnover of the current year: |  |
| Current status of receivables: |  |
| The longest overdue receivable, amount and date due: |  |
| Has the Foreign buyer duly fulfilled its obligations so far: |  |
| Security instruments for transactions so far: |  |

|  |  |  |
| --- | --- | --- |
|  | YES | NO |
| **10. Is there an ownership share of the Exporter in the Foreign buyer’s company? If yes, what amount?** |  |  |
| **11. Has the agent fee that depends on payment been agreed? If yes, please state the percentage of contract price.** |  |  |
| **12. Is there another obligation of the Exporter towards the Foreign buyer under the mentioned Export contract beside the respective obligations of delivery (e.g. counter-purchase, agency contract, advance payment guarantee or seller’s guarantee)? If yes, please state the type and amount?** |  |  |
| **13. Do you want to insure damage in the course of production?** 🗆 **YES** 🗆 **NO**  *(In case of export of goods produced exclusively by special order of the Foreign buyer. Along with the application, it is necessary to submit the list of expenses for the production process of ordered product).* | | |
| **14. Additional information** *(information that may have a significant impact on risk assessment)***:** | | |
|  | | |

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| --- | --- |
| **15. Providing of creditworthiness report of the Foreign buyer necessary for the assessment of this Application (issued not more than 3 months before making this application):** | |
| Provided by the Exporter/Applicant and enclosed to this Application |  |
| The Exporter authorises HBOR to provide the report, and shall reimburse to HBOR the costs of providing such report from relevant institutions. |  |

**The application processing fee is charged pursuant to the valid Decision on service fees issued by HBOR, pursuant to the Ordinance on the manner of calculation of fees.**

The Insurance Contract consists of the General Terms and Conditions on Insurance of Direct Deliveries of Goods and Services OU-KD-02/17 (hereinafter: General Terms and Conditions) and the Policy for insurance of direct deliveries of goods and services against political and commercial risks (hereinafter: the Insurance Policy) with attachments. Attachments to the Insurance Policy that are deemed its constituent parts, are: (1) the filled out Application for Insurance (hereinafter: the Application) and (2) excerpt from the register of companies at the commercial register of the Insured person’s court of record – company or the craftsmen register of the Insured person - craftsmen.

When assessing the insurance risk, HBOR takes into account only the information stated by the Applicant in the Application, irrespective of whether the Applicant is familiar with the contents and terms set forth in any other related documents. The Applicant agrees that the Insurance Contract is to be prepared and executed exclusively on the basis of information stated in the Application.

The Applicant hereby declares, under substantive and criminal liability, that all the information contained in the Application is true and complete, i.e. that no information that could affect the conclusion and the execution of the Insurance Contract has been withheld, and that HBOR shall be immediately informed of any changes in the information contained in the Application.

The Applicant hereby declares that, prior to signing this Application, he/she has received and read the General Terms and Conditions and has fully understood them.

All signatories of this document, legal and/or natural persons (citizens and/or persons authorised to represent legal persons, government bodies, bodies with public authority and other bodies) state that they voluntarily provide HBOR at its free disposal their data contained in this document and in the supporting documents, including all their data and personal data that are available to HBOR pursuant to the valid regulations, and they agree that HBOR may collect, process and use the mentioned data and personal data for the purpose of providing banking and other financial services for which HBOR is authorised. The data and personal data may be used only for the stated purposes, whereas the basis for their collection, processing, utilisation and storing are the Credit Institutions Act, the Croatian National Bank Act, the National Payment System Act, the Foreign Exchange Transactions Act, the Accounting Act and other primary and secondary legislation relating to banking operations as well as efforts of HBOR to provide quality and complete services. All data and personal data given to HBOR are protected as strictly confidential data pursuant to the Credit Institutions Act, the Personal Data Protection Act and other appropriate regulations. All signatories of this document express their explicit consent that all their data and personal data available to HBOR may be further transferred by HBOR to banks, to third parties pursuant to the Credit Institutions Act and other appropriate regulations, to persons with whom HBOR has concluded business co-operation agreements and to associations for the protection of creditors (such as HROK – Croatian Register of Loan Obligations, etc.).

The Applicant:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name, surname and title of the person authorised for representation)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature of authorised person)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Place and date of signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Seal of the Applicant)

**Attachments:**

* Data on Foreign buyer (*if provided by the exporter itself*), credit institution/insurance provider (*if there is agreed collateral for security of payment*)
* Data on Exporter/Applicant *(Excerpt from the Register of companies/crafts, Balance Sheet and Profit and Loss Account for the last calculation period, Data on creditworthiness, Data on solvency)*
* Statement of the Exporter on the giving of consent for the public disclosure of data
* Statement of the Exporter on the meeting of the regulations that prohibit bribery in international trade

Attachment No. 1 to the Application for Insurance of Direct Deliveries of Goods and Services/Supplier Credit, Application No.:\_\_\_\_\_\_\_\_\_\_

**STATEMENT OF THE EXPORTER**

**on the Meeting of the Regulations that Prohibit Bribery in International Trade**

I hereby declare that no provision of the regulations of the Republic of Croatia that prohibit bribery in international trade has been violated on the occasion of entering into the Export Contract. I take notice of the fact that the insurance of export credit risks with state support cannot be given to exports, which were negotiated by way of bribery in international trade.

The Exporter:

|  |
| --- |
| Legal name |
| Headquarters, street and number |
| Postal code and city |
| Registration number |
| PIN |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Name, surname and title of  the person authorised to represent) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Signature of the authorised person) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Place and date of signature) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Seal of the Exporter) |

Attachment No. 2 to the Application for Insurance of Direct Deliveries of Goods and Services/Supplier Credit, Application No.:\_\_\_\_\_\_\_\_\_\_

**STATEMENT OF THE EXPORTER**

on the Giving of Consent for the Public Disclosure of Data

1. I hereby give my consent to HBOR for public disclosure of the following data:

* NAME AND HEADQUARTERS of the Exporter;
* INSURED AMOUNT, i.e. the amount for which the insurance has been concluded;
* EXPORT INSURANCE PROGRAMME under which export credit insurance has been approved;
* ACTIVITY of the Exporter for which export credit insurance has been approved;
* TYPE OF GOODS AND/OR SERVICES that are the subject matter of export insurance and
* AMOUNT OF INDEMNITY PAID (if the right case to the payment of indemnity has been gained under this Application for Insurance of Direct Deliveries of Goods and Services/Supplier Credit).

2. By this Statement, HBOR, with respect to the data stated under item 1, is released from the obligation to keep the banking secret that is provided in the provisions of the Credit Institutions Act in force and possible changes and amendments to this Act.

3. The consent for the public disclosure of data is given exclusively with respect to the data stated under item 1 of this Statement. For the public disclosure of other data gathered by HBOR in the course of administering its export credit insurance activities, HBOR is obliged to request a prior written consent of the Exporter, unless otherwise determined by applicable regulations, or if the data is already publicly available.

The Exporter:

|  |
| --- |
| Legal name |
| Headquarters, street and number |
| Postal code and city |
| Registration number |
| PIN |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Name, surname and title of  the person authorised to represent) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Signature of the authorised person) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Place and date of signature) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Seal of the Exporter) |