


APPLICATION TO AMEND OVER-THE-COUNTER LETTER OF CREDIT

 <b style="font-size: 1.2em;">ALLIANCE BANK Alliance Bank Malaysia Berhad 198201008390 (88103-W)	INSTRUCTION I/We hereby request you to issue an amendment to the original Over-The-Counter Letter of Credit 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 application.
DATE OF THIS APPLICATION: _____	
APPLICANT (FULL NAME AND ADDRESS):	
Name: _____	
Address: _____	

ORIGINAL OVER-THE-COUNTER LETTER OF CREDIT DETAILS	
Letter of Credit No. : _____	
Amount & Currency : _____	
Beneficiary : _____	
AMENDMENT REQUEST	
<input type="checkbox"/> Extend Over-The-Counter LC expiry date <input type="checkbox"/> Change in amount <input type="checkbox"/> Others (please specify) _____	
AMENDMENT REQUEST	
Extend Over-The-Counter LC expiry date	Change in Amount
From : _____	Increase by : _____
To New Expiry : _____	Decrease by : _____
Others: (please specify in details)	

*All other terms and conditions remained unchanged	
ISSUING METHOD	TO BE ISSUED
<input type="checkbox"/> SWIFT <input type="checkbox"/> Courier <input type="checkbox"/> Others: _____	<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 amendment(s) are subject to the acceptance / consent by the Beneficiary	
CHARGES	
<input type="checkbox"/> Debit all charges to my/our Account No. _____ with you <input type="checkbox"/> Others (please specify) _____	

<hr/> AUTHORISED SIGNATORY(IES) & COMPANY STAMP	FOR BANK USE ONLY	
	Signature(s) verified by:	
Note: (1) Mandatory to complete form and tick <input type="checkbox"/> where applicable. (2) Details of Trade Finance Fee & Charges is available in our website https://www.alliancebank.com.my		