coface

COMPAGNIE FRANÇAISE D'ASSURANCE POUR LE COMMERCE EXTÉRIEUR S.A., BRANCH OFFICE IN NEDERLAND (COFACE)
CLAUDIUS PRINSENLAAN 126 – POSTBUS 3377 – 4800 DJ BREDA – T. +31 (0) 76 573 71 71 – F. +31 (0) 76 587 38 52 – www.coface.nl – info-netherlands@coface.com

GLOBALLIANCE CONTRACT

NOTIFICATION OF PAYMENTS RECEIVED

This undersigned form, you can:

Insured:

- send by mail to:
Coface,
branch office in Nederland
P.O. Box 3377
4800 DJ Breda
Netherlands

- scan and send to:
infoschade-netherlands@coface.com

Contract-No.: _____

- fax to:
+31 (0) 76 587 38 52

Buyer

Complete name (legally binding), address (head office) and country: _____
_____

Coface-No.: _____ **Your Ref.-No.:** _____ **Claim-No.:** (if known) _____

☐ "named" buyer (Buyer with a Credit Limit set by us)
☐ "unnamed" buyer (Buyer with a Credit Limit set by you within the Discretionary Zone)

NOTIFICATION OF PAYMENTS RECEIVED

according to Art. 2.3 d) of the General Provisions

All debts outstanding (due and undue)				Payments/Credit entries (2)		Remarks
Invoice-No./Ref.	Date of Invoice	Due Date (1)	Currency/Amount	Currency/Amount	Date	

Total:

New balance of the account:

(1) IN CASE OF "CASH AGAINST DOCUMENTS" SALES REGISTER "CAD" UNDER COLUMN "REMARKS" PLEASE.
(2) IN CASE OF CREDIT ENTRY REGISTER THIS UNDER COLUMN "REMARKS" PLEASE.

further particulars

Notification of "Overdue Account"
"Request for Intervention" took place on: _____

(Please note payments or credit entries done in the meantime under column "Payments/Credit entries".)
Remarks: _____
_____
_____
_____

Date: _____ Legally binding signature: _____