



Notification of claim

Policy without collection service through AXA

Please complete this form, sign it, and send it – together with the necessary documents – to:
AXA Insurance Ltd., Credit, Surety & CLP, Thurgauerstrasse 36/38, P.O. Box 6938, 8050 Zurich

Policy

Policyholder: _____

Policy no.: _____

Buyer

Name: _____

Dossier risk no. (DR no.): _____

Address: _____

Postcode/city: _____

Country: _____

Phone: _____

E-mail: _____

Amount notified _____

Currency _____

Details of the claim (optional)

- ☐ Receivable is contested by the buyer
- ☐ Collateral available for the notified claim
- ☐ Return of goods has been undertaken or is still possible
- ☐ Other _____

Reason for the notice of claim

- ☐ Late payment
- ☐ Opening of insolvency or restructuring proceedings
- ☐ Other _____

Necessary documents

Following copies of documents are enclosed

- ☐ List accounts receivable
- ☐ Invoices
- ☐ Proof of delivery



Further documents (optional)

- ☐ Orders & order confirmations
- ☐ Reminder/s
- ☐ Legal Application
- ☐ General terms and conditions
- ☐ Others _____

Place and date

Company signature and stamp
