**COMPAGNIE FRANCAISE D‘ASSURANCE POUR LE COMMERCE EXTERIEUR**

**acting through**

**the Baltics filialas of**

**COMPAGNIE FRANCAISE D‘ASSURANCE POUR LE COMMERCE EXTERIEUR**

**To the** Director

**Mindaugas Sventickas**

**REQUEST FOR**

**PAYMENT OF PROFIT COMMISSION (NO CLAIMS BONUS)**

**ACCORDING TO THE TERMS OF INSURANCE CONTRACT No xxx**

In line with the terms of the trade credit insurance contract No **xxxx,** we hereby request to pay the profit commission (bonus) for the insurance period \_\_\_\_\_\_\_\_\_.

1. We hereby confirm that the insurance contract **No xxx** was extended for a new insurance period.
2. We hereby confirm that the insurance risk for the insurance period **xxx - xxx** has expired (i.e. there are no/will not be any notifications, claims or benefits associated with the insurance period that has ended). Should any of the circumstances referred to in this paragraph appear, we shall be obligated to refund the profit commission (bonus) received from the Insurer.
3. We would prefer to receive the bonus:

[ ]  by remittance to the banking account:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of the bank/ bank account number

[ ]  by offsetting it against the imminent insurance premium.

Policyholder

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name, Surname, signature, date)