

EXCEEDING OF THE MAXIMUM CREDIT PERIOD

DOMESTIC CREDIT INSURANCE (WKV)
EXPORT CREDIT INSURANCE (AKV)

Policyholder's name and address 	Policy no.: <input style="width: 100%;" type="text"/> Customer Policyholder's Customer no.: <input style="width: 100%;" type="text"/> Coface no.: <input style="width: 100%;" type="text"/>						
Please submit this document only once to the underwriting department.							
Company, Address of customer Country (if abroad)	<input style="width: 100%; height: 100%;" type="text"/>						
Maximum credit period in months according to the credit limit notification or policy: <input style="width: 100%;" type="text"/>	Current total receivables: <input style="width: 100%;" type="text"/>						
According to the terms and conditions of our policy, we inform you that the above-mentioned company will exceed the maximum credit period for the following invoices:							
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">Invoice date</th> <th style="width: 30%;">Invoice amount (currency)</th> <th style="width: 50%;">Remarks</th> </tr> </thead> <tbody> <tr> <td style="height: 300px;"></td> <td></td> <td>(Please state initial and subsequent settlements; please state date of maturity for accepted bills and remittances)</td> </tr> </tbody> </table>	Invoice date	Invoice amount (currency)	Remarks			(Please state initial and subsequent settlements; please state date of maturity for accepted bills and remittances)	
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