



**coface**  
FOR TRADE

## CLAIMS FILING GUIDE

# CLAIMS FILING GUIDE

**With Coface North America Insurance Company you have protection of accounts receivable plus assistance in collection of slow accounts.**

This claims guide serves three purposes. It provides:

1. Guidance on dealing with slow accounts, both with and without the active involvement of Coface North America Insurance Company
2. The definition of insolvent accounts
3. Procedures for filing a claim

Use of this guide has helped many of our policyholders prevent delinquent accounts from becoming uncollectible.

## SLOW PAYING ACCOUNTS

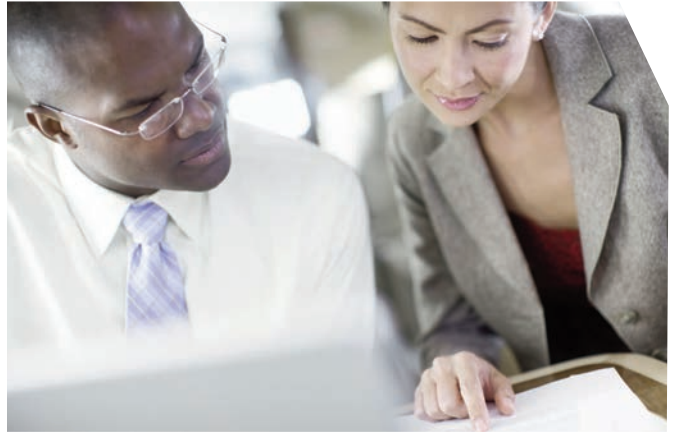
All firms are occasionally confronted with slow or past due accounts and attempts at collecting these can be troublesome and time consuming. In such instances, the introduction of a third party can be helpful. Many of our policyholders find it advantageous to notify their customers that accounts are insured. Coface can provide you with labels (shown below) to attach to delinquent account statements. Often this is all that is necessary to enforce prompt payment.

Should a debtor fail to respond to your customary past due notices, consider using the Past Due, Coface Filing and Planned Action letters that are provided in the Collection Procedures section at the end of this guide. Letter templates are available online, and many policyholders automatically begin using them when an account is 30 days past due.

Our accounts  
Insured by:  
Coface North America  
Insurance Company

**coface**  
FOR SAFER TRADE

**Our business is to protect yours.**



## INSOLVENT ACCOUNTS

**Your policy requires that insolvent accounts be submitted to Coface North America Insurance Company not more than 20 days after you acquire knowledge of the insolvency. As the policy definition of insolvency is quite broad, we suggest you familiarize yourself with it.**

### Insolvency Defined

Insolvency or Insolvent means when any one or more of the following has occurred:

- A. The debtor has been declared bankrupt or its liquidation has been ordered by a court of the judiciary.
- B. Collective proceedings aimed at avoiding bankruptcy or judicial liquidation have been instituted in a court of the judiciary following which payments are ceased or suspended.
- C. The debtor shall have made in writing a general offer of amicable agreement or compromise to all his ordinary creditors for the settlement of his indebtedness with abatement thereof and this offer shall have been unanimously accepted.
- D. Possession shall have been taken of all of the debtor's assets under a chattel mortgage given thereon or a bona fide transfer thereof by the debtor for the benefit of his creditors.
- E. All of the debtor's assets shall have been sold under writ of execution or such writ shall have been returned unsatisfied in the absence of any assets in the debtor's country.

To facilitate handling and avoid late filing, we suggest you notify us immediately upon acquiring knowledge of insolvency of an insured account.

# FILING PAST DUE ACCOUNTS

## NOTIFICATION OF OVERDUE ACCOUNT (NOA)

Unfortunately, there will always be the occasional debtor who will not remit payment as requested. In such cases, consideration should be given to placing the account with us for recovery. Accounts placed with Coface North America Insurance Company not more than three (3) months past due under the original terms of sale will be admitted as a claim, subject to all terms and conditions of the policy. However, insolvent accounts must be filed with Coface North America Insurance Company not more than 20 days after you have acquired knowledge of the insolvency.

