



Application for issuance of Letter of Credit

To be completed by the Customer

Employee of Documentary Operations
Subdepartment

Place: _____

Date: _____

Number of application: _____

Applicant (hereinafter – Customer)

Name of the Customer

Customer's current account number

LV RIBR

Contact person

(name, surname, position)

Phone, e-mail

Beneficiary

Name,

registration number

Legal address

Beneficiary's Bank's name,

SWIFT code

Letter of Credit type and amount

Type	<input type="checkbox"/> Standard	<input type="checkbox"/> Confirmed	<input type="checkbox"/> Transferable
Amount and currency (amount in figures and in words)			
Amount	<input type="checkbox"/> Not Exceeding	<input type="checkbox"/> Tolerance +/- <input type="text"/> <input type="text"/> %	

Payment schedule, Time limits and Terms of Delivery

<input type="checkbox"/> at sight	<input type="checkbox"/> at <input type="text"/> <input type="text"/> days after sight	<input type="checkbox"/> at <input type="text"/> <input type="text"/> days from on board date	<input type="checkbox"/> other- show in field additional information
Latest date of shipment	_____. _____. _____ DD MM GGGG		
Presentation period	<input type="text"/> <input type="text"/> days after on board date		
Expiry date	_____. _____. _____ (Latest date of shipment + Presentation period) DD MM GGGG		
Shipment	From:	To:	
Partial shipment	<input type="checkbox"/> allowed	<input type="checkbox"/> not allowed	
Transshipment	<input type="checkbox"/> allowed	<input type="checkbox"/> not allowed	
Terms of delivery as per Incoterms 2010	Any transport mode: <input type="checkbox"/> EXW <input type="checkbox"/> FCA <input type="checkbox"/> CPT <input type="checkbox"/> CIP <input type="checkbox"/> DAT <input type="checkbox"/> DAP <input type="checkbox"/> DDP	Sea: <input type="checkbox"/> FAS <input type="checkbox"/> FOB <input type="checkbox"/> CFR <input type="checkbox"/> CIF	Place:

Customer's signature, printed name, seal

Description of goods

Quantity		Tolerance +/- <input type="checkbox"/> %
Unit Price		
Origin		
Contract/Proforma Invoice	No.	

Documents to be presented

Document description	Original	Copy
Commercial Invoice	<input type="checkbox"/>	<input type="checkbox"/>
Packing List	<input type="checkbox"/>	<input type="checkbox"/>
Certificate of Origin	<input type="checkbox"/>	<input type="checkbox"/>
Transport Document (AWB/ CMR/ RWB)	<input type="checkbox"/>	<input type="checkbox"/>
Transport Document (BL) Marked: <input type="checkbox"/> freight prepaid <input type="checkbox"/> freight payable at destination Consignee: <input type="checkbox"/> Beneficiary <input type="checkbox"/> To order Notify: <input type="checkbox"/> Beneficiary <input type="checkbox"/> Other		
Insurance Policy	<input type="checkbox"/>	<input type="checkbox"/>
Weight Certificate	<input type="checkbox"/>	<input type="checkbox"/>
Phytosanitary Certificate	<input type="checkbox"/>	<input type="checkbox"/>

List other documents or requirements in "Additional Information" section

Commissions

Bank charges outside issuing bank	<input type="checkbox"/> due to Customer	<input type="checkbox"/> due to Beneficiary
Intermediary bank commissions, if applicable- due to Customer		
Remittance charges of intermediary bank, if applicable- due to Beneficiary		

Collateral

<input type="checkbox"/> funds on Customer's current account	<input type="checkbox"/> deposit	<input type="checkbox"/> other- show in field additional information
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Attached

<input type="checkbox"/> copy of contract/proforma invoice	<input type="checkbox"/> other- show in field additional information
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Additional Information

I have read AS "Reģionālā investīciju banka", reg. No. 40003563375, legal address: 2 J. Alunana Street, Riga, Latvia, LV- 1010 (hereinafter – the Bank) General Terms and Conditions of Transactions, Terms of Issuing a Letter of Credit and Price List, and undertake to be bound thereby. I hereby authorize the Bank to withhold the commissions for services from my current account, without prior notice. This Application has been drawn up and is subject to the "Uniform Customs and Practice for Documentary Credits" issued by the International Chamber of Commerce (ICC, publication No. 600, 2007).

By signing the Application, the Customer certifies to the Bank that:

- the information provided and specified herein is true, full, accurate and valid;
- the Customer is aware and does not object that the Bank will carry out the processing of personal data of the Customer, its officials, real beneficial owners, shareholders and stockholders;
- the Customer is aware and does not object that the Bank will request and receive any other information about the Customer, its officials, real beneficial owners, shareholders and stockholders from the databases maintained by state institutions of the Republic

of Latvia, the Credit Register of the Bank of Latvia, credit institutions, as well as other registers, including those processing personal data, as well as request and receive the said personal data and/or information from any third parties.

I confirm that I have the right to transfer to the Bank the personal data of individuals specified in this Application, for provision of the service. I am informed of the order in which the Bank processes personal data and have read the principles of processing personal data of individuals by the Bank (available on the Bank's home page: www.ribbank.com and in the Bank's premises).

Employee of the Bank

Signature, printed name, date

Customer

Signature, printed name, seal