

Date	DD	MM	YYYY	LC For	<input type="checkbox"/> Goods	<input type="checkbox"/> Service	For Bank Use only	
SIDF ID						LC No.		
LC Type	<input type="checkbox"/> Transferable LC		<input type="checkbox"/> Standby LC					Time Stamp
	<input type="checkbox"/> Confirmed LC		<input type="checkbox"/> May Add Confirmation					
APPLICANT (Documents to be in the name of and / or notify party)								
NAME								
ADDRESS								
TELE / MOBILE						E-MAIL		
BENEFICIARY (Please print complete name and address)								
NAME								
ADDRESS								
COUNTRY								
TELE / MOBILE						E-MAIL		
ADVISING THROUGH		Advising Bank (subject to the requiring bank is approved by SNB. Otherwise, LC will be advised available with our approved correspondent)						
BANK NAME								
BANK ADDRESS								
BIC CODE								
IBAN								
CURRENCY							<input type="checkbox"/> About	
AMOUNT							<input type="checkbox"/> Plus / MINUS + / - _____ %	
IN WORDS								
PAYMENT TERM CREDIT AVAILABLE BY								
<input type="checkbox"/> Payment At Sight								
<input type="checkbox"/> Mixed payment (specify details) _____								
PARTIAL SHIPMENT			TRANSHIPMENT			LAST SHIPMENT DATE		DD
<input type="checkbox"/> Allowed <input type="checkbox"/> Not allowed			<input type="checkbox"/> Allowed <input type="checkbox"/> Not allowed			LC EXPIRY DATE		MM
								YYYY
PRESENTATION OF DOCUMENTS				<input type="checkbox"/> WITHIN () DAYS LC VALIDITY			<input type="checkbox"/> WITHIN LC VALIDITY	
PORT OF LOADING		FROM:			PORT OF DISCHARGE		TO:	
AIRPORT OF DEPARTURE					AIRPORT OF DESTINATION			
PLACE OF DISPATCH					PLACE OF DESTINATION			
DELIVERY TERMS (As per latest incoterms version)								
<input type="checkbox"/> EX WORKS (Specify the exact place above)			<input type="checkbox"/> FOB		<input type="checkbox"/> CFR		<input type="checkbox"/> CIF	
<input type="checkbox"/> FCA			<input type="checkbox"/> FAS		<input type="checkbox"/> CPT		<input type="checkbox"/> CIP (for shipment by container by sea and road, rail, air)	
							<input type="checkbox"/> Other _____	
BRIEF DESCRIPTION OF GOODS / PERFORMANCE								
<input type="checkbox"/> Food Grains	<input type="checkbox"/> Fruits & Vegetables	<input type="checkbox"/> Sugar, Tea and Coffee	<input type="checkbox"/> Livestock & Meat	<input type="checkbox"/> Other Foodstuff	<input type="checkbox"/> Textiles & Clothing	<input type="checkbox"/> Building Materials	<input type="checkbox"/> Motor Vehicles	<input type="checkbox"/> Machinery
								<input type="checkbox"/> Appliances
								<input type="checkbox"/> Other Goods
FOR INSURANCE								
IF THE DELIVERY TERMS DO NOT COVER INSURANCE, THE SAUDI NATIONAL BANK IS REQUESTED TO ARRANGE AN INSURANCE POLICY AT MY/OUR EXPENSE AND YOU ARE AUTHORIZED TO DEBIT MY/OUR ACCOUNT, ALTHOUGH THE SAUDI NATIONAL BANK IS NOT OBLIGED TO SECURE THE INSURANCE COVER.								
AUTHORIZED SIGNATURE								

DOCUMENTS REQUIRED (Please mark where applicable)

- SIGNED COMMERCIAL INVOICES IN ORIGINAL AND _____ COPIES CERTIFIED BY _____
- FULL SET OF ON BOARD MARINE BILLS OF LADING ISSUED TO THE ORDER OF THE SAUDI NATIONAL BANK SHOWING THE NUMBER OF THIS DOCUMENTARY CREDIT MARKED FREIGHT PREPAID FREIGHT PAYABLE AT DESTINATION. AND NOTIFY APPLICANT OR _____ AND APPENDED DECLARATION TO BILLS OF LADING AND SAFETY CERTIFICATE ARE REQUIRED.
- AIR WAY BILL (ORIGINAL NO.3 FOR SHIPPER) ESTABLISHED ON THE CARRIER LOGO PRINT AND CONSIGNED IN THE SAUDI NATIONAL BANK, SHOWING THE NUMBER OF THIS DOCUMENTARY CREDIT, ACTUAL FLIGHT DATE AND ACTUAL FLIGHT NUMBER DULY SIGNED BY THE CARRIER OR HIS AGENT AND MARKED FREIGHT PREPAID FREIGHT PAYABLE AT DESTINATION. AND NOTIFY APPLICANT OR _____ AND APPENDED DECLARATION TO AIRWAY BILLS IS REQUIRED.
- ROAD TRANSPORT DOCUMENT NAMEDLY TRUCK CONSIGNMENT NOTE SHOWING THE SAUDI NATIONAL BANK AS CONSIGNEE, THE NUMBER OF THIS DOCUMENTARY CREDIT, TRUCK LICENSE NUMBER, NAME OF THE DRIVER, NAME AND ADDRESS OF THE TRANSPORTER'S LOCAL AGENT AND MARKED FREIGHT PREPAID FREIGHT PAYABLE AT DESTINATION. AND NOTIFY APPLICANT OR _____
- INSURANCE POLICY OR CERTIFICATE IN DUPLICATE ISSUED TO THE ORDER OF THE SAUDI NATIONAL BANK IN THE CURRENCY OF THIS DOCUMENTARY CREDIT FOR AT LEAST %110 OF INVOICE VALUE. APPLICABLE TO CIF/CIP CREDITS A CERTIFICATE APPENDED TO THE INSURANCE POLICY ISSUED BY THE INSURANCE COMPANY.
- CERTIFICATE OF ORIGIN ISSUED BY _____ AND CERTIFIED BY _____ OR BY INDUSTRIAL UNION OF EXPORTING COUNTRY OR CCPIT STATING THE NAME AND ADDRESS OF MANUFACTURER OF THE GOODS AND STATING THAT GOODS ARE OF _____
- PACKING LIST IN _____ COPIES SHOWING DETAILS OF PACKING.
- CERTIFICATE OF WEIGHT IN _____ COPIES.
- (IN CASE OF SHIPMENT IN CONTAINER), A CERTIFICATE ISSUED BY THE BENEFICIARY STATING THAT A LABEL WITH NAME AND FAX/CABLE/ TELEX ADDRESS OF THE APPLICANT ALONG WITH A COPY OF PACKING LIST OR LIST OF CONTENT HAS BEEN AFFIXED ON THE INSIDE PART OF THE CONTAINER'S DOOR.
- FORWARDER'S CERTIFICATE OF RECEIPT (FCR) ISSUED BY THE SHIPPING AGENT M/S _____ CONFIRMING RECEIPT OF THE GOODS DESCRIBED IN THIS LETTER OF CREDIT FOR ONWARD DELIVERY TO _____
- OTHER DOCUMENTS AND CONDITIONS (See the attachment)

