

Trade Financier Declaration

1. Financier Details

Registered Name			
Registered Address			
Contact Name & Position			
Contact Email & Telephone			
Insured Name & Policy number			
Bank Name	Sort Code	Account Number	

2. Beneficial Owners - Complete all of the details of your Ultimate Beneficial Owner (UBO) see explanatory notes below

Please tick the appropriate box and complete the details that apply to your company:

- 1 ☐ We do not have an Ultimate Beneficial Owner having an Interest in us of 25% or more. Please go to section 3
- 2 ☐ We are a listed company trading on the following stock exchange or a supervised financial institution. Complete details below*
- 3 ☐ We have one (or more) direct or indirect shareholders of 50% or more, which is a listed company or a supervised financial institution. Complete details below*

*Name of listed company/ supervised financial institution	Registered address	Name of Stock exchange or regulator	Ownership %

- 4 ☐ We have one or more Ultimate Beneficial Owner(s) with an Interest in us of 25% or more. Complete details below.

	First Name(s) and Surname UBO	Full address of UBO	Date of Birth of UBO DD/MM/YY	Percentage of (in)direct interest
1				
2				
3				
4				

Explanatory Notes

Ultimate Beneficial Owner(s) (UBO)

The UBO being a person owning, directly or indirectly, 25% or more of the share capital, voting rights or effective control of the company needs to be identified with: full name and address, date of birth and listed in the registered annual accounts.

Direct percentage

The natural person/owner having a direct Interest of >25% in the Counterparty.

Indirect percentage

In case the Counterparty is held by (a) legal entity/entities, it is not required to reflect all intermediary companies. Please fill in the ultimate percentage of the Interest the UBO has in the Counterparty.

Why does Atradius require details of the company's ultimate beneficial owners?

Atradius will use the data provided in this statement solely for the purpose of identifying the UBO, as part of our counterparty due diligence processes, and to comply with applicable laws and regulations in relation to sanctions, financial crime, and terrorist financing.

3. Sanctions questions

Does the Company (directly or indirectly through subsidiaries) conduct any activity within Sanctioned Jurisdictions or with Sanctions Targets? (this means an individual or legal entity subject to legal or economic restrictions imposed by governments) ☐ Yes ☐ No

If yes, please describe the activity the Company conducts within the Sanctioned Jurisdictions or with Sanctions Targets:

Does any Sanction Target (i) hold individually or together with other Sanctions Targets a direct or indirect 10% or greater ownership stake in the company, or (ii) control the Company? ☐ Yes ☐ No

If yes, provide the details on the relevant ownership or control of the Sanctions Targets:

Is the Company (directly or indirectly through subsidiaries) involved in transactions related to the production import or export of goods or services related to the defence, energy, metals and mining, technology and/or construction sectors originating for use in any Sanctioned Jurisdictions? ☐ Yes ☐ No

If yes, please describe the transactions in which the Company is directly or indirectly involved:

4. Privacy

When providing our products and services, Atradius acts as “controller”. We collect and process information mainly on companies and businesses. However, in the process of doing so, we also process data that may be qualified as “personal data” which is any information relating to an individual (e.g. a sole trader, a company director, a beneficial owner, a professional contact). Further information is available on the Atradius website in the Privacy Statement which explains when we collect personal data, what personal data we collect, how we use such personal data etc. To view our Privacy Statement, please visit www.atradius.co.uk

5. Declaration and Signature of the Company Representative

The Insured, as named above, have asked us to complete this declaration. If the above numbered policy is amended by Trade Finance Condition 43101.00 (“the Trade Financier Condition”), you may accept this declaration as our formal agreement that:-

- i) we accept the terms of the Trade Financier Condition – a specimen copy of which we have seen;
- ii) where such terms conflict with any agreement made between the Insured and ourselves, the terms of the Trade Finance Condition shall prevail;
- iii) we hereby agree and accept that the term of the Trade Financier Condition, whereby you agree that we shall be Joint Insured, shall mean and only mean that –
 - a) we may claim from you under the policy subject to its terms, the terms of the Trade Finance Condition and the terms of this letter and;
 - b) you will have no liability to us whatsoever in any situation in which you are not liable to the original Insured for any reason whatsoever and;
 - c) you will under no circumstances have any greater liability to us in respect of the policy than you have to the original Insured.
- iv) We acknowledge that you have made no representations to us regarding the Insured, the underwriting of the Insured's credit limits, or the buyer(s) for whom the Insured may request a credit limit under the policy. We acknowledge that we are responsible for our own due diligence and in no way are relying, or shall in the future rely upon your underwriting or analysis or the fact that you have agreed to issue a credit limit for a buyer under the policy, except to the extent that we may, subject to the terms and conditions of the policy be entitled to receive a claims payment up to the applicable credit limit for a buyer.

We acknowledge that variation of the Policy remains subject to your acceptance of our and the Insured's undertakings.

Your Declaration

We declare that we understand that a contract of insurance is one of utmost good faith and that the information we provide must be accurate, complete and not misleading and that all circumstances, facts or matters that may affect your consideration of the Proposal must be disclosed. We declare that the information given is, to the best of our knowledge and belief, correct, the risk has been presented fairly and that we are not aware of any circumstances that we have not disclosed to you which might influence your assessment of and willingness to accept the risk. We acknowledge that a failure by us in this regard may entitle Atradius to invoke the remedies available to it by law, which may in certain circumstances treat the insurance, if a Policy is issued, as never having existed.

This Proposal is deemed to be restated upon each renewal; you agree to notify Atradius as soon as possible of any changes in the information provided in this form.

By submitting this Proposal you are inviting Atradius to consider your application for an insurance policy to be issued to you. Atradius is not obliged to offer a policy to you and if approved the terms of any policy issued will be at Atradius' discretion.

The undersigned is an authorised representative of the company and authorised to act on behalf of the company.

Name		Position	
Signed		Date	

If you are not a director of the company please provide a letter signed by a company director on your company letterhead confirming that you are authorised to sign this proposal on the company's behalf.

Atradius
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Company Registration Number
FC033828
FSR Number: 755408

VAT Registration Number
GB 542 8734 29

www.atradius.co.uk

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