TradeCollect/TradeLegals Reimbursement form





 $Please\ return\ the\ completed\ form\ to\ \underline{tradecollect\&tradelegalsreimbursements@qbe.com}$

Name of insured					
Policy number					
Debtor's name					
Debtor's Co. Registration No.					
Total legal expenses incurred \$		(exclusive of GST)			
Detailed breakdown of expenses:	Nature of expense			Amount \$ (ex GST)	GST amount \$
Did you obtain a costs order in your favour?	Yes No If 'Yes', please provide full details including any money received from the debtors for such costs.				
If 'Yes', how much? \$					
Collection agent and/or solicitors used					
Date debt placed (dd/mm/yyyy)					
Amount claimed \$					
We wish to seek reimbursement of our debt collection fees associated with the above loss that we have incurred. We attach evidence of all expenses incurred (e.g. invoices) along with confirmation of payment (e.g. statement or receipt) in endeavouring to collect the amount owed to us by the above debtor.					
Designation of incomed and signature					
Declaration of insured and signature We out horizon you to obtain any dataile from our collection are at and/or collectors in relation to this matter. The information given borein and the					
We authorise you to obtain any details from our collection agent and/or solicitors in relation to this matter. The information given herein and the attachments are to the best of our knowledge and belief true and correct in every particular.					
Full name of company					
Signature of authorised signatory			Dat	te (dd/mm/yyyy)	
Name of authorised signatory					
Position in company					

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