



TRADE RISK
SPECIALISTS

Credit Risk Questionnaire

1 Applicant

Company Name	
Trading Style (if applicable)	
Address	
Contact Name	
Position	
Telephone	
Email	
Company Reg. No.	

2 Type of Business

Describe all products and services you sell?	
What are your <u>standard</u> Terms of Payment?	
Do you ever agree longer terms? (If yes, show the maximum terms)?	
Do you have seasonal peaks? Y/N? If so when?	
Do you have an 'All Monies' Retention of Title Clause on your Sales Terms & Conditions?	
Do you ever sign your customers Terms & Conditions rather than enforcing your own?	

3 Turnover

Estimated <u>domestic</u> turnover for next 12 months*	
Estimated <u>export</u> turnover for next 12 months*	

	Current Year to Date	Last Financial Year	Previous Financial Year	Previous Financial Year
Period (year end)				
Annual sales*				

* Please exclude cash sales, VAT, inter company sales, sales to Government departments and turnover on confirmed irrevocable Letters of Credit

4 Bad Debt History

Bad debts in each financial year	Current Year to Date	Last Financial Year	Previous Financial Year	Previous Financial Year
Name of largest bad debt				
Amount of largest bad debt				
Total number of losses for year				
Total value of losses for year				

* Please exclude cash sales, VAT, inter company sales, sales to Government departments and turnover on confirmed irrevocable Letters of Credit (if applicable)

** Includes Ireland

*** Include sales for Associate Company if noted above



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5 Debtor Analysis

Range	Amount £	Number
500,001 & Over		
250,001 – 500,000		
100,001 – 250,000		
50,001 – 100,000		
25,001 – 50,000		
10,001 – 25,000		
5,001 – 10,000		
2,501 – 5,000		
1,001 – 2,500		
Under 1,000		
Total		

Average No. of Debtors	
Average Debtor Balance	

6 Principal Customers

	Name	Country	Registration Number	Credit Limit	Terms of Payment (if different from your standard)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

8 Declaration

I confirm this is a true representation of our business and I am authorised to provide these details.

Signed		Print Name	
Date			