


APPLICATION TO AMEND OVER-THE COUNTER LETTER OF CREDIT-i

 ALLIANCE ISLAMIC BANK Alliance Islamic Bank Berhad 200701018870 (776882-V)	INSTRUCTION I/We hereby request you to issue an amendment to the original Over-The-Counter Letter of Credit-i in accordance with the undermentioned particulars and I/we agree to be bound by the terms and conditions under the original Over-The-Counter Letter of Credit-i application.
DATE OF THIS APPLICATION: _____	
APPLICANT (FULL NAME AND ADDRESS): Name: _____ Address: _____ _____	
ORIGINAL OVER-THE-COUNTER LETTER OF CREDIT-i DETAILS Letter of Credit-i No. : _____ Amount & Currency : _____ Beneficiary : _____	
AMENDMENT REQUEST <input type="checkbox"/> Extend Over-The-Counter Letter of Credit-i expiry date <input type="checkbox"/> Change in amount <input type="checkbox"/> Others (please specify) _____	
AMENDMENT REQUEST	
Extend Over-The-Counter Letter of Credit-i expiry date From : _____ To New Expiry : _____	Change in Amount Increase by : _____ Decrease by : _____
Others: (please specify in details) _____ _____ _____	
*All other terms and conditions remained unchanged	
MODE OF TRANSMISSION Please issue the amendment(s) by: <input type="checkbox"/> Air Mail <input type="checkbox"/> SWIFT	TO BE ISSUED <input type="checkbox"/> On my/our behalf and for my/our account <input type="checkbox"/> On behalf of _____ and for my/our account.
ACCEPTANCE BY BENEFICIARY I/We agree that any amendments are subject to the acceptance/consent of the Beneficiary.	

CHARGES

- Debit all charges to my/our Account No. _____ with Alliance Islamic Bank/Alliance Bank.
- Others (please specify) _____

FOR BANK USE ONLY

Signature(s)
verified by:

AUTHORISED SIGNATORY(IES) & COMPANY STAMP

Note:

(1) Mandatory to complete form and tick ✓ where applicable.

(2) Details of Islamic Trade Finance Fee & Charges is available in our website <https://www.alliancebank.com.my>