

## **Application for opening of Letter of Credit**

Applicant: Contact person:	De visto di se		
Phone: Registration No:			
Date and Place of Expiry:			
Beneficiary:			
For our account please open*:			
unconfirmed letter of credit	confirmed letter of credit		
transferable letter of credit	stand by letter of credit		
*This documentary credit is subject to Uniform Customs and Pracissuance subject to that Rules	ctice for Documentary Credits, 2007 Revision, International C	hamber of Commerce, Publication No. 600 or ISP98 in case of SBLC	
Beneficiary's Bank:			
SWIFT:			
Currency and Amount:			
Credit Amount Tolerance: +/-	1		%
Payment:			
at sight		by Acceptance	
by Deffered Payment		by Negotiation	
days from			
Partial Shipments:	Allowed	Not allowed	
Transhipment:	Allowed	Not allowed	
Shipment from:			
For transport to:			
Latest date of Shipment:			
Description of goods or services:			
Trade term:			
Dual-use goods? No If the answer is yes, please provide tari	Yes c code and submit the appropriate lic	cense from the ministry**.	



Documents Required:				
Additional Conditions:				
All Commissions and charges outside Slo	ovenia are for the Account of			
_	eficiary			
Documents to be presented in	days after the date of shipment, but v	vithin validity of LC		
	days after the date of ompinent, but t	viami validity of 20		
For LC insurance:		for the LO arrespond		
You are authorized to debit our Accor		for the LC amount		
At the opening of LC a loan will be approved for the LC amount				
Statement:				
You are authorized to debit our Account r				
for the commissions and charges which will arise under this LC.				
<ul> <li>We declare the following:</li> <li>The activities of our company are not listed on the bank's ESG exclusion list, as published on the NLB d.d. website (<a href="https://www.nlb.si/izkljucitveni-seznam">https://www.nlb.si/izkljucitveni-seznam</a>).</li> </ul>				
<ul> <li>Our company has obtained all necessary permits, consents, and approvals required by applicable regulations in the fields of environmental protection and social welfare. We comply with regulations and have taken all necessary measures to adhere to the relevant legislation.</li> </ul>				
Remarks:				
	Signature			
Place and Date:	of the Applicant (digital or handwritten)			
	Name and			

Surname

(to be filled in case of manual signing)