

Domestic Credit Insurance Policy (DCIP)

Credit Limit Application Form



(Please complete it fully and carefully. Separate application is to be submitted for each buyer)

1. Information of the Applicant

Registered Name of the Firm / Company : _____

Registered Address : _____

2. Policy Details

Policy No. : _____ Policy Period: _____

Maximum Liability : _____

3. Details of the Buyer

Registered Name of the Buyer : _____

Registered Address : _____

City :

State :

PIN :

Phone Number :

E mail :

Website :

Contact Person & Designation :

Mobile Number :

PAN No. :

IE Code, if any :

GSTIN :

Name of the Bank and Bank Branch of the Buyer : _____

4. Limit Requirement Details

(Rs in lakh)

	Limit Required	Terms of Payment (ToP)	Value of Orders in Hand (ToP wise)*
*Copies of orders in hand to be enclosed			

5. Experience with the buyer (For Last 3 FYs)

(Rs in lakh)

Financial Year	Total Sales	Terms of Payment	Total Repayment	Outstanding	Delay in repayment, if any
*Reason for Overdues Obtained (attach explanatory note on overdues)					

6. Commodity / Service (with HS code):

7. Declaration

1. We hereby confirm that the information given in this form (including the additional statements, forms, and attachments) is correct to the best of our knowledge and belief and are not aware of any additional circumstances which might influence your acceptance of the risk.

2. We further declare that the aforesaid buyer is not a subsidiary or associate company of ours and that we have no interest direct or indirect, in them.

Date :

Signature of Authorized Person

Place :

Name & Designation

Official Seal