

TRADE CREDIT QUESTIONNAIRE

1. YOUR PARTICULARS		
Company Name (legal entity):		
A.C.N:	A.B.N:	
Operating Address:		
Telephone:	Fax:	
Parent company / associated companies:		
2. NATURE OF YOUR BUSINESS		
Type of goods or services sold:		
Industry sector(s) into which they are sold:		
Years of experience in this line of business:		
3. ESTIMATED ANNUAL TURNOVER DETAILS <small>(Exc Cash Sales, Inter Company Sales, Deposit elements etc)</small>		
Domestic Trade	Estimated Turnover	Estimated No. of Active
New South Wales	\$	
Victoria	\$	
Queensland	\$	
South Australia	\$	
Western Australia	\$	
Australian Capital Territory	\$	
Tasmania	\$	
Northern Territory	\$	
Export *	\$	
Total	\$	
* Please specify countries & list terms of payment applicable per market (on a separate sheet)		
If there is an element of seasonal trading please advise details:		
4. TERMS OF PAYMENT		
Normal terms of payment (eg. 30 days from end of month of delivery) (Please be very specific):30 DAYS EOM		
Non-standard terms of payment	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, please give full details:		
Are any of the following relevant to your business? If Yes, please attach full details.		
Pay When Paid Contacts	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Early Close Off Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Retention Monies	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Contra Trading Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Forward Dating of invoices	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If Yes, how many days?
Consignment Stock Trading	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If Yes, is it a formal agreement? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If Yes, please provide a copy.		

5. DEBTOR ANALYSIS (BALANCES)

Total of Debtor Balances:

As at 31st March last:

As at 30th September last:

As at 30th June last:

As at 31st December last:

Debtor Profile: Please indicate the number of active accounts within each range and the approximate percentage of total turnover these accounts represent:

Balance outstanding at any one time	No. of accounts	% of Credit Turnover	Balance outstanding at any one time	No. of accounts	% of Credit Turnover
\$500,001 & over			\$25,001 to \$50,000		
\$250,001 to \$500,000			\$15,001 to \$25,000		
\$100,001 to \$250,000			\$5,001 to \$15,000		
\$50,001 to \$100,000			Up to \$5,000		

6. MAJOR CUSTOMERS (Please list by size of credit limit required)

Full Legal Name (XYZ & Co. Pty.Ltd.)	ACN/ABN	Credit Limit Required	Annual Credit Sales Turnover
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$

7. OVERDUE ACCOUNTS

If you have any accounts which are either overdue beyond 90 days from end of month of delivery of goods (or services rendered) causing concern or in financial difficulties, please give details as shown below. If non state "none"

Name & Address	Amount Outstanding	Original due date	Action Taken

8. BAD DEBT HISTORY

Financial Year Ending	Turnover	No. of Bad Debts	Gross Bad Debts	Largest Losses Names & Amounts
/ /				1.
				2.
/ /				1.
				2.
/ /				1.
				2.
/ /				1.
				2.
(Current YTD)				1.
				2.

9. CREDIT MANAGEMENT

Do you have a Credit Procedures Manual? Yes No If Yes, please provide a copy.

Which of the following are applicable when establishing an account?

Credit Application Form	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Trade References Checked	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Financial Information	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Bank Opinions	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Bureau Information	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Mercantile Reports	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Please detail sources and types of Mercantile Reports obtained

Which of the following collection procedures are used?

Fax / Phone Reminder	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How many days after due date is reminder given?
Written Reminder	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How many days after due date is notice sent?
Stop Credit	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How many days after due date?
Legal Action	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How many days after due date is action taken?
Collection Agency	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How many days after due date?

Securities

Do you currently have an 'All Monies Retention of Title'? Yes No

Are Personal Guarantees, Bank Guarantees or other securities sought when opening or reviewing an account? Yes No

If Yes, please advise approximately what percentage of sales are to customers who have provided security or a guarantee.

Do you currently register your security interests on the PPSR? Yes No

If No please provide reasons for not registering

Please detail any specific security held with your major customers as given in Section 6:

10. CREDIT INSURANCE & FINANCING

Do you currently insure your debtors? Yes No If Yes, with whom?

Expiry of policy / /

Do you currently factor your debtors? Yes No If Yes, with whom?

If Yes, Recourse or Non-recourse?

11. SIGNATURE

We hereby appoint Marsh to act as our representative to obtain indications for Trade Credit Insurance

Company Name in full:

Name of signatory:

Position in company:

Signature:

Date:

When complete please forward to Marsh Pty Ltd ABN 86 004 651 512

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