

CLAIM FORM

INFORMATION ABOUT LOSS AND LACK OF PAYMENT

Version 2.0

How to

Fill out the form on the screen and save it to your computer. Hereafter you can either:

- Email the form to claims-collections.no@eulerhermes.com, or
- Send the form by post to Euler Hermes Norge, PB 6875 St.Olavs Plass ,NO-0130 Oslo.

Date:

Please provide copies of the following documents, which are needed to assess your claim - please indicate the ones you have enclosed

- All outstanding invoices (and credit notes regarding the outstanding amount)
- Statement of account showing the period 6 months prior to the first outstanding until today (must show all movements on the account)
- Statement of account showing all open items
- Information about any payments that are not shown on the statement
- The lodge of your claim (if bankruptcy, dissolution or reconstruction)
- Circular letter from the trustee (if bankruptcy or reconstruction)
- Any judgement/basis for enforcement in this case
- Order confirmation
- Delivery confirmation, consignment note or similar
- Any correspondence with the debtor

Please clarify if any of the above cannot be provided:

Your information

Policy no.:		Company:	
Contact person:			
Phone no.:		Email:	

Information about the debtor

Company		Address:		
EH ID:		Your debtor ref. no.:		CVR no./VAT*:

*Alternatively company registration number for the relevant country.

All invoices

No.	Invoice no.	Invoice date	Due date	Invoice amount	Outstanding invoice amount
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
Total amount (invoices):					

Information about claim

Is the claim covered by CAP/CAP+ ?	Yes		No		If yes, note CAP/CAP+ policy no:		
Is the claim covered under Self evaluated limit/DCL?	Yes		No				
Reason for the claim:	Bankruptcy		Debt reconstruction		Other:		
	Insolvency		Composition with creditors				
	Protracted Default		Liquidation (insolvency)				
Outstanding amount (incl. VAT, interest and fees):				Currency:			
VAT percentage on invoices:				Date of claim incident:			
Collection costs ex VAT:				Disputes:	Yes	No	
Was the case handled by a third party debt collection agency or lawyer?	Yes		No		Retention of title:	Yes	No
If yes, please state the original outstanding amount:				And any collected amount:		Currency	

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