

Gibraltar International Bank Limited is authorised and regulated by the Gibraltar Financial Services Commission.

DIT TO GIBRALTAR INTERNATIONAL BANK
Beneficiary's details:
Name of Company
Date of application
Address
Contact name
Position held
Preferred daytime contact number
Fax number
Email address
Bank details:
Name of Bank
Address
Account number
Swift
IBAN

		AMOUNT OF LE	TTER OF CREDIT			
Currency		Amount in Figures		Tolera	ance +/- (%)	
Currency and amou	nt in words:					
On receipt of docum	nents in order,	please debit Account Nun	nber:			
		DETAILS OF LET	TTER OF CREDIT			
Available with the	Issuing Bank:					
By sight payment		By deferred payment	By acceptance		By negotiation	
Available with the bank:	Nominated					
By sight payment		By deferred payment	By acceptance drawn on Issuing bank			
			By acceptance drawn on Nominated Bank			
Is the Letter of Cred transferable?	lit to be	Yes	No			
Shipment details:						
Place of receipt			Period for presenta	tion	(Calendar Da	ys)
Port of Loading			Expiry date for presentation			
Port of discharge			Latest Shipment dat	te		
Place of final destin	ation					
Partial Shipment		Allowed Not allowed	Transshipment		Allowed Not allowed	

Description of Goods and Services (brief description including quantity without excessive detail)			
If FOB/FCA / CFR is ticked, cargo needs	erms known collectiviccwbo.org.		can be obtained from the International ID INLAND WATERWAY TRANSPORT IDE SHIP
CA FREE CARRIER CPT CARRIAGE PAID TO CIP CARRIAGE AND INSURANCE PAID TO DAT DELIVERED AT TERMINAL DAP DELIVERED AT PLACE DDP DELIVERED DUTY PAID	0	FOB FREE ON BOA CFR COST AND FRE CIF COST INSURAN	EIGHT
Documents required:	T		
Commercial Invoice	Original(s)		Copies
Packing List	Original(s)		Copies
Full set ocean bill of lading	Origi	nal(s)	Copies
Consigned to order of	Applicant Shipper and blank Issuing Blank endorsed Other		Freight marked Collect Prepaid
Airway bill	Original(s)		Copies
Consigned to order of	Applicant Issuing Bank Other		Freight marked Collect Prepaid
Combined Transport Document	Original(s)		Copies
Delivery Order	Original(s)		Copies
	evidencing goods	of	
Certificate of Origin		origin.	Certified by Chamber of Commerce

If CIF/CIP: Insurance policy/certific	cate fo	or full CIF/CIP value	plus	
10 %				
% blank endorsed (if left bla (please specify if required)	nk 109	% will be assumed),	covering institute ca	rgo clauses 'A'/war/strike/other
		cla	uses.	
Other documents (specify below)				
		Original(s)		Copies
Special Instructions:				
Confirmation:	Requested Not Requested			
Bank Charges:				
Issuing bank charges for account of	Арр	licant	Beneficiary	
Advising/Nominated/Confirming Bank charges for account of	Арр	licant	Beneficiary	
Please debit DC opening commissi	on, ac	lvising expenses to	our Account Number	:

AGREEMENT

This Credit will be issued subject to the Uniform Customs and Practice for Documentary Credit ICC Publication 600 – 2007 Revision – "UCP 600".

By signing:

- I/We confirm the details on the Application form are correct
- I/We agree to the Trade Services Terms
- I/We acknowledge and agree that the Bank may at any time take possession of any Goods and has the power to sell the Goods, without notice to the Customer. The Bank may apply the proceeds of any sale to the Customer's liabilities in the order it decides.
- I/We will on demand, pay to the Bank the amount of any claim under any Documentary Credit or Guarantee and acknowledge that the Bank may honour any presentation or demand purporting to be made under any Documentary Credit or Guarantee that appears to be in order (a claim).

	SIGNATURES
Signatory 1	
Name and Title	
Date	
	SIGNATURES
Signatory 2	
Name and Title	
Date	
	SIGNATURES
Authorised	
Name and Title	
Date	