

APPLICATION FOR COLLECTION OF CHECK  
光票託收申請書

TO: FIRST COMMERCIAL BACNK  
MACAU BRANCH  
第一商業銀行澳門分行

Tel 電話號碼: (853)2857 5088

DATE 日期:

Fax 傳真號碼: (853)2872 2772

We//request you to collect attached check(s) as below, subject to conditions on the reverse side hereof.

依據本申請書背面之條款，茲本號(人)委託 貴行收妥下列票據款項

DATIALS OF CