

YIELD4FINANCEPRIVATELIMITED

L/CApplicationForm

SightL/CUsanceL/C

1.Applicant	Name:
	Address:
	Phone:
	Fax:
	Email :
	Contactperson:
2.Amountof LC:	
3.BeneficiaryBank	Name:
	Address:
	AccountNo.:
	SWIFTCODE:
4.Beneficiary	Name :
	Address:
	Phone :
	Fax:
	Email :
5.ExpirationDate	
6. LatestShipment Date	
7.ShipmentFrom	
8.ShipmentTo	
9.Partialshipment	Allowed / NotAllowed (circleone)
10.Transshipment	Allowed / NotAllowed (circleone)
11.Terms	FOB / CIF/ CFR/ DDP (circleone)
12.Shipment by	SEA / AIR / LAND (circleone)
13.ProFormainvoice	Merchandise Description:
	Number:
	Date:
14. Documents Required	Please listhere:

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15.SpecialConditions	L/CTransferable Yes / No (circleone) Others:
16.Sending InstrumentVia	SWIFT/ COURIER/TELEX(Circleone) IfbyCourier, please fillout below: BeneficiaryContactPeron Fulladdress: Phone: Email: