



Irrevocable Standby Letter of Credit (Standby L/C) Application Form

How to complete the form

1 Please use a **BLACK pen**

2 Mark boxes like this If you make a mistake, do this and mark the correct box

3 Please use **BLOCK CAPITAL LETTERS** and leave one space between each word

To: Allied Irish Banks, p.l.c. ("AIB Bank") Trade Finance Services, 10 Molesworth Street, Dublin 2. Tel. (01) 6093868.

This Irrevocable Standby Letter of Credit Application Form (the "Application") and the irrevocable standby letter of credit ("Irrevocable Standby L/C") issued hereunder incorporate and are subject to and governed by the Trade Finance Terms and Conditions (the "Trade Terms") save for where any of the terms of the Trade Terms may be inconsistent with or conflict with the terms of this Application. In such case, this Application shall prevail to the extent of such inconsistency or conflict only but all other terms and conditions of the Trade Terms shall remain unaffected. These are our standard Trade Terms upon which we intend to rely. For your own benefit and protection, you should read the Trade Terms carefully. If you do not understand any point, please ask for further information.

You do not have the right to withdraw from this Agreement unless we agree otherwise with you. Agreement for these purposes means the Application and the Trade Terms.

We request you to issue an Irrevocable Standby L/C on the following terms:

1 Applicant/Importer
(Full name and address)

2 Beneficiary/Exporter
(Full name and address)

3 Beneficiary's Bankers (if known)
Name
Address

4 Covering
Brief description of goods/services/ purpose being covered and agreed payment terms (avoid excessive detail)

5 Date and place of expiry of Standby L/C (Latest date for presentation of documents)

Day / Month / Year Place: (Country of beneficiary unless stated)

Fixed Expiry Date Auto renew annually (Please tick one box only)

6 Currency and Value

CCY Value (in numbers)

Value (in words)

7 Confirmation To be issued as a Confirmed Standby L/C Requested Not Requested

8 Partial Claims Partial Claims allowed If Partial Claims are not allowed, please tick here (optional)

9 Type of Standby L/C Covering: Goods/Services Financial Facilities (Please tick one box only)

10 Standby L/C Wording Request AIB Standard Wording Format Wording Attached

Agreement and Acknowledgement

In consideration of your issuing at our request the Irrevocable Standby L/C on the terms set out above, we acknowledge and agree that the Irrevocable Standby L/C shall be governed by and subject to the Trade Terms in addition to the terms (which include an indemnity) set out in this Application. The Authorised Signatories confirm that they are duly authorised on behalf of the Applicant to complete this Application and the Customer Indemnity to Bank.

Signed for and on behalf of the Applicant:

(Authorised Signatory) <input type="text"/>	Telephone number <input type="text"/>
(Authorised Signatory) <input type="text"/>	Contact name <input type="text"/>
	Date Day Month Year <input type="text"/> / <input type="text"/> / <input type="text"/>

FOR INTERNAL USE ONLY

I confirm that the Applicant mentioned on this application form is CJA approved with a Folio Number	<input type="checkbox"/>
I confirm that I am satisfied that the goods/services mentioned above are consistent with the nature of the customer's business	<input type="checkbox"/>
The size/value of this transaction is consistent with the customer profile	<input type="checkbox"/>
Copy of Sanction Letter attached	
Sanctioned <input type="text"/>	BRANCH BRAND <input type="text"/>
(Authorised Signatory)	
Signing Number <input type="text"/>	