

APPENDIX 6

CLAIM FOR PAYMENT (INDEMNITY PROCEEDS)

Attached to the Decision No 08/2021/QĐ-SGIHN dated 05/04/2021)

Claim for Payment(Indemnity Proceeds)



To Seoul Guarantee Insurance Company – Hanoi Branch Office

Description of Bond

Bond No. _____

Principal _____

Beneficiary _____

Bond Amount _____

Bond Period _____

I/We, the Beneficiary(ies), hereby file a claim for Indemnity Proceeds payment in regard to the Bond above.

Claim Details

Claim Amount _____

Reason of Claim _____

Stating in what respect the Principal is in breach of his/her obligations

Bank Account Details

Bank Name _____

Account Holder _____

Account No.
(or IBAN Code) _____

SWIFT Code _____

※ Attachment :

1. The Bond or a copy thereof
2. A document(s) identifying the Beneficiary
3. A copy of the Underlying Contract
4. A Written Statement of the Principal's Breach of the Underlying Contract
5. A document(s) specifying the loss
6. Other document(s) required by the Company
7. A copy of Bank Account for remittance

YYYY /MM/DD

Beneficiary

Company _____

Stamp of Company(if only)

Representative _____

Authorized Signature and/or Seal of Company

Address _____

Person in Charge _____

Job Title _____

Department _____

Contact Details Tel _____

_____ Fax : _____
 _____ e-mail : _____

※ Attachment :Certificate of Registered Company Seal of the Beneficiary or equivalent certificates

Claim for Indemnity Proceeds of Personal Loan Bond



To Seoul Guarantee Insurance Company – Hanoi Branch Office

Description of Bond

Bond No. _____
 Principal _____ Beneficiary _____
 Bond Amount _____ Bond Period _____

I/We, the Beneficiary(ies), hereby file a claim for Indemnity Proceeds payment in regard to the Bond above.

Claim Details

Claim Amount _____ Date of Loss : _____
 Reason of Claim *Stating in what respect the Principal is in breach of his/her obligations*

Bank Account Details

Bank Name _____ Account Holder _____
 Account No. _____ SWIFT Code _____
 (or IBAN Code)

- ※ Attachment :
1. The Bond Certificate
 2. A document(s) identifying the Beneficiary
 3. An original copy of Application for Personal Long Bond
 4. A copy of the Underlying Contract-loan agreement
 5. Documents evidencing qualifications of the Principal
 6. Documents identifying the Principal as the Bond principal
 7. A document(s) evidencing the loss (such as statement of claims, payment slip of principal of loans and interest occurred on such principal, etc.)
 8. Documents confirming other collateral which the Beneficiary has
 9. A copy of the document demanding repayment of debt
 10. A copy of the document demanding repayment of debts
 11. Other document(s) required by the Company
 12. A document certifying the Beneficiary's Bank Account for remittance

YYYY/MM/DD

Beneficiary

Company _____ *Stamp of Company(if only)*
 Representative _____ *Authorized Signature and/or Seal of Company*
 Address _____

Person in Charge	_____	Job Title	_____
Department	_____	Contact Details	Tel : _____ Fax : _____ e-mail : _____

※ Attachment :Certificate of Registered Company Seal of the Beneficiary or equivalent certificates