The following procedure should be followed when filing an account:

1. Complete the Notification of Overdue Account (NOA) steps in Cofanet. To get started, select the company from your Portfolio. From the "Company Details" screen, select "Notification of Overdue Account" and then "New Claim Case."
2. Please complete all required fields and upload supporting documents. You will receive an acknowledgement of each NOA that you enter in Cofanet.
3. Do not take any further action or accept any compromise. All communications and payments should be referred to us.

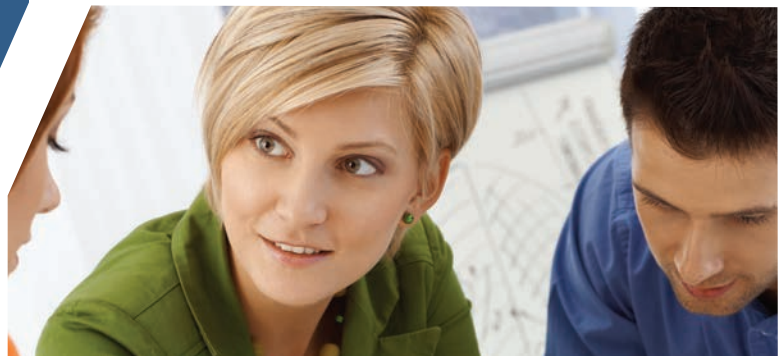
A step-by-step guide to filing a claim in Cofanet can be found in the Client Toolkit section of [www.coface-usa.com](http://www.coface-usa.com) or in the Help section of Cofanet.

## NOA CHECKLIST

Our Credit Claims and Recovery team is here to assist you, from processing your claims for insolvent debtors to assisting you in recovering a past due account. In order to better serve you, we ask that you provide us with as much information as possible when you submit the NOA in Cofanet.

### Have you:

1. Completed the NOA in its entirety including debtor's correct corporate name, telephone number, original terms of sale, etc.?
2. Provided us with a complete itemized Statement of Account? (Invoices and/or proof of deliveries may be required as necessary.)
3. Provided us with a copy of the written Notice of Insolvency, if any, which was received from the court, trustee, attorney for the debtor, etc.?
4. Given us the details of your collection efforts (especially if this is a past due account)? Include comments from the debtor in response to your telephone inquiries, any correspondence received from the debtor regarding the account and your position in relation to it.
5. Provided a copy of any guarantee or security you hold on the account? By providing us with as much detailed information as possible, we will be in a better position to present your account to the debtor for payment, if past due, or ensure proper processing, if insolvent. Working together, we can assist you in gaining the most benefit from your credit insurance policy.



# FINAL STEPS

## FINAL STEPS FOR CLAIM PAYMENT

After you have completed the online NOA and provided the required supporting documentation to our Claims and Recovery Department as outlined on the policy Declaration Page, you will receive an acknowledgement letter from us (right.)

## FINAL STATEMENT OF CLAIM FORM

If you feel the claim has resulted in a loss payable under the terms and conditions of the policy, you must complete and submit a Final Statement of Claim Form (right.) This form must be completed and received by Coface North America Insurance Company in order to process a claim for payment. Templates for the Final Statement of Claim Form are available in the Client Toolkit section of [www.coface-usa.com](http://www.coface-usa.com), or you can request one by e-mailing [claims@coface.us](mailto:claims@coface.us).



Date \_\_\_\_\_

Ms. Jane Doe  
 ABC Manufacturing  
 123 Main Street  
 Anywhere, US 10000

Re: XYZ Company  
 Anywhere, US

Our file #123456

Dear Policyholder:

We acknowledge receipt of your Notification of Claim against the captioned debtor in accordance with your policy. The account will have our careful and prompt attention.

