



# Trade Credit

## Request for Joint Principal Form

If You require a Joint Principal to be added to Your policy please complete all sections and sign the declaration below. This request will automatically continue in respect of subsequent policies unless We receive instructions to the contrary.

## Section 1

Insured name:

Policy Reference:

Effective Date Required:

## Section 2

Name of Joint Principal:

Address of Joint Principal:

Contact of Joint Principal:

Email of Joint Principal:

## Declaration

By signing below You authorise Us to enter into a Joint Principal Agreement which once completed by You and the Joint Principal and returned to Us will give the Joint Principal the right to take over the above referenced policy and all subsequent policies with Tokio Marine HCC in the event of Your own Insolvency, until You and the Joint Principal confirm otherwise.

Authorised Signature:

Name of Signatory:

Position in Company:

Date:

## Customer Relations

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