APPLICATION TO IRREVOCABLY TRANSFER AN EXPORT DOCUMENTARY LETTER OF CREDIT



You need Adobe Reader 9.0 to view this form. You can download Adobe Reader free of charge. PLEASE ENSURE THIS FORM IS COMPLETED ONLINE (TYPED) To: The Manager		
ANZ Trade and Supply Chain Hong Kong	Date (dd/mm/yyyy)	
From: (Customer name and address, include company identification number if	fapplicable):	
Please complete as appropriate:		
Transferable Documentary Letter of Credit details:		
Documentary Letter of Credit Number	Issuing Bank	
Original amount of Credit	Expiry Date (dd/mm/yyyy)	
I/We enclose the original of the above Transferable Documentary Letter of Creand amendments. As first beneficiary of the Export Credit, I/we now irrevocable accordance with the following instructions, to the named Transferee below:		
Name of Transferee	Address of Transferee	
Transferee's Bankers	Banker's Address (if known)	
SWIFT		
If correspondent arrangements are not held with the nominated Transferee B	ank, ANZ may choose the correspondent bank.	
Terms of transfer This transfer is subject to the same terms and conditions as contained in the Ex	xport Credit with the exception of the following	
Amount in figures (including currency)	Amount in words (including currency)	
Unit price(s) amend to (as applicable)	Quantity of goods	
Place of Expiry	New Expiry Date* (dd/mm/yyyy)	
New latest shipment date (dd/mm/yyyy)	Presentation period for documents reduced to	
	days*	
(Minimum seven da	y reduction compared to original Documentary Letter of Credit's period)	
The percentage of insurance cover required under the transferred credit is increased to		
Other Details (if applicable)	Second Penefician's Pank fees are for account of	
Other Details (if applicable)	Second Beneficiary's Bank fees are for account of	

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I/We retain the right to substitute my/our own invoices for those of the transferee and provide my/our draft for the difference in value.

If within three business days of notification from ANZ I/we have failed to deliver substitute draft and invoices, I/we hereby authorise ANZ to forward the documents accompanying the draft of the transferee to the issuing bank without any responsibility on ANZ's part to pay me/us the difference between the amount of the transferee's draft and the amount authorised to be paid under the Export Credit.

Amendments	advised to the transferee without my/our consent.

Charges:

Please debit ANZ's charges for this transfer (including SWIFT costs) to our:	
Foreign Currency account number: (Currency & number)	
Our bank charges for the transfer are for the account of	

Customer agreement:

If not already allowed, we authorise ANZ to seek approval from the issuing bank to allow ANZ to act as Transferring Bank.

We confirm that this request and the attached Documentary Letter of Credit are subject to Uniform Customs and Practice for Documentary Credits (2007 Revision) International Chamber of Commerce Publication No. 600 and the Uniform Rules for Bank-to-Bank Reimbursements under Documentary Credits, International Chamber of Commerce Publication No. 725.

We represent and warrant that the details of the Export Credit and the terms of the transfer specified in this application are true and correct. If ANZ agrees to act upon this application, please advise the Transferee of the terms of the Export Credit and the instructions in this application.

We acknowledge that ANZ retains the right to amend presentation periods and the percentage of insurance cover required in order to ensure compliance with the initial Export Credit under advice and consultation with us.

This application is subject to, and we are bound by, the terms in the ANZ Trade Terms booklet and any other applicable Trade Agreement. We confirm that ANZ has given us the booklet or we have accessed it at anz.com/corporate and given us the other applicable Trade Agreements. We acknowledge ANZ recommends that we read these documents and seek clarification from ANZ about any issues of concern.

Authorised Signature

Name of Authorised Signatory

Authorised Signature

Name of Authorised Signatory

Company stamp or chop (if applicable):

* ANZ retains the right to amend presentation periods and the percentage of insurance cover required in order to ensure compliance with the initial Documentary Letter of Credit under advice and consultation with the first beneficiary.

BANK USE ONLY	
Date received (dd/mm/yyyy)	Signature(s) verified
	Yes No
All checks complete	Approved by
Trade Relationship Officer	Manager / Team Leader