



# FOREIGN FUNDS INSURANCE REQUEST FORM

\*Completed request form can be submitted to [InsurancePoliticalRiskInsurance@edc.ca](mailto:InsurancePoliticalRiskInsurance@edc.ca) or faxed to 613-598-2775

<b>1 CUSTOMER INFORMATION</b>	
<b>Legal Name of Customer:</b>	
<b>Address:</b> <i>(Street, City, Province, Country and Postal Code)</i>	

<b>2 CONTACT INFORMATION</b>			
<b>Name:</b>	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs.	<b>Title:</b>	
<b>Telephone:</b>		<b>Fax:</b>	
		<b>Email:</b>	

<b>3 COVERAGE REQUEST</b>	
<b>Currency Transfer &amp; Conversion:</b> Foreign government actions resulting in the inability to convert foreign currencies into hard currencies and/or the inability to transfer such hard currencies out of the foreign country of risk.	
<b>Coverage amount required:</b>	Amount: <input type="checkbox"/> USD <input type="checkbox"/> CAD <input type="checkbox"/> EUR
<b>Coverage start date and duration of coverage:</b>	<i>(dd/mm/yyyy)</i> years

<b>4 FUNDS (the "Funds")</b> <i>(Covering funds in foreign bank accounts)</i>	
<b>Specific location where the Funds will be located (including country):</b>	
<b>Description of the scope and nature of the activities in respect of which the Funds are being used:</b>	
<b>Are the Funds owned by a foreign affiliate?</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes If Funds are owned by your Foreign Affiliate: Foreign Affiliate Legal Name: Your ownership percentage in your Foreign Affiliate:
<b>Have any of the Funds been pledged as security?</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes
<b>Are any of the Funds covered by property and casualty insurance?</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes
<b>Are you aware of any significant environmental risks associated with any business which would be the subject of this Request Form?</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes

## 5 DECLARATION, CONSENT AND SIGNATURE

The information contained in this Request Form is true and correct, and we acknowledge that EDC is entitled to deny liability under any insurance policy which may be issued to us in relation to this Request Form (the "Policy") in the event that this Request Form contains a misrepresentation that is material to the Policy. We have fully described to EDC all circumstances material to the Funds and their intended use, and we are not aware of any circumstances relating to the Funds or their intended use which might give rise to a claim or loss under the Policy or adversely influence EDC's decision to issue the Policy, except as disclosed in this Request Form or other submitted documentation (including documentation submitted to EDC via email). We have made due inquiry of all employees and other persons within our business, and if applicable, within your Foreign Affiliate's business and any other relevant affiliate's business, having the requisite knowledge of the Funds to provide the information and make declarations contained in this Request Form. If we become aware of any such circumstance before the issuance of a Policy, we will immediately advise EDC as to all matters within our knowledge in that regard.

We understand that Canadian Government policy calls for the denial of government support and assistance with respect to transactions where the parties have agreed to accept boycott provisions in contravention of this policy. We have read EDC's information sheet on [Boycott Activities Prohibited by the Government of Canada's policy on International Economic Boycotts](#) (located on EDC's website, [www.edc.ca](http://www.edc.ca)). We declare that we do not and will not engage in, any transaction relating to any Investment or Asset which may be covered under a Policy, which requires us to: (1) engage in discrimination based on the race, national or ethnic origin or religion of any Canadian company or individual; (2) refuse to purchase from or sell to any other Canadian company or individual; (3) refuse to sell Canadian goods to any country; (4) refrain from purchases from any country; or (5) restrict our commercial investment or other economic activity in any country. We also acknowledge and agree that if the foregoing declaration is or becomes untrue, EDC reserves the right to impose sanctions on us as EDC deems appropriate and reasonable in the circumstances, including, refusing to provide us with future support.

We consent and agree to EDC's disclosure of (1) all non-publicly available information provided to EDC in connection with the requested Policy and (2) any Policy (such information in (1) and (2) is referred to as the "Information") (a) to EDC's shareholder, employees, officers, directors, brokers, agents, advisors, consultants, legal counsel and potential or actual reinsurers, insurers and co-insurers (including affiliates, directors, officers, employees, professional advisors, auditors, reinsurers, or agents of any such reinsurers, insurers or co-insurers), (b) pursuant to the requirements of law, regulation, legal process and audit, (c) pursuant to EDC's and Canada's international commitments, and (d) to the extent required for EDC to comply with applicable laws. Moreover, we agree that personal information may be collected, used and disclosed in accordance with the Privacy Act (Canada)(R.S.C., 1985, c. P-21) The foregoing consent will serve as our written consent to disclose the Information for the purpose of any present or future confidentiality agreement between us and EDC (notwithstanding anything to the contrary contained in any such confidentiality agreement) or for the purpose of any applicable laws.

We acknowledge that additional information may be required by EDC before the issuance of a Policy and agree that any such additional information will form part of this Request Form.

**We have explicitly requested that this form be drafted in the English language. Nous avons expressément demandé et accepté que le présent formulaire soit rédigé dans la langue anglaise.**

**IN WITNESS WHEREOF**, the Customer hereby certifies the truth and accuracy of all information contained in this Request Form, and affixes its corporate signature, attested by its proper officer on its behalf.

**AUTHORIZED SIGNATURE**

**NAME AND TITLE (PRINT)**

**DATE** (dd/mm/yyyy)