



Mizuho Bank

**APPLICATION FOR IRREVOCABLE DOCUMENTARY CREDIT (LETTER OF CREDIT)**  
(Electronic format)

To: Mizuho Bank, Ltd., Singapore Branch

Date: 19/08/20 XX

Our Reference: (Please provide)

(ALL FIELDS MARKED WITH \* ARE MANDATORY)  
(Please complete and tick the applicable boxes)

We hereby apply for the issuance of a letter of credit based on particulars set herein below and agree that such application be subject to all terms and conditions appearing herein and all the terms and conditions governing this Application, including the Terms and Conditions governing Application for Irrevocable Documentary Credit (collectively, "Terms and Conditions"), and the provisions of any other applicable agreement(s) made between you and us in connection with or relevant to the transaction herein. We understand and agree that the Bank may modify the Terms and Conditions without prior notice to us at any time.

ADVISING BANK (NAME & SWIFT/MAILING ADDRESS) (COMPLETE IF FOR A PREFERRED BANK OR TO ADD CONFIRMATION) 3 HONGKONG BANK LTD. XYZBUS 61 PEDDER ST. BRANCH, HONG KONG		*BENEFICIARY'S NAME AND ADDRESS 4 ABC LTD. 12 PEDDER ST. CENTRAL HONG KONG		*APPLICANT (refers to Applicant in Letter of Credit) (ADDRESS REQUIRED FOR 3RD PARTY) 5 XYZ Pte. Ltd. 12 MARINA VIEW, # 08-01 ASIA SQUARE TOWER 2 SINGAPORE 018961, REPUBLIC OF SINGAPORE	
THIS LETTER OF CREDIT IS ISSUED AS NON TRANSFERABLE WITHOUT CONFIRMATION BY YOUR CORRESPONDENT BANK UNLESS INDICATED BELOW: 6 <input type="checkbox"/> TO BE TRANSFERABLE 7 <input type="checkbox"/> TO ADD CONFIRMATION		*LATEST SHIPMENT DATE 8 30/09/20 XX		*CURRENCY AMOUNT USD - US Dollar 9 411,840.00	
*TENOR: <input checked="" type="checkbox"/> SIGHT / <input type="checkbox"/> _____		*PARTIAL SHIPMENT 12 <input checked="" type="checkbox"/> ALLOWED <input type="checkbox"/> PROHIBITED		*TRANSHIPMENT 13 <input type="checkbox"/> ALLOWED <input checked="" type="checkbox"/> PROHIBITED	
PRESENTATION PERIOD: 16 WITHIN 15 DAYS AFTER <input checked="" type="checkbox"/> BL / <input type="checkbox"/> AWB BUT WITHIN THE VALIDITY OF LETTER OF CREDIT *(BL= BILL OF LADING, AWB = AIRWAY BILL)		TRADE TERMS: 17 <input type="checkbox"/> FOB <input checked="" type="checkbox"/> CIF <input type="checkbox"/> OTHERS: _____		FROM (PORT OF LOADING / PLACE OF RECEIPT) 14 SINGAPORE  TO (PORT OF DISCHARGE/PLACE OF DESTINATION) 15 HONG KONG	
*MERCHANDISE (GENERAL DESCRIPTION) 18 SYNTHETIC RESIN AND RUBBER SSR -115 2,157 KGSS SSU -223 2,757 KGS AS PER CONTRACT NO. K -21334					

19 GENERAL CONDITIONS (Unless otherwise indicated in the box provided)  
 This Letter of Credit is issued by teletransmission for full text unless indicated:  With brief preliminary messages and full text to follow

20 TT reimbursement is prohibited unless indicated  Acceptable and for Beneficiary's account unless indicated as  FOR OUR ACCOUNT

21 All Banking Charges including reimbursement charges are for Beneficiary's account unless indicated  FOR APPLICANT'S ACCOUNT

