

INSTRUCTIONS FOR OPENING OF AN IRREVOCABLE DOCUMENTARY LETTER OF CREDIT

Documentary letter of credit to be transferable: <input type="checkbox"/> yes <input type="checkbox"/> no	
Documentary letter of credit to be confirmed by the advising bank: <input type="checkbox"/> yes <input type="checkbox"/> may add <input type="checkbox"/> no	
Advising Bank: (Beneficiary's Bank) Name: Address: SWIFT Code:	Beneficiary: Name: Address: Account/IBAN:
Available with: <input type="checkbox"/> Beneficiary's Bank: <input type="checkbox"/> KBC Bank Bulgaria EAD, Sofia <input type="checkbox"/> any bank <input type="checkbox"/> by payment at sight <input type="checkbox"/> by deferred payment _____ days after shipment date <input type="checkbox"/> by negotiation <input type="checkbox"/> by mixed payment <input type="checkbox"/> other	
Currency and amount:	<input type="checkbox"/> not exceeding <input type="checkbox"/> tolerance +_____-_____% in quantity and amount
Expiry date:	Latest date of shipment:
Place of expiry: <input type="checkbox"/> Place of shipment: <input type="checkbox"/> Port of loading/Airport of departure	<input type="checkbox"/> Place of destination: <input type="checkbox"/> Port of discharge/Airport of destination
Partial shipment: <input type="checkbox"/> allowed <input type="checkbox"/> not allowed	Transshipment: <input type="checkbox"/> allowed <input type="checkbox"/> not allowed
Terms of delivery:	
Description of the goods/services:	
Required Documents: <input type="checkbox"/> Commercial invoice in ___ original/s and _____ copy/ies <input type="checkbox"/> Full set ___/___ Originals + _____ Non Negotiable copies clean on board <input type="checkbox"/> Marine/Ocean Bill of Lading <input type="checkbox"/> Charter party Bill of Lading <input type="checkbox"/> Multimodal Transport Document issued: <input type="checkbox"/> to order and blank endorsed <input type="checkbox"/> to order of: <input type="checkbox"/> notify party: Marked: <input type="checkbox"/> freight prepaid <input type="checkbox"/> freight collect <input type="checkbox"/> Air Waybill (Original 3 – for shipper) consigned to: <input type="checkbox"/> House Air Waybill acceptable <input type="checkbox"/> Duplicate Rail Waybill <input type="checkbox"/> International Consignment Note (CMR) – copy for sender addressed to: <input type="checkbox"/> Forwarding Certificate of Receipt (FCR) <input type="checkbox"/> Insurance Policy in negotiable form/Insurance certificate issued for 110% of invoice value,	

showing: 'premium paid', covering the following risks: <input type="checkbox"/> Packing List in ___ original/s and ___ copy/ies <input type="checkbox"/> Certificate of Origin in ___ original/s and ___ copy/ies issued by competent authority, showing _____ origin <input type="checkbox"/> Certificate of Origin, Form 'A' in ___ original/s and ___ copy/ies issued by competent authority, showing _____ origin <input type="checkbox"/> Health Certificate in ___ original/s and ___ copy/ies <input type="checkbox"/> Veterinary Certificate in ___ original/s and ___ copy/ies <input type="checkbox"/> Phytosanitary Certificate in ___ original/s and ___ copy/ies <input type="checkbox"/> Certificate of Analysis in ___ original/s and ___ copy/ies <input type="checkbox"/> Other documents:
Period for presentation: within _____ days after shipment date, but within L/C validity
Additional conditions:
Commissions and Charges: Your commissions and charges are for: <input type="checkbox"/> applicant's account <input type="checkbox"/> beneficiary's account Commissions and charges outside Bulgaria/ KBC Bank Bulgaria EAD are for: <input type="checkbox"/> beneficiary's account <input type="checkbox"/> applicant's account All commissions and charges are for: <input type="checkbox"/> applicant's account <input type="checkbox"/> beneficiary's account Confirmation commissions (if any) are for: <input type="checkbox"/> beneficiary's account <input type="checkbox"/> applicant's account
Collateral: <input type="checkbox"/> please debit account IBAN BG _____ with you <input type="checkbox"/> credit line
Account for commissions and charges: IBAN BG _____
Applicant's Name and address:

In case of nonutilization of the LC you are authorized to pay the foreign bank commissions and charges, if the same are for Beneficiary's account and can not be collected from the latter.

Upon receipt of discrepant documents, which have been accepted by us, all the due commissions and charges will be deducted from proceeds remitted to the Beneficiary.

This Letter of Credit is subject to currently valid Uniform Customs and Practice for Documentary Credits

Compliant with Art. 4 par.7 and Art. 6 par. 5 of the Regulation for the implementation of the Measures against Money Laundering Act |

ID number
(first name, second name, surname)
 address
 Citizenship ID card
 in the capacity of of the initiator of this operation
 BULSTAT Hereby

declare that the funds under the present bank transaction have the following origin:.....

I am aware of the punitive responsibility, stipulated in Art. 313 of the Criminal code, should any of the contents started above be wrong. /signature/.

Signature/Company Seal