

OMB No. 3048-0009
Expires 10/31/03

11. Please list your 5 largest export buyers:

Buyer Name	Address	Country	Last 12 Months Sales & Terms	High Credit	Projected Terms	Credit Limit Needed
			\$	\$		\$
			\$	\$		\$
			\$	\$		\$
			\$	\$		\$
			\$	\$		\$

12. Name(s) of export credit decision maker(s): Title(s): Years of Credit Experience Years of Foreign Credit Exp.

13. At what point do you stop shipping to a past due account? _____ days past due

14. Total export receivables outstanding: \$ _____ at ____ / ____ / ____ (date should be within 60 days of the application)

\$ _____ \$ _____ \$ _____ \$ _____ \$ _____

Current 1-60 days past due 61-90 days past due 91-180 days past due 181+ days past due

For each buyer over 60 days past due, attach an explanation including: name of buyer, country, amount past due, due date, reason for past due and collection efforts made.

15. Export credit losses per year or rescheduled debts during each of last three years - attach additional pages if necessary.

YEAR	AMOUNT (US\$)	EXPLANATION OF LOSS OR RESCHEDULING (SPECIFY REASON, COUNTRY, AND BUYER)
	\$	
	\$	
	\$	

16. Please submit the following as Attachments:

- Credit Report on your company dated within 6 months of the application or attach a check for \$35 payable to Ex-Im Bank.
- Your financial statements for the two most recent completed fiscal years (with notes if available).
- Resume(s) on each credit decision maker identified in question 12.
- Descriptive product brochures (if available).

17. Special Coverages Required: If "none" check ☐ N/A

- ☐ **Add Additional Named Insureds (ANI's).** Credit decisions of each affiliate listed must be centralized with the Applicant and each affiliate must invoice export credit sales in their own name (or tradestyle); if either is not applicable, please attach an explanation. Questions 3-15 should include export sales of prospective ANI's.

Are the products of each affiliate the same as the applicant's products listed in question 4 of this application? ☐ Yes ☐ No

Affiliate Company/Trade style	Street Address/City / State / Country	NAICS/SIC Code	Relationship to Applicant

- ☐ **Services (Please attach a copy of your sample services contract)** Services must be: performed by U.S. based personnel or those temporarily domiciled overseas, and billed (invoiced) separately from any product sales.
- ☐ **Enhanced Assignment** of small business insurance policy proceeds. This is exporter performance risk protection that may be offered to lenders willing to finance Ex-Im Bank insured receivables. **Applicant Please Attach:**
- Written bank reference describing your relationship to date and size of existing credit line.
 - 2 written trade references from principal commercial suppliers.
 - For applications with policy limits over \$500,000, financial statements must be audited or CPA reviewed with notes.
- ☐ **Other** (please specify): _____