APPLICATION FOR ISSUE OF IRREVOCABLE DOCUMENTARY LETTER OF CREDIT

To

Date: _____

ICICI Bank Limited **Place:** _____

_____Branch

I/We, the below mentioned Applicant, hereby request you to open an Irrevocable Documentary Letter of Credit ("Credit") with your correspondents against the limit sanctioned to us, as per details given below:

I/We hereby agree and confirm that the Credit is subject to the terms and conditions as contained herein and in the Facility Agreement dated _____ entered into between the below mentioned Applicant and ICICI Bank Limited

EXCEPT AS OTHERWISE EXPRESSLY STATED IN THIS APPLICATION AND THE FACILITY AGREEMENT THE CREDIT IS SUBJECT TO THE UNIFORM CUSTOMS AND PRACTICE FOR DOCUMENTARY CREDITS (1993 REVISION) AS CONTAINED IN THE INTERNATIONAL CHAMBER OF COMMERCE PUBLICATION NO. 500 AS AMENDED FROM TIME TO TIME.

40A:* **	TYPE OF L/C	IRREVOCABLE
31D : *	DATE & PLACE OF EXPIRY:	☐☐ ☐☐ ☐☐ PLACE : Y Y M M D D
50 : *	NAME AND ADDRESS OF THE APPLICANT	
59 : *	NAME AND ADDRESS OF THE BENEFICIARY	
32B: *	CURRENCY & AMOUNT OF CREDIT IN FIGURES AND IN WORDS	CURRENCY NAME: AMOUNT ☐☐☐ AMOUNT IN WORDS : CONTRACT TERMS: FOB CFR CIF ☐ (Please mark) Others(Specify)
39A: #	PERCENTAGE CREDIT AMOUNT TOLERANCE	☐ PERCENTAGE PLUS ☐ PERCENTAGE MINUS
39B: #	MAXIMUM CREDIT AMOUNT	☐ MAXIMUM AMOUNT (AMOUNT PLUS TOLERANCE)
39C:	ADDITIONAL AMOUNTS COVERED (USANCE INTEREST)	
41a : (A/D) *	CREDIT AVAILABLE WITH CREDIT AVAILABLE BY	☐ ANY BANK ☐ ADVISING BANK ☐ ACCEPTANCE ☐DEF PAYMENT ☐ NEGOTIATION ☐SIGHT PAYMENT
42c: @	USANCE OF DRAFTS	☐ AT SIGHT ☐ _____ DAYS FROM DATE OF SHIPMENT
42a:@	DRAWEE	☐ ISSUING BANK OR ☐ NEGOTIATING BANK
42p: @	DEFERRED PAYMENT DETAILS	
43P:	PARTIAL SHIPMENTS	☐ PROHIBITED ☐ PERMITTED
43T:	TRANSHIPMENTS	☐ PROHIBITED ☐ PERMITTED
44A:	SHIPMENT FROM	
44B :	SHIPMENT TO	VIA
44C:	LATEST DATE OF SHIPMENT	
45A:	QUANTITY AND DESCRIPTION OF GOODS (BRIEF DETAILS)	
***	IMPORT LICENCE/OGL DETAILS	
***	EXPORT IMPORT CODE NO.	
***	P.O. NUMBER AND DATE	
***	COUNTRY OF ORIGIN	
	1) INSURANCE CO'S NAME	

