

Date	DD	MM	YYYY	Facility ID	LC Number

I/WE HEREBY REQUEST YOU TO AMEND THIS DOCUMENTARY CREDIT AS PER DETAILS GIVEN BELOW:

EXTEND LC VALIDITY DATE TO	DATE	DD	MM	YYYY

EXTEND SHIPMENT DATE TO	DATE	DD	MM	YYYY

INCREASE LC AMOUNT BY (CURRENCY & AMOUNT)	CURRENCY	AMOUNT

DECREASE LC AMOUNT BY (CURRENCY & AMOUNT) DECREASE SHOULD BE ALIGNED WITH BENEFICIARY	CURRENCY	AMOUNT

LC CANCELLATION CANCELLATION SHOULD BE ALIGNED WITH BENEFICIARY
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DESCRIPTION OF GOODS SEE THE ATTACHMENT
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PAYMENT TERMS SEE THE ATTACHMENT
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ADDITIONAL CONDITIONS SEE THE ATTACHMENT
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REQUIRED DOUCMENTS SEE THE ATTACHMENT
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OTHER SEE THE ATTACHMENT
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ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.

## 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.

## CHARGES

AMENDMENT CHARGES ARE FOR THE ACCOUNT OF THE  APPLICANT'S ACCOUNT  BENEFICIARY'S ACCOUNT

I/WE HEREBY AUTHORIZE YOU TO DEBIT MY/OUR ACCOUNT FOR AMENDMENT CHARGES AND AGREED MARGIN RELATIVE TO INCREASE IN DOCUMENTARY CREDIT AMOUNT . SUCH MARGIN SHALL BE PLACE ON HOLD AS IN THE CASE OF THE ISSUANCE OF ABOVE ENTIONED DOCUMENTARY CREDIT.

AUTHORIZED SIGNATURE(S)	
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