

Application for Letter of Credit Amendment/ Cancellation



Date:

Amendment

Cancellation

LETTER OF CREDIT DETAILS

Applicant's Name:

Reference No.: Issuance Date:

Amount:

Beneficiary's Name:

AMENDMENT DETAILS

Latest shipment date to be extended to:

Expiry date to be extended to:

Please amend the amount to :

Other (please specify):

All other terms and conditions remain unchanged.

CANCELLATION DETAILS

Please cancel the above Letter of Credit

Comment:

I/We understand that any amendment or cancellation will not effective without consent of all parties involved.

Company Stamp

Authorized Signature(s)

Please debit my/our account number: for amendment / cancellation fees.

FOR BANK USE ONLY

Received by _____ Processed by _____ Verified by _____ Approved by _____