



Form No: 502

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)			
Registration No			
Address			
Postal Address (If different from the above)			
Post Code		Country	
Telephone (Landline & Mobile No)		Fax	
Name of the contact person and designation			
General Email (Please attach a copy of an e-mail correspondence with the buyer)			
Contacted Email (Please attach a copy of an e-mail correspondence with the buyer)			
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	DD/MM/YYYY
Total amount of credit limit required	Rs.			
Credit Period – How many days are you giving the buyer to pay ?				

What are your terms of payment? (Please tick one)

<input type="checkbox"/>	Open Account (O/A)	<input type="checkbox"/>	Cash Against Documents (CAD)
<input type="checkbox"/>	Documents Against Acceptance (D/A)	<input type="checkbox"/>	Irrevocable Documentary Credit (IDC)
<input type="checkbox"/>	Documents Against Payment / Sight Draft (DP/SD)	<input type="checkbox"/>	Other (Please give details)

Value of orders in hand (Expected and Confirmed) Rs.

Earliest shipment date

DD/MM/YYYY

Goods or services to be supplied

If payment is to be secured by an Irrevocable Documentary Credit (IDC) what is the name and address of the issuing Bank?

*Note: Please attach details of the future shipments in the attached format (Form No 508)

4. EXPERIENCE

Month and year from which the buyer is your client?

Your knowledge / experience with the buyer for the last 2 years

*Note: Please attach details of past experience for the last 24 months in the attached format (Form No 507)

Your largest single credit risk (delivered / services performed and invoiced) Amount Rs.

Terms of Payment

Does the buyer have any current or unusual overdue amounts of more than 30 days?

Yes

No

If yes, please provide details.

5. OTHER INFORMATION

Are you and buyer associated / related

Yes

No

If yes, please give details
(including % of ownership)

Are you required to dispatch goods or perform services in a country other than the buyer's registered address?

Yes

No

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 got any readily available financial information on this buyer? *		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
If yes, please attach the information to your application						
In addition to the above, is there any further information to help us * assess the application faster?		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
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)		FT	<input type="checkbox"/>	Cash	<input type="checkbox"/>	Cheque <input type="checkbox"/>
Amount Rs.		Cheque No		Date	DD/MM/YYYY	
We hereby certify that the representations made and the facts stated above are true.						
Name and Designation of authorised Signatory & Company Seal						
Signature				Date	DD/MM/YYYY	

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Is there an operative policy o/a of this exporter or is it to be issued?						
Type of policy	Specific		Whole-turnover			
Date of last shipment declared						
Declaration with premia paid up to date?		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
..... For SLECIC (.....) Date						