	ADDRESS & FAX No. 2) POLICY No.& DATE (COPY TO BE ENCLOSED)	
46A:	DOCUMENTS REQUIRED	☐ SIGNED COMMERCIAL INVOICE (S) IN ------COPIES QUOTING IMPORT LICENCE/OGL REFERENCE AND CERTIFYING THAT THE GOODS SUPPLIED ARE AS PER PURCHASE ORDER OF THE APPLICANT. GROSS FOB/CIF/CFR VALUE OF THE GOODS BEFORE DEDUCTION OF AGENT'S COMMISSION, IF ANY, MUST NOT EXCEED THE MAXIMUM CREDIT AMOUNT. ☐ CERTIFICATE OF ORIGIN ISSUED BY CHAMBER OF COMMERCE (IN DUPLICATE) ☐ FULL SET OF SIGNED "CLEAN" "ON BOARD" OCEAN BILLS OF LADING MADE OUT TO ORDER AND BLANK ENDORSED MARKED FREIGHT PREPAID/FREIGHT PAYABLE AT DESTINATION EVIDENCING SHIPMENT OF MERCHANDISE DESCRIBED ABOVE. BILLS OF LADING MUST STATE FULL NAME AND ADDRESS OF BOTH APPLICANT AND ICICI BANK LIMITED AS PARTIES TO BE NOTIFIED. SHORT FORM, THIRD PARTY, FREIGHT FORWARDERS AND LASH BILLS OF LADING ARE NOT ACCEPTABLE. ☐ AIRWAY BILL (ORIGINAL PLUS THREE COPIES) ISSUED BY AIRLINE OR IT'S AGENT MADE IN THE NAME OF ICICI BANK LIMITED FOR ACCOUNT APPLICANT EVIDENCING THE CURRENT AIRFREIGHT OF GOODS. AIRWAY BILL SHOULD BE MARKED "FREIGHT PREPAID/TO COLLECT". AIRWAY BILLS MUST STATE FULL NAME AND ADDRESS OF APPLICANT AND ICICI BANK LIMITED AS PARTIES TO BE NOTIFIED. AIRWAY BILL MUST INDICATE FLIGHT NUMBER AND DATE. ☐ SHIPPING COMPANY'S OR THEIR AGENT'S CERTIFICATE (IN DUPLICATE) STATING THAT THE CARRYING VESSEL NAMED IN THE BILL OF LADING IS A SEAWORTHY VESSEL, NOT MORE THAN TWENTY YEARS OLD, HAS BEEN APPROVED UNDER INSTITUTE CLASSIFICATION CLAUSE (CLASS MAINTAINED EQUIVALENT TO LLOYDS 100 A1) AND HAS BEEN REGISTERED WITH AN APPROVED CLASSIFICATION SOCIETY (CERTIFICATE TO SPECIFY THE NAME OF THE CLASSIFICATION SOCIETY) ☐ MARINE/AVIATION INSURANCE POLICY OR CERTIFICATE (ORIGINAL PLUS COPY) DATED NOT LATER THAN THE DATE OF BILLS OF LADING/ AIRWAY BILL SIGNED AND ISSUED BY INSURANCE COMPANY MADE TO ORDER AND BLANK ENDORSED FOR 110 % OF CIF VALUE , COVERING INSTITUTE CARGO CLAUSE (A), WITH EXTENDED COVER FOR TRANSHIPMENT RISKS, IF APPLICABLE, THEFT, PILFERAGE, BREAKAGE AND NON-DELIVERY, INSTITUTE WAR CLAUSE (CARGO) AND INSTITUTE STRIKES CLAUSE (CARGO), INSTITUTE TRANSIT CLAUSES FOR WAREHOUSE TO WAREHOUSE COVER WITH CLAIMS PAYABLE IN INDIA IRRESPECTIVE OF PERCENTAGE. ☐ INSURANCE COVERED BY THE APPLICANT, COPY EACH OF FAX WITH CONFIRMATION , INTIMATING THE APPLICANT DIRETLY ON FAX NO.....ANDINSURANCE COMPANY DIRECTLY CONVEYING FULL DETAILS OF SHIPMENT/DISPATCH SUCH AS VALUE AND BRIEF DESCRIPTION OF GOODS, NAME OF SHIPPING COMPANY/AIRLINES, NUMBER AND DATE OF BILL OF LADING/AIRWAY BILL, VESSEL NAME/FLIGHT NUMBER..... AND INSURANCE POLICY/CERTIFICATE NO AND DATE. WITHIN 48 HOURS OF SHIPMENT/DESPATCH ☐ SIGNED PACKING LIST (IN QUADRUPLICATE)
47 A:	ADDITIONAL CONDITIONS	☐ ALL DOCUMENTS MUST BE IN ENGLISH ☐ ALL DOCUMENTS MUST MENTION OUR L/C NUMBER AND DATE. ☐ DOCUMENTS PRODUCED BY REPROGRAPIC PROCESS/COMPUTERISED CARBON COPIES ARE NOT ACCEPTABLE UNLESS MARKED ORIGINAL AND SIGNED. ☐ THE TRANSPORT DOCUMENT – A. MUST NOT INDICATE A FINANL PLACE OF DESTINATION AS BEING DIFFERENT FROM THE PORT OF DISCHARGE B. MUST NOT BEAR BY STAMP OR OTHERWISE TO COST ADDITIONAL TO THE FREIGHT CHARGES ☐ OTHERS, PLEASE SPECIFY
71 B:	SPECIFY IF ANY CHARGES ARE TO BENEFICIARY'S ACCOUNT	☐ALL CHARGES ☐ (SPECIFY)
48:	PERIOD OF PRESENTATION OF DOCUMENTS	WITHIN _____ DAYS FROM THE DATE OF _____
49: ***	CONFIRMATION INSTRUCTIONS	☐ NOT REQUIRED ☐ REQUIRED ☐ CHARGES PAYABLE BY _____
72:	SENDER TO RECEIVER INFORMATION	

***** indicates mandatory fields**
 # only one of the fields 39A OR 39B is to be filled
@ Fields 42C and 42A together or Field 42p alone may be present

I/We hereby declare that the transaction covered under the credit(the "transaction") , does not involve, and is not designed for the purpose of any contravention of the provisions of the Foreign Exchange Management Act 1999 or of any rule, regulation, notification, direction or order made thereunder. I/We also hereby agree and undertake to give such information/documents as will reasonably satisfy you about the transaction in terms of above declaration.

We hereby confirm and certify that:(a) The goods imported / being imported by us under the Credit are not covered under Negative List of Imports as mentioned in Export and Import Policy 2002-2007 and amendments thereto till date.(b) We are eligible to import the above mentioned goods under the current Export and Import Policy in place.(c) The said goods imported / being imported by us are not restricted for import through specific licensing under the above mentioned policy and amendments thereto till date.(d) **ITC(HS) Classification Code No.----------**
We also undertake to submit the relative Exchange Control Copy of the Bill of Entry / Postal Wrappers to you immediately after clearance of the said goods, in any case within 3 months from the date of remittance / payment. Further, we declare that the items imported will be used / disposed of as per the provision contained in the policy / procedure.I/We further declare that the undersigned has the authority to give the declarations, undertakings and instructions as above, on behalf of the Company.

Yours faithfully,

For _____name of applicant_____

1. _____
Signature of the Authorised signatories of the Applicant

2. _____
Signature of the Authorised signatories of the Applicant