

# Hatton National Bank PLC

## APPLICATION FOR IRREVOCABLE LETTER OF CREDIT

TAG	FIELD NAME	CONTENTS / PARTICULARS	OFFIC INFOR.
40A	FORM OF CREDIT		24X
20	CREDIT NUMBER		16X
31C	DATE OF APPLICATION		6N
31D	DATE & PLACE OF EXPIRY		6N 29X
50	APPLICANT'S NAME AND ADDRESS		4* 35X
59	BENEFICIARY'S NAME AND ADDRESS		4* 35X
32B	CURRENCY & AMOUNT		3a 15nos.
39A	TOLERANCE		2 N/2n
41A	AVAILABLE WITH		A OR D
42C	DRAFT AT		3* 35X
43P	PARTIAL SHIPMENT		1* 35X
43T	TRANSSHIPMENT		1* 35X
44E	PORT OF LOADING		1* 65X
44F	PORT OF DISCHARGE		1* 65X
44C	LATEST SHIPMENT		6N
45A	DESCRIPTION OF GOODS		50* 65X
46A	DOCUMENTS REQUIRED	a) <input type="checkbox"/> Manually signed invoices in _____ copies certifying goods of _____ Origin b) <input type="checkbox"/> Full set of shipped on board bill of lading marked freight prepaid / collect at destination issued to order of Hatton National Bank PLC. Notify applicant. <input type="checkbox"/> Valid shipper's copy of airway bill consigned to Hatton National Bank PLC. marked freight prepaid / collect Notify applicant. <input type="checkbox"/> Sea / Air parcel post receipt (postage prepaid/collect) addressed to Hatton National Bank PLC. O/A applicant. c) <input type="checkbox"/> Packing List / Weight List. d) <input type="checkbox"/> Insurance Policy / Certificate in duplicate in assignable form endorsed in blank covering institute Cargo clauses (A) institute war clauses (cargo/ air Cargo) Institute Strike clause (Cargo / Air Cargo) for full CIF value plus _____ %covering warehouse to warehouse including transshipment risks in the event of transshipment. Claims payable in Colombo irrespective of percentage.	50* 65X
47A	SPECIAL / ADDITIONAL INSTRUCTIONS	<input type="checkbox"/> Insurance covered by applicant. (Open Cover No.....) <input type="checkbox"/> Beneficiary to send a set of copy documents to openers by courier /Fax/e-mail/within.....days of shipment Courier receipt/Fax Activity Report/Copy of e-mail to accompany original documents. <input type="checkbox"/> Any other conditions a separate sheet is attached.	50* 65X
48	PERIOD FOR PRESENTATION		4* 35X
49	CONFIRMATION	Confirmation Charges <input type="checkbox"/> Applicant <input type="checkbox"/> Beneficiary	7X
71B	CHARGES		6* 35X

ADVISING BANK (IF ANY) .....

WE REQUEST YOU TO ISSUE YOUR IRREVOCABLE DOCUMENTARY CREDIT IN ACCORDANCE WITH THE ABOVE INSTRUCTION SUBJECT TO UNIFORM CUSTOMS AND PRACTICE FOR DOCUMENTARY CREDIT, CURRENT REVISION AND AGREEMENT OVERLEAF.  
**BY FULL TELEX / SWIFT / BRIEF TELEX FOLLOWED BY MAIL CONFIRMATION OR BY MAIL/COURIER.**

**APPLICANT**

PLEASE BOOK FORWARD EXCHANGE FOR \_\_\_\_\_ MONTHS

