

## Application for Standby Letter of Credit (SBLC)/ Letter Of Guarantee (BG)/Letter of Indemnity

To: Sumitomo Mitsui Banking Corporation Yangon Branch

Date: \_\_\_\_\_

Bank Ref No.: \_\_\_\_\_

Dear Sirs

I/We hereby request your Bank to issue a Standby Letter of Credit/Letter of Guarantee/Letter of indemnity (referred to herein as a Credit Support) as follows on the Terms found as indicated below which we have read, understood and agree to.

<u>Applicant's Information</u>	<u>Beneficiary's Information</u>
Applicant's Name: _____	Beneficiary's Name: _____
Applicant's Address: _____	Beneficiary's Address: _____
	Country: _____
Contact Person: _____	Contact Person: _____
Tel No. : _____	Tel No. : _____
Fax No. : _____	Fax No. : _____
Email: _____	Email: _____
<b>Issuance Instruction</b>	
Please issue as per attached:	
<input type="checkbox"/> SBLC/BG/Indemnity format. (Trade Finance) <a href="https://www.smbc.co.jp/asia/myanmar/forms/trade-terms.pdf">https://www.smbc.co.jp/asia/myanmar/forms/trade-terms.pdf</a>	
<input type="checkbox"/> SBLC/BG/Indemnity format. (Non-Trade Finance) <a href="https://www.smbc.co.jp/asia/myanmar/forms/BG-SBLC-non-trade-finance-terms.pdf">https://www.smbc.co.jp/asia/myanmar/forms/BG-SBLC-non-trade-finance-terms.pdf</a>	
Bank Name: _____	
SWIFT BIC Code: _____	
<b>Delivery Instruction for Domestic Beneficiary (additional charges may apply)</b>	
<input type="checkbox"/> Advising Bank Name _____	
SWIFT BIC Code: _____	
<input type="checkbox"/> Hold for Applicant's collection _____	<input type="checkbox"/> Send via Courier _____

**Transaction Details**

Currency &amp; Amount: \_\_\_\_\_

Effective Date: \_\_\_\_\_

Tolerance (%): \_\_\_\_\_

Claims may be presented no less than

Expiry Date: \_\_\_\_\_

 expiry date

Expiry at (Location): \_\_\_\_\_

 \_\_\_\_\_ days after expiry date

Purpose:

(Please indicate goods origin and shipment details when applicable)

**Charges:** Debit all amounts payable by the Applicant from the Applicant's account number:**For and on behalf of**\_\_\_\_\_  
Company's Chop & Authorized Signature  
Name:

## Section for Our Bank Use

Unit In Thou:	Customer ID.:	F. Amt	Y	N	Fee:
Credit Line:	Limit Ref:	P. Type	B	E	
Utilized Bal.:	GM/Delegate	Approve Execution	Signature Verified		
Unused Bal.:				US\$ Checklist	Y N
Term	Last draw date:			Close+Open	Y N Rate of:

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Fax No. : _____	Fax No. : _____
Email: _____	Email: _____
<b>Issuance Instruction</b>	
Please issue as per attached:	
<input type="checkbox"/> SBLC/BG/Indemnity format. (Trade Finance) <a href="https://www.smbc.co.jp/asia/myanmar/forms/trade-terms.pdf">https://www.smbc.co.jp/asia/myanmar/forms/trade-terms.pdf</a>	
<input type="checkbox"/> SBLC/BG/Indemnity format. (Non-Trade Finance) <a href="https://www.smbc.co.jp/asia/myanmar/forms/BG-SBLC-non-trade-finance-terms.pdf">https://www.smbc.co.jp/asia/myanmar/forms/BG-SBLC-non-trade-finance-terms.pdf</a>	
Bank Name: _____	
SWIFT BIC Code: _____	
<b>Delivery Instruction for Domestic Beneficiary (additional charges may apply)</b>	
<input type="checkbox"/> Advising Bank Name _____	
SWIFT BIC Code: _____	
<input type="checkbox"/> Hold for Applicant's collection _____	<input type="checkbox"/> Send via Courier _____

**Transaction Details**

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Utilized Bal.:	GM/Delegate	Approve Execution	Signature Verified		
Unused Bal.:				US\$ Checklist	Y N
Term	Last draw date:			Close+Open	Y N Rate of: