



*Information Support
Protection*

**SELLER'S
RISK**

Form No: 502 SP

This application helps us to assess your request for a credit limit on a particular buyer. We rely on the information you give us to provide you with a credit limit decision. Therefore, all questions must be answered truthfully and in full. You must also have authority to submit this application to us:

CREDIT LIMIT APPLICATION

1. DETAILS OF THE EXPORTER

Registered Name	
Policy type and number	

2. THE BUYER

Registered Name		
Trading Name (If Any)		
Buyer code given by SLECIC (If given already)		
Address		
Postal Address (If different from the above)		
Postal Code	Country	
Telephone	Facimile	
Email		
Buyer's Bank and Address		

3. THE CREDIT LIMIT

Do you have an existing valid credit limit in place?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If Yes, Amount Rs.	TOP	Date of Issue
Total amount of credit limit required	Rs.	
Credit Period – How many days are you giving the buyer to pay		days

What are your terms of payment?	
If seeking enhancement of credit limit amount or longer terms of payment state the reasons	
Expected value of contract Rs.	Earliest commencement date
Description of services to be rendered	
If payment is to be secured by an Irrevocable Documentary Credit (IDC) what is the name and address of the issuing Bank?	

4. EXPERIENCE

Month and year from which the buyer is your client	
Your knowledge / Experience with the buyer for the last 2 years (Please attach details of past experience for the last 12 months in the attached format)	
Your largest single credit risk (for services performed and invoiced) Amount Rs.	Terms of Payment
Does the Buyer have any current or unusual overdue amounts of more than 30 days? If yes, please provide details	Yes <input type="checkbox"/> No <input type="checkbox"/>

5. OTHER INFORMATION

Are you and buyer associated/related	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please give details (including % of ownership)		
Are you required to render services in a country other than the Buyer's registered address?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please state the country(ies)		
Is the payment coming from Buyer's Country?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Not which country? , Please give details of your transaction		

Have you any readily available financial information on this buyer? If yes, please attach the information to your application		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there any further information to help us assess the application faster? If yes, please provide details 			
(If you are also able to provide any additional information such as financial statements or references it will facilitate the process)			
Payment of credit limit evaluation fee is made herewith (Please provide details) Cash <input type="checkbox"/> Cheque <input type="checkbox"/>			
Amount Rs.	Cheque No	Date	
We hereby certify that the representations made and the facts stated above are true to the best of our knowledge and belief. We hereby further certify that we have not omitted to state any material facts. We hereby agree that the representations made and the facts stated above form the basis for the credit limit, if approved, and that the truth of the representations made and the facts stated shall be a condition precedent to any liability of SLECIC.			
Authorised Signatory & Company Stamp			
Name	Date		