INTERNATIONAL BANK OF VEMEN y.s.c.

BRANCH





DATE:...

APPLICATION FOR IRREVOCABLE DOCUMENTARY CREDIT						Letter Of Credit No.				
	APPLICANT					BENEFICIARY				
1										
Tel	Fax				Tel. Fax Amount					
	Beneficiary's Bank (If Known)				Not Exceeding /About:					
Tel.					Amount In Words					
5										
3						e for shipment				
5					Last date for negotiation					
	Please issue by					credil available by beneficiary's draft payable al sight/				
	Drawn on International Bank of Yemen for full invoice value of the goods accompanied by the following documents. Signed Commercial Invoice in									
	Full set of clean / on board ocean bills of lading to the order of International Bank of Yemen, marked Freight and notify openers									
			e order of Internati							
	Marine/Air Insurance policy/Certificate issued to the order of International Bank of Yemen in the currency of the dra									
	& for the full invoice value plus 10% covering institute cargoclauses, all risks institute cargo clauses, extended cover an institute war clauses. Additional risks.									
	Insurance will be arranged by us locally we undertake to submit the in surance policy within 7 days from the date of									
	the L/C Opening (Policy No									
Customs And Practice For	COVERING:(brief description of goods)									
Shir	oment from		to		<u> </u>	Partial Shipmen	,	Trans	hipment	
Tern			C&F CIF			1	☐ Allowed ☐			
Othe										
Ship Term Other										
We	e certify that neither the beneficiaries named above nor the suppliers of the goods are subject to boycott or blackstilling. further add that the Import of goods described above is not prohibited or registered and we hold and undertake to nibil to you a valid Import licence where such licence is required.									
we feeth	All banking charges outside Yemen for account of				Plse.ask your correspondent(s) to add their Confirmation					
-	Benefic		Applicants	Charges in which case for the account of Beneficiaries Applicants Marginal deposit from our account No.						
mer	e authorize you to have our above account or any other accounts in compliance with L/C terms as we are aware of cur of the margin ip. (Please specify the currency):					count maintained with you debited upon receipt of docu- obligation as stated overleaf.				
Sub	ject to condit horised Signa	ions overleaf ature		Remarks						
Acc	ount No.									
_	inlernal use a	The state of the s	Mada	_		A		0	David.	
Sig	nature Verf.	Limit	Marker	Che	ecker	Approvel		Confirming	Bank	