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| APPLICATION FOR AMENDMENT TO DOCUMENTARY CREDIT | | Credit Number | Date |
| Advising Bank (if known) | | Applicant (name and address) | |
| Beneficiary | | Present amount of credit | |
| | | Present expiry | |
| Dear Sirs, Please amend the above credit as follows : | | For Bank's Use | |
| <input type="checkbox"/> by air mail <input type="checkbox"/> by cable | | Mailed | Cabled |
| Increase the amount of the credit by making a new total of _____ in all | | Local Currency | |
| Extend expiry date to | | Acknowledged | |
| Extend shipment date to | | | |
| Other amendments | | | |
| All other items and conditions remain unchanged. | | | |
| Please debit all charges to our Account No. | | | |
| We attach <input type="checkbox"/> Increased insurance policy / certificate | | NOTICE TO THE APPLICANT | |
| | | We wish to draw your attention to Articles 10c of UCP 600 and advise you to obtain the beneficiary's express consent to the proposed amendment prior to issuance of the amendment. | |
| I/We certify that I/We hold a valid import licence sufficient to cover any increase contained in this amendment where such licence is required. | | For Bank's Use | |
| | | Additional Margin | % |
| | | Commission | % |
| | | Telegrams | |
| | | Postage | |
| | | TOTAL | |
| Signature of applicant | | Signature Verified | Entry Passed Approved |