This account will be handled in accordance with the terms and conditions of your policy of Credit Insurance. If you have any questions, please call us at the number shown below. Should you feel this claim has resulted in a loss payable under your policy, you should request and complete a Final Statement of Claim form specified in your policy.

Sincerely,

Coface North America Insurance Company

COFACE NORTH AMERICA INSURANCE COMPANY  
 50 MILLSTONE ROAD - BUILDING 100, SUITE 380 - EAST WINDSOR, NJ 08520 - USA  
 Toll-free: +1 (877) 626-3225 - T: +1 (609) 489-0400 - F: +1 (609) 490-1581  
 cofaceusa@coface.com - www.coface-usa.com

### FINAL STATEMENT OF CLAIM UNDER CREDIT INSURANCE POLICY

Insured: \_\_\_\_\_ (the "Insured"),

Credit Insurance Policy No.: \_\_\_\_\_ (the "Policy").

This Statement of Claim is filed by the undersigned with COFACE NORTH AMERICA INSURANCE COMPANY (the "Company"), at its office in East Windsor, NJ under the provisions of the above referenced Policy issued by the Company. Neither the Company's retention or acknowledgment of this Statement of Claim, nor the Company's failure to acknowledge its receipt hereof, or to object to any claim, statement or matter enumerated herein, shall be held to be a waiver by the Company of any provisions of the Policy or of any defect or omission in this Statement.

**All columns must be completed and the affidavit set forth below must be fully executed. Insured shall cooperate with the Company in the administration of any claim and shall provide any and all such additional information and documentation as the company may require.**

Name & Location of Debtor	Date of shipment	Original terms of sale	Date of insolvency	Date of recall - call of insolvency	Amount of indebtedness at date of insolvency	Total reduction of indebtedness since date of insolvency	Net covered amount claimed

**AFFIDAVIT**

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

The affiant \_\_\_\_\_ first being duly sworn under oath, deposes and states that s/he is \_\_\_\_\_ of the Insured and is duly authorized to make and submit this Statement and claim on the Insured's behalf the sum of \$ \_\_\_\_\_ as an account loss under the Policy. Affiant further deposes and states that s/he has undertaken all due inquiry and that each and every statement and particular set forth in the foregoing Statement of Claim is true and correct to the best of her/his knowledge and that all claims for losses include only the unpaid purchase price of merchandise sold and delivered by the Insured and either owned by the Insured or on which the Insured had assumed liability and that none of the losses heretofore specified is covered by any policy, contract or bond of indemnity issued by any other company. Affiant further deposes and states that the total gross sales for the entire Policy Term, after deducting items specifically excluded amount to \$ \_\_\_\_\_.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. By: \_\_\_\_\_

Affiant \_\_\_\_\_

Notary Public: \_\_\_\_\_

Notary Seal \_\_\_\_\_

# COLLECTION PROCEDURES

## 30 DAYS PAST DUE

If your customary past due notices are not achieving a satisfactory response from your debtor, we suggest that a version of Letter #1 (right) be mailed at 30 days past due. **All letters shown are available for download from the Client Toolkit section of our website, [www.coface-usa.com](http://www.coface-usa.com).**

## 45 DAYS PAST DUE

Letter #1 generally brings about the desired response. However, should it fail, we suggest the use of a Credit Filing Notice to the policyholder from Coface North America (Letter #2, right) when a delinquent account is 45 days past due. Coface can assist you in preparing a Credit Filing Notice. We will write the letter and send it to you at your request and without cost. It does not authorize us to begin recovery proceedings nor does it constitute filing of the account as a claim. If you wish us to prepare such a letter, merely furnish your agent or our Claims and Recovery Department with the name and address of the debtor and the amount owed. You will then receive the proper version of a Credit Filing Notice #2.

The Credit Filing Notice should be forwarded to the debtor accompanied by a letter from you. You might consider a version of the sample we have provided. See Letter #3 - Planned Action Notice on the right.

## FINAL STEP

If an immediate response is not received to the Credit Filing Notice, we recommend one final step prior to filing the account as a claim with Coface North America Insurance Company. A duplicate statement can be sent to the debtor with the "Important!" notice (right) attached. This notice can be obtained from your agent. While many of our policyholders consider this the final step before placing the account with us, some elect to follow it with a telephone call.

## LETTER #1 PAST DUE NOTICE

J.R. Corporation  
Elmhurst, New York

Date

DEF Manufacturing Company  
123 Main Street  
Anytown, U.S.A.

To Whom It May Concern:

We carry a policy of credit insurance with Coface North America Insurance Company and under the terms of our contract, our delinquent accounts are turned over to them for recovery.

Your account with us shows \$3,456.00 now past due. We are reluctant to notify Coface North America Insurance Company of this fact, but must do so unless we receive your payment at once.

Very truly yours,

J.R. Corporation

## LETTER #2 COFACE FILING NOTICE

Coface North America  
50 Millstone Road  
Building 100, Suite 360  
East Windsor, NJ 08520

Date

Policyholder's name  
Address  
City, State

Debtor's Name  
City, State  
\$ Amount

Dear Sir or Madam:

Your report shows that the above mentioned account is past due. We do not question the financial standing or paying ability of the debtor. We take into consideration only the fact that the amount has not been paid.

Please note the provision of your Policy of Credit Insurance, which sets forth the time limits on filing past due accounts with Coface North America Insurance Company for recovery.

To take advantage of that particular provision, the account must be filed for recovery within the time stipulated.

Yours very truly,

Coface North America Insurance Company

## LETTER #3 PLANNED ACTION NOTICE

J.R. Corporation  
Elmhurst, New York

Date

Mr. J.M. Debtor  
DEF Manufacturing Company  
123 Main Street  
Anytown, U.S.A.

Dear Mr. Debtor:

In simple language, we are on the spot. Unless we receive a remittance from you by return mail to put your account on a current basis, we must take some action as indicated by the attached letter from our insurance company or we must carry the risk ourselves. We feel that we cannot afford to carry the risk ourselves, having paid the premium for this coverage.

We hope that you will cooperate by sending us your check in the amount of \$3,456.00 to clear our books of this past due account so we will not have to file the account as a claim with Coface North America Insurance Company.

Very truly yours,

Robin Smith

## FINAL STEP

**Important!!!!**

We would appreciate receiving your remittance for \$.....before .....

Under the terms of our Credit Insurance policy with Coface North America Insurance Company, we must turn the account over to them unless your remittance is received by the above date.

Remittance NOW will avoid this.

CR 236 Printed in U.S.A.



## WE'RE HERE TO HELP

**Coface North America Insurance Company's credit insurance agents are highly skilled professionals. Their long associations with many industries have given them knowledge and experience that can help you to obtain the maximum value from your policy. Please feel free to contact your agent at any time. He or she will welcome the opportunity to assist you.**



### **IN THE USA**

#### **COFACE NORTH AMERICA INSURANCE COMPANY**

650 College Road East  
Suite 2005  
Princeton, NJ 08540  
[www.coface-usa.com](http://www.coface-usa.com)

### **IN CANADA**

#### **COFACE S.A.**

251 Consumers Road  
Suite 910  
Toronto, ON M2J 4R3  
[www.coface.ca](http://www.coface.ca)

Tel: 1-877-626-3223

E-mail: [cofaceusa@coface.com](mailto:cofaceusa@coface.com)



The Coface logo features the word "coface" in a lowercase, sans-serif font. The "co" is in a dark blue color, and the "face" is in a lighter blue color. The "o" in "co" is stylized with a green circular element.

This brochure is for illustrative purposes only and is neither an offer nor a contract. It is intended to provide a general overview of the policy described. Only the policy can provide the actual terms, coverages, amounts, conditions and exclusions. All coverages not available in all states.