



## Quick analysis form

**Exclusive bad-debts insurance with  
credit check system for freight forwarding and  
logistics companies**



For FIATA members only

**>> EFFECTS <<**  
**Quick analysis form for requesting a quote from  
 Coface Deutschland  
 for**

Company name and address: .....

.....

.....

Line of business: .....

Contact partner: .....

(Name / Tel. / Fax / E-mail) ..... / .....

.....@.....

- a) Turnover in the current business year  
 for 2007: in thousands of euros .....
- Turnover in the last business year  
 for 2006: in thousands of euros .....
- Turnover in the business year before last  
 for 2005: in thousands of euros .....

- b) *Business sectors of customers (please enter)*
- ..... - percentage of turnover: ..... %
- ..... - percentage of turnover: ..... %
- ..... - percentage of turnover: ..... %
- ..... - percentage of turnover: ..... %

Last complete business year: distribution of turnover by country

(please enter your main countries of business in the empty boxes)

Germany:	%		%		%
	%		%		%
	%		%		%
	%		%		%
	%		%	Other countries:	%

d) Average accounts receivable amount on the last day of the month (TOTAL):  
in thousands of euros .....

Average accounts receivable amount on the last day of the month above €10,000:  
in thousands of euros .....

Number of customers with an account receivable above €10,000: .....

e) Bad-debt losses (please enter number in box):

Year	Number of insolvencies		Amount of receivables upon cessation of payment in thousands of euros		Final loss in thousands of euros	
	Germany:	Abroad:	Germany:	Abroad:	Germany:	Abroad:
for 2007:						
for 2006:						
for 2005:						

f) Impending bad-debt losses: Number: ..... and total amount in thousands of euros .....

g) Bad-debts insurance since ..... (year) with (insurer)....., contract cancelled as of \_\_\_\_ . \_\_\_\_ . \_\_\_\_ ;

h) Particular circumstances / remarks:

.....  
.....  
.....  
.....  
.....  
.....

**Do you have any questions or do you need advice? Your contact partners are**

<b>Tobias Dassinger</b>	Tel.: +49 (0) 89 149708-470	dassinger@aktiv-assekuranz.de
	Fax: +49 (0) 89 149708-900	
<b>Frank Braun</b>	Tel.: +49 (0) 203 57066-24	braun@aktiv-assekuranz.de
	Fax: +49 (0) 203 57066-90	