CHARGES			
ISSUING BANK CHARGES ARE FOR THE ACCOUNT OF THE	<input type="checkbox"/> APPLICANT ACCOUNT	<input type="checkbox"/> BENEFICIARY ACCOUNT	
CONFIRMING BANK CHARGES ARE FOR THE ACCOUNT OF	<input type="checkbox"/> APPLICANT ACCOUNT	<input type="checkbox"/> BENEFICIARY ACCOUNT	
ALL OTHER BANK CHARGES ARE FOR THE ACCOUNT OF THE	<input type="checkbox"/> APPLICANT ACCOUNT	<input type="checkbox"/> BENEFICIARY ACCOUNT	
I/WE HEREBY AUTHORIZE YOU TO DEBIT MY/OUR ACCOUNT FOR YOUR CHARGES AND AGREED MARGIN OR			
<input type="checkbox"/> 100% OF THE DOCUMENTARY CREDIT VALUE.			
I/WE HEREBY AUTHORIZE YOU TO HOLD THE MARGIN IN			
<input type="checkbox"/> LOCAL CURRENCY <input type="checkbox"/> FOREIGN CURRENCY TO BE SOLD TO ME/US AT YOUR PREVAILING SPOT RATE OR PRE-AGREED RATE AND ALSO AUTHORIZE YOU TO DEBIT MY/OUR ACCOUNT FOR THE VALUE OF DOCUMENTS RECEIVED.			

ACCOUNT NUMBER												
FOR MARGIN AND SETTLEMENT												
FOR BANK CHARGES												

TERMS AND CONDITIONS

Except as otherwise indicated, in the above publication and in the terms and conditions of this documentary credit, the general contract terms signed by me/us with your bank shall apply. You shall not be responsible for the validity, genuineness or correctness of the documents and/or any endorsement thereon. All actions taken by you in good faith in connection with such documentary credit shall be binding on Me/Us and shall not place you or your correspondent(s) under any obligation and/or liability to Me/Us.

We hereby declare and undertake that the goods/performances of this LC are identically corresponding with our commercial activity permitted in our C.R. and the facilities agreement. Under My/Our full and sole risk and responsibility, please issue this irrevocable documentary credit as per the above terms and conditions. This documentary credit and any further amendments are subject to the Uniform Customs and Practice for Documentary Credits 2007 Revision, Publication no. 600 (UCP600) of the International Chamber of Commerce, Paris. Moreover, you are hereby authorized (but no obliged) to demand any further documents in addition to the documents specified above under this documentary credit which you may deem necessary to comply with any other requirements.

We hereby undertake to indemnify to the Saudi National Bank, and hold the said bank non-obligated against any and all actions, claims or demands, proceedings, losses, liability, cost and expenses (including legal costs on full indemnity basis) which the said bank may suffer or incur by reason of deletion of: ISM certificate/ Vessel age clause/ Vessel route certificate and Appended declaration to the insurance policy or certificate.

Additionally, all parties involved under this transaction will be screened via World Check list or any other source approved by SNB.

Furthermore, we authorize The Saudi National Bank to Debit Value of the Shipment and all Charges from our Account without any Prior notice or Approval. We acknowledge and agree to incorporate the appropriate sanction clause as required by SNB.

We acknowledge and agree that all charges, expenses, prices, and all amounts due on us in connection with the issuance of this letter of credit in accordance with these terms and conditions are exclusive of the Value Added Tax ("VAT"), which shall be added by the Bank at the prevailing rate as applicable in accordance with the VAT Law promulgated by the royal decree no. (M/113) dated 1438/11/02H and its implementing regulations issued by the General Authority for Zakat and Income and all its amendments from time for most, and also are exclusive of any taxes that the Bank is obliged to collect under any laws or regulations or instructions whether related to enforce or manage VAT on goods and services in the Kingdom of Saudi Arabia or any other taxes at present or in the future. We hereby acknowledge and agree to pay the VAT collected by the Bank, and we also acknowledge and agree to be charged or debited from any of our accounts with the Bank.

AUTHORIZED SIGNATURE _____

