

本商品經本公司合格簽署人員檢視其內容業已符合保險精算原則及保險法令,惟為確保權益,基於保險業與消費者衡平對等原則,消費者仍應詳加閱讀保險單條款與相關文件,審慎選擇保險商品。本商品如有虛偽不實或違法情事,應由本公司及負責人依法負責。

總公司:台北市敦化南路二段 39 號 8 樓 A 室 電話: (02)2322-9000 免費客服及申訴電話: 0800-771-168 網址: http://www.eulerhermes.tw 如欲查詢本公司資訊公開說明文件之內容,請至本公司網址: http://www.eulerhermes.tw 查詢

Fuler Hermes Credit Insurance WFP

Risk Service - Flat Fee Endorsement - 328RSFF01

保單條款

108年11月01日裕利安宜108發字第0153號函備查

Risk Service - Flat Fee Endorsement

You and we agree that:

- For the purposes of this Endorsement, "Basis Date" means (date);
- You appoint the Risk Service Provider mentioned in section 5 of the Special Terms to perform the preliminary investigations necessary to issue Approved Limits (including nil limits) on the Buyers covered under the Policy, and to perform the monitoring of the related risk.
- According to the terms of the **Policy**, and using the approved means of communication, you must submit a limit request to us. This limit request is deemed to be, at the same time, a formal request by you to the Risk Service Provider to perform the services mentioned in section 1.
 - You accept that the services of the Risk Service Provider are completed once the results of the investigations have been submitted to us other than any agreed ongoing monitoring services. You also accept that the Risk Service Provider has no obligation to disclose any information regarding the **Buyer** to you which has been obtained on a confidential basis from third parties. We acknowledge that we will be deemed to know all the knowledge of the Risk Service Provider and we will not take issue with the accuracy and sufficiency of the information provided to us by the Risk Service Provider as against you.
- 4. You agree to pay to the Risk Service Provider the following fees for its services.



Policy Number	Policyholder Name	Policyhold er country	Flat Fee in MA curren cy	Flat Fee in policy currenc y	Exchan ge rate (date)

All amounts exclude VAT.

The flat fee specified in the Table above will apply to each Insurance Period.

- 5. If at the end of each Insurance Period, the number of **Approved Limits** under the **Policy** is:
 - 5.1 greater than (XX)% of the number of **Approved Limits** at the Basis Date, we have the right to review the flat fee specified in the Table above, and
 - 5.2 lower than (XX)% of the number of **Approved Limits** at the Basis Date, you have the right to request us to review the flat fee specified in the Table.
- 6. You recognize that the Risk Service Provider is entitled to take all steps necessary to obtain payment of fees from you.
 - You agree that we are authorised to offset any sum that we owe you according to the terms and conditions of the **Policy**, with any sum that you owe the Risk Service Provider.
- 7. The parties agree that all disputes arising under or in connection with the provisions of this endorsement will preferably be settled amicably. If any dispute cannot be resolved amicably, it will be resolved by arbitration proceedings in accordance with the provisions set out in the **Special Terms**.