

Please complete this form, referring to the inserted guidance notes for assistance.  
Upon completion, please send to your Relationship Manager or Trade Centre.

## 1. Applicant's details

Name of Company	<input type="text"/>
	<input type="text"/>
Applicant's reference number	<input type="text"/>
Address line 1	<input type="text"/>
Address line 2	<input type="text"/>
Address line 3	<input type="text"/>
Address line 4 OR country	<input type="text"/>
Postal code	<input type="text"/> <input type="text"/>
Contact name	<input type="text"/>
Position held	<input type="text"/>
Preferred daytime contact number (including extension if applicable)	<input type="text"/>
Fax number	<input type="text"/>
Email address	<input type="text"/>

Address for service correspondence\*

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\*Please provide an address for service correspondence if it is different from the above given address.

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## 2. Method of issue

Please issue by: First Class Mail  OR Courier  OR Registered/Special Delivery

Additional charges apply for Courier or Registered/Special Delivery.

If the Standby Letter of Credit is to be issued by the Bank and the beneficiary needs to be advised by fax that it has been issued, please indicate this in Section 8, 'Special instructions'. Please include the beneficiary's fax number and a contact point.

To be delivered to the: Applicant  OR Beneficiary  OR Other

If 'Other', please specify \_\_\_\_\_

OR

Standby Letter of Credit advised through an overseas bank via SWIFT

OR

Standby Letter of Credit advised and confirmed by an overseas bank via SWIFT

OR

Standby Letter of Credit issued by an overseas bank via SWIFT

Nominated overseas issuing/advising and confirming bank and branch details (if any)


Where the beneficiary has nominated a bank, or one is required by the contract and/or local rules and regulations, the bank's name and branch address, if known, should be entered here.

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## 3. Format of Standby Letter of Credit - please select one of the following options

Bank's standard wording \*  OR In the format attached \*\*

If the format required has already been submitted and reviewed, please enter the reference  
(Please ensure that all details required for completion are provided)

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DWR

**\* Bank's standard wording**

If this box is marked the Bank will endeavour to incorporate your details into one of its standard texts (copies of which are available on request).

**\*\* In the format attached**

When a non-standard text is needed, more time is required before the Standby Letter of Credit can be issued. It is, therefore, important to submit your application as early as possible. The Bank will examine the text and, if satisfactory, will issue the Standby Letter of Credit. If the wording is not satisfactory, the Bank will amend the text. Prior to issuing the Standby Letter of Credit, the Bank will advise you of any amendments. Additional charges may be levied for approving/issuing non-standard text Standby Letters of Credit. This charge is dependent on time taken and complexity.

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## 4. Amount of Standby Letter of Credit

Currency (in words)

Amount (in words)

Currency code

Amount (in figures)

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## 5. Beneficiary details

Beneficiary's name	<input type="text"/>
Address line 1	<input type="text"/>
Address line 2	<input type="text"/>
Address line 3	<input type="text"/>
Address line 4 OR country	<input type="text"/>
Postal code	<input type="text"/> <input type="text"/>
Contact name	<input type="text"/>
Position held	<input type="text"/>
Preferred daytime contact number (including extension if applicable)	<input type="text"/>
Fax number	<input type="text"/>

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## 6. Brief description of goods/services/purpose of Standby Letter of Credit

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Please enter the details to identify the transaction that the Standby Letter of Credit covers.

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## 7. Details of Standby Letter of Credit terms

Expiry date	<input type="text"/>
Place of expiry	NatWest <input type="checkbox"/> <b>OR</b> Advising bank <input type="checkbox"/>
Available for payment at	NatWest <input type="checkbox"/> <b>OR</b> Advising bank <input type="checkbox"/>

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### 7.1 Documents required in the event of a claim

7.1.1 Certified true and correct copy invoice(s)

7.1.2 Certified true and correct copy transport document, evidencing shipment of the goods. Please specify the type below.  
(e.g. Bills of Lading, AWB, CMR) \_\_\_\_\_

7.1.3 Beneficiary statement (signatures appearing thereon to be authenticated by their bankers) that the customer has failed to make payment to them within

<input type="text"/>
<input type="text"/>

(e.g. 30 days from date of invoice).

These will be incorporated into the Standby Letter of Credit.

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## 8. Special instructions

Please enter any special instructions here (e.g. any additional delivery instructions for the Standby Letter of Credit)

Please enter any special instructions here (for example, any additional delivery instructions for the Standby Letter of Credit). All instructions must be clear and comprehensive.

If there is insufficient space to incorporate all special instructions on the application form, they should be detailed on a separate sheet and attached to the form. Make sure that you indicate on the form that special instructions are attached.

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## 9. Account details

Sterling account number

Sort code

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Currency account number (if applicable)

Please debit all charges to:

Sterling account

OR

Currency account

Please debit all payments to:

Sterling account

OR

Currency account

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## 10. Standby Letter of Credit Agreement

**THIS APPLICATION AND THE BANK'S TRADE SERVICES TERMS TOGETHER FORM AN IMPORTANT AGREEMENT. YOU SHOULD TAKE LEGAL ADVICE BEFORE SIGNING.**

The Trade Services Terms are available to be read and printed online. To access the Terms go to [www.natwest.com/terms](http://www.natwest.com/terms) and enter **tst0710**

Alternatively, a copy can be obtained from the Customer's Relationship Manager.

By signing:

- I/We confirm the details on the Application are correct.
- I/We agree to the Trade Services Terms.

Please Note:

### Charges

The Bank charges for providing Standby Letters of Credit. Please refer to your Relationship Manager for details. In addition, there may be overseas issuing/advising bank and/or other charges for SWIFT, postage, amendments, legal fees etc., together with local Stamp Duty/Taxes and such charges, all of which will be for your account.

### Non-refund policy

No commissions to be refunded where a Standby letter of credit is cancelled, reduced, expires totally or is partially utilised. Commissions on Standby Letters of Credit will continue to be charged until physical return of the Standby Letter of Credit, or until release by our Correspondent, notwithstanding stipulated expiry date.

**Signed in accordance with the authority held by the Bank**

For (name of company/firm) \_\_\_\_\_

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## Authorised signatories

Name \_\_\_\_\_

Name \_\_\_\_\_

Date

Date

Customers are advised to retain a copy of this document for their records.

**For Relationship Manager use only**

**Please note that the standard tariff, as detailed on the Intranet, will be taken from the date of issue (payable quarterly in advance). If a non-standard tariff has been agreed, via your GTS Sales Business Development Manager with Product Management, this will be held by the relevant Trade Centre and will take precedence.**

**Counter indemnity**

Is an Omnibus Counter Indemnity currently held for this customer?

Yes

No

**OR**

Is a Third Party Indemnity required?

Yes

No

Name(s) of party(s) e.g. company/individual (if a Third Party Indemnity is required)

**Cash cover**

Confirmation

If cash is held/to be held, is it legally charged?

Yes

No

A product limit covering all liabilities of:

Currency code

Amount (in figures)

 ,  ,  ,  ,  . 

has been sanctioned under

RMP Facility ID

PRISM Facility ID

Please indicate if the Facility is a MOF or Group Facility and if applicable please advise of the Parent Company details

I confirm the application has been completed in accordance with the current Bank Account Mandate and recommend its acceptance by the Bank. Please issue the Standby Letter of Credit in accordance with the customer instructions.

Relationship Manager's signature

Name

Branch/Unit

Location

Contact number

Fax number

Date

ISV number

**For Retail Credit use only**

Credit Sanctioner's signature and approved stamp