



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

10: Sumitomo Mitsui Banking Corporation Yan	ngon Branch Date:
	Bank Ref No.:
	Letter of Credit/Letter of Guarantee/Letter of indemnity (referred rms found as indicated below which we have read, understood
Applicant's Information	Beneficiary's Information
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:
Issuance Instruction	
Please issue as per attached: SBLC/BG/Indemnity format. (Trade Fin	aanaa)
https://www.smbc.co.jp/asia/myanmar/f	
SBLC/BG/Indemnity format. (Non-Trad	
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	forms/BG-SBLC-non-trade-finance-terms.pdf
Bank Name:	
SWIFT BIC Code:	
Delivery Instruction for Domestic Beneficia	ary (additional charges may apply)
Advising Bank Name	
SWIFT BIC Code:	
Hold for Applicant's collection	Send via Courier

T	2-4-11-								
Transaction I									
Currency & Amount: Effecti				ve Date:					
Tolerance (%)	: 			Claims	s may be presented no less than				
Expiry Date:					expiry date				
Expiry at (Loca	ation):				days after expiry				
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							nalf of	
					Company's Chop	ο Λ.	utho	rized Signature	
Section for Our Ba	ınk Use				Name:				
		0				V/		F	
Unit In Thou:		Customer ID.:			F. Amt	Υ	N	Fee:	
Credit Line:		Limit Ref:			P. Type	В	Е		
Utilized Bal.:		GM/Delegate	Approve Execution	Signature Verified					
Unused Bal.:	l				US\$ Checklist	Υ	N	D	
Term	Last draw date:				Close+Open	Υ	N	Rate of:	

Sumitomo Mitsui Banking Corporation Yangon Branch (Incorporated in Japan with limited liability) Reg. No. 187104041



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To: Sumitomo Mitsui Banking Corporation	n Yangon Branch Date:
	Bank Ref No.:
	ndby Letter of Credit/Letter of Guarantee/Letter of indemnity (referred ne Terms found as indicated below which we have read, understood
Applicant's Information	Beneficiary's Information
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:
Issuance Instruction	
Please issue as per attached:	
SBLC/BG/Indemnity format. (Trad https://www.smbc.co.jp/asia/myanr	,
SBLC/BG/Indemnity format. (Non-	
<u> </u>	mar/forms/BG-SBLC-non-trade-finance-terms.pdf
Bank Name:	
SWIFT BIC Code:	
Delivery Instruction for Domestic Bene Advising Bank Name	eficiary (additional charges may apply)
SWIFT BIC Code:	
Hold for Applicant's collection	Send via Courier

Transaction I	Notaile								
Currency & Amount: Effective Effecti				ve Date:					
Tolerance (%):				may be presented	d no	less	s than		
Expiry Date:					expiry date				
Expiry at (Loca				days after expiry					
Purpose:									
(Please indicate goods origin and shipment details when applicable)									
Charges:									
Debit al	l amounts payabl	le by the App	olicant from	the Applica	ant's account numb	oer:			
For and on behalf of									
					i oi and	1 011	Dei	iaii Oi	
	Company's Chop & Authorized Signa					rized Signature			
Name:									
Section for Our Ba	ınk Use								
Unit In Thou:		Customer ID.:			F. Amt	Υ	N	Fee:	
Credit Line:		Limit Ref:			P. Type	В	E		
Utilized Bal.:		GM/Delegate	Approve Execution	Signature Verified					
Unused Bal.:			2.000011	2	US\$ Checklist	Υ	N		
Term	Last draw date:				Close+Open	Υ	N	Rate of:	