APPLICATION FOR AMENDMENT TO THE ISSUANCE OF DOCUMENTARY CREDIT

TO: **CHANG HWA COMMERCIAL BANK. LTD. HONG KONG BRANCH**
Incorporated in Taiwan with limited liability

DATE OF APPLICATION:

ADVISING BANK (if know)	CREDIT NO. AND DATE
	APPLICANT (NAME AND ADDRESS)
TO BE ADVISED BY: ☐ TELETRANSMISSION ☐ COURIER ☐ AIRMAIL	BENEFICIARY (NAME AND ADDRESS)

WE HEREBY REQUEST YOU TO AMEND THE ABOVE-MENTIONED CREDIT AS MARKED ☒ BELOW:

☐ 01 EXPIRY DATE: _____

☐ 02 LATEST DATE FOR SHIPMENT: _____

☐ 03 SHIPMENT TO BE EFFECTED BY AIRWAY/SEAWAY

☐ 04 SHIPMENT, FROM _____ FOR TRANSPORTATION TO _____

☐ 05 TRADE TERM: _____

☐ 06 PARTIAL SHIPMENT ALLOWED/PROHIBITED

☐ 07 TRANSHIPMENT ALLOWED/PROHIBITED

☐ 08 BENEFICIARY'S NAME AND ADDRESS TO BE READ AS FOLLOW: _____

_____

☐ 09 CREDIT AMOUNT DECREASED BY _____ MAKING NEW TOTAL AMOUNT _____

☐ 10 CREDIT AMOUNT INCREASED BY _____ MAKING NEW TOTAL AMOUNT _____

SHIPMENT OF ADDITIONAL GOODS: _____

_____

☐ 11 OTHERS

ALL OTHER TERMS AND CONDITIONS WILL REMAIN UNCHANGED.

WE HEREBY AGREE THAT WE SHALL NOT CAUSED YOU ANY LOSS OR TROUBLE WHATSOEVER IN CONSEQUENCE OF THE ALTERATION(S) AND UNDERTAKE TO ASSUME ALL OUR RESPONSIBILITIES AS PLEDGED IN THE ORIGINAL APPLICATION OF THIS DOCUMENTARY CREDIT

PLEASE DEBIT ALL CHARGES AND ADDITIONAL MARGIN TO OUR ACCOUNT NO.	(STAMP AND) SIGNATURE(S) OF APPLICANT
INSURANCE (WHERE INCREASE TO CREDIT AMOUNT IS REQUIRED) ☐ AS PER OPEN POLICY HELD BY BANK ☐ AS PER COVER NOTE ATTACHED ☐ TO BE COVERED BY ULTIMATE BUYER ☐ WILL BE SUBMITTED WITHIN 7 DAYS ☐ PLEASE COVER INSURANCE ON OUR BEHALF AND DEBIT OUR A/C FOR THE INSURANCE PREMIUM	

FOR BANK USE
APPROVED
CHECKED
Maked
S. V.