



You need Adobe Reader 9.0 to view this form. You can download Adobe Reader free of charge.

PLEASE ENSURE THIS FORM IS COMPLETED ONLINE (TYPED)

Enter Customer ID

Country

Select Bank

Bank Address

I/we request that you arrange for the following Documentary Credit to be amended as follows:

GENERAL

Credit Number

New Tolerance

+/-

%(if any)

Credit Amount

Currency

New Credit Amount

Currency

Current Expiry Date (dd/mm/yyyy)

New Expiry Date (dd/mm/yyyy)

PARTIES

Applicant

Name

Beneficiary

Name

Ref No.



SHIPMENT

Port of Loading/Airport of Departure

Place of Taking Charge/Dispatch From/Receipt

Place of Final Destination/For Transportation To/Place of Delivery

Port of Discharge/Airport of Destination

Latest Shipment Date (dd/mm/yyyy)

Please specify any changes to the Goods Description / Shipment details here

ATTRIBUTES

Additional conditions

Please specify any changes to the additional conditions here

SETTLEMENT INSTRUCTIONS

Principal

At payment **debit** account No.

At payment finance at our cost in for days

FEC / Deal No.

Due date

Charges

Debit Account No.

Cash Cover

(if Applicable) Debit Account No.



We are bound by and will comply with the ANZ Trade Terms and other applicable Trade Agreements provided or made available to us by ANZ (or as agreed in writing with us) from time to time. We have a copy of these documents or have accessed them at anz.com/corporate and have read them.

SIGNATORY

Company / Business Name

Include company identification number if applicable

ABN (only applicable in Australia)

Date (dd/mm/yyyy)

Authorised Signature

Authorised Signature

Name of Authorised Signatory

Name of Authorised Signatory

Company stamp or chop (if applicable):

BANK USE ONLY

OTL Cust ID

Signature/s Checked

Fax Indemnity Checked

TRO/TSO Name & Phone

Sanctions Checked

Workability Checked