



**APPLICATION FOR AMENDMENT TO IRREVOCABLE DOCUMENTARY CREDIT-i**

To:

Date (dd/mm/yyyy)

I/We hereby request you to amend Irrevocable Documentary Credit-i No. through

**1. Applicant's Name and Address**

Contact Person   
Telephone Number   
Email Address   
Fax Number

**2. Beneficiary's Name and Address**

Contact Person   
Telephone Number   
Email Address   
Fax Number

**3. Advising Bank's Name and Address**

  
  

**4. Amendment Instructions**

\*Extend Expiry Date to:  Date (dd/mm/yyyy)

\*Extend Shipment Date to:  Date (dd/mm/yyyy)

Choose One Credit by:

**Currency & Amount in Figures**

 

In words

**Total Credit After Amendment in Figures**

 

In words

\*May Attach Additional Opening Commission

Others, if any (please specify):

  
  

**5. Amendment Charges to be paid by**

Beneficiary

Applicant



**6. Instructions on Bank Charges**

I/We authorise you to debit my/our bank account number:  with you all amounts payable by me/us in connection to the trade service provided by you to me/us, including but not limited to fees, charges, expenses and commission.

**7. Applicant's Authorisation and Declaration**

- a) I/We request that you provide the relevant Documentary Credit-i services in accordance with my/our instructions requested above.
- b) I/We agree to be bound by the standard and general agreement as you may provide to me/us (or as agreed between us) from time to time.

**10. Authorised Signatory/ies (Complete with Company Stamp, wherever applicable)**