22 Credit available BY  PAYMENT /  NEGOTIATION /  ACCEPTANCE /  DEFERRED PAYMENT with any Bank unless indicated  AVAILABLE WITH \_\_\_\_\_  
 as available BY BENEFICIARY'S DRAFT drawn on you or your Correspondent Bank

\*DOCUMENTS REQUIRED

23  DRAFT FOR  100% VALUE  \_\_\_\_\_ % Value of invoice

24  Full set / \_\_\_\_\_ / 3 of original Clean on Board Ocean Bill of Lading together with  non-negotiable copies indicating the Letter of Credit No. 26

25  Made to Order of  your Bank /  of shipper & blank endorsed, / or  specially endorsed to the Bank, Marked " Freight Prepaid /  Payable at Destination".  
 Notify  Applicant and / or  other party \_\_\_\_\_

27  Original Airway Bill indicating the Letter of Credit No.: consigned to the Bank Marked " Freight Prepaid /  Payable at Destination".  
 Notify  Applicant and / or  other party \_\_\_\_\_

28  Insurance Policy or Certificate in duplicate, blank endorsed for 110% of invoice value, covering Institute Cargo Clause (FPA/WA/ALL Risks), Institute War Clauses & Institute Strikes Riots and Civil Commotions Clauses with claims payable at destination in the same currency of this Letter of Credit and indicating the name and address of a claim agent of destination

29  Signed Commercial invoice in \_\_\_\_\_ originals and \_\_\_\_\_ copies

30  other documents (please specify) \_\_\_\_\_

\*SETTLEMENT

31  Debit our account with you \_\_\_\_\_ (account no/cy)  Others: \_\_\_\_\_

(Party to whom credit facility is granted by Bank (the "Customer"))  
 We agree that this Application, the Letter of Credit to be issued hereunder and any amendments to the Letter of Credit so issued, shall be governed by the provisions of the Uniform Customs and Practice for Documentary Credits, ICC Publication No. 600 ("UCP 600") or any revision thereof applicable at the time of this Application and the terms stated herein. Where the Letter of Credit permits reimbursement by the nominated bank, such reimbursement is subject to Uniform Rules for Bank-to-Bank Reimbursement under Document Credits, ICC Publication No.: 525, or any revision thereof applicable at the time of this Application.  
 Contact Person:  
 Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

32  
 Authorised Signatory(ies) (Company Stamp, if any)

(This is to be completed if a third party is to be the Applicant in the Letter of Credit)  
 As this Application is made at our request and on our behalf, we shall by our signature below be bound to indemnify the Bank as joint obligor for all losses, damages, payments, costs (including legal cost on a full indemnity basis), expenses and interest incurred or to be incurred in connection with the issuance of the Letter of Credit applied for herein and shall be jointly and severally liable with the Customer in respect of such indemnification. We hereby agree to and accept all the terms and conditions set out in or governing this Application, including the Terms and Conditions and the provisions of any other applicable agreement(s) made between and/or amongst the Customer, you and/or us in connection with or relevant to the transaction herein which shall apply mutatis mutandis to us.

33  
 Authorised Signatory(ies) (Company Stamp, if any)  
 (Name and Designation) (FOR 3RD PARTY COUNTER SIGNATURE)

For Bank Use:

GM	JGM	SH	GM	JGM	SH
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Please fill in the bold frame (In the case of  please mark ).

Number	Item name	Contents
1	Date	Fill in the date of your request.
2	Our Reference	If there is your reference number other than the bill number, fill in
3	ADVISING BANK	Only fill in if you specify. Fill in SwiftBIC code, branch name, city and country not just the bank name
4	BENEFICIARY	Fill in beneficiary name, address and country (Enter the name and address in full) If only the name of the city is used, the notification may not be possible due to a lack of address, and the advising bank may inquire about it.
5	APPLICANT	APPLICANT name of letter of credit (usually consistent with the importer) and address
6	TRANSFERABLE	Select only if it is transferable L/C.
7	CONFIRMATION	Select only if it is confirmed L/C.
8	LATEST SHIPMENT DATE	Please fill in the shipping deadline and confirm the consistency of the submission deadline with L/C expiry date.
9	CURRENCY AMOUNT	Fill in currency and amount
10	EXPIRY DATE	LC expiry date. Check the consistency between LATEST SHIPMENT DATE and PRESENTATION PERIOD.
11	TENER	Select whether to pay at sight or with a due date, and if so, enter the term of the draft.
12	PARTIAL SHIPMET	Select whether you choose partial shipment or not.
13	TRANSHIPMENT	Select whether or not to transfer the cargo to another means of transport on the way from the export area to the import area
14	PORT OF LOADING	Fill in the place of shipment and country of shipment.
15	PORT OF DISCHARGE	Fill in destination and country.
16	PRESENTATION PERIOD	Fill in if you specify a number of days as shipping documents presentation period. If the date of presentation is not specified, within 21 days after shipment. Consistency check between EXPIRY DATE (L/C expiry date) and LATEST DATE FOR SHIPMENT is required.
17	TRADE TERMS	Select trade terms. In the case of Others, fill in based on Incoterms. Confirmation of consistency with other conditions such as fare indication on transport documents and insurance coverage status.
18	MERCHANDISE	Briefly describe the product name, quantity, quality, unit price, etc. If it is acceptable to increase or decrease the quantity, Fill in the percentage. If unit price and quantity are listed, verify that the total amount of these matches the L/C issue amount.
19	L/C NOTIFICATION METHOD	Select only if pre-advance (advance notice) is required.
20	TT REIMBURSEMENT	Whether or not Mizuho Bank, Ltd. will be allowed to receive payment requests by wire from the other (negotiating) bank. Also, select the commission contribution category.
21	COMMISSION	Banking charge (Acceptance charge, Confirmation charge, etc.) Choose whether beneficiary will pay or applicant will pay.
22	FUNDING TERMS	Select funding terms from: ① PAYMENT ② ACCEPTANCE ③ NEGOTIATION ④ DEFERRED PAYMENT In the case of open letter of credit, it is described as ANY BANK, and in the case of restricted letter of credit, it is described as "designated bank".
23	AMOUNT OF BILLS	If you would like to pay by invoice amount, choose "100% Value", and if it is XX% of the invoice amount, please write XX%.
24	BILL OF LADING	Select this option when importing goods by sea. "FULL SET": the entire original "X/3": X of the three original copies
25	CONSIGNEE PRESENTATION	<b>MADE OUT TO ORDER OF YOUR BANK</b> : Mizuho Bank, Ltd. is the instruction person (The person designated by Mizuho Bank, Ltd. is consignee.) <b>MADE TO ORDER OF SHIPPER AND ENDORSED IN BLANK</b> : The exporter shall give instructions to the blank endorsement (consignee is designated by the exporter and blank endorsement is designated.) <b>ESPECIALLY ENDORSED TO THE BANK</b> : the bank is consignee
26	FREIGHT PAYMENT METHOD	Choose "PREPAID" or "Payable at Destination" (Confirm consistency with trade terms) Select Notify party = Freight arrival notifying party.
27	AIR WAYBILL / WAYBILL	Select this option when importing goods by sea. Choose "PREPAID" or "Payable at Destination" select Notify party = Freight Arrival notifying party.
28	INSURANCE POLICY	Select if the insurance is insured by the exporter. In case of granting an importer, an insurance certificate is not necessary as a presentation document.
29	COMMERCIAL INVOICE	Fill in numbers of invoices.
30	OTHER DOCUMENTS	Fill in other required documents. Enter the name of the document, the number of documents, and the person who prepared it.
31	SETTLEMENT INFORMATION	Fill in the commission debit account.
32	SUBMITTING CLIENT INFORMATION	Name, telephone number, FAX, Email, and signature of the applicant.
33	ISSUANCE IN THE NAME OF A THIRD PARTY	If issued in the name of a third party, fill in