



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, General-Guisan-Str. 40, P.O. Box 357, 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 _____
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Place and date

Company signature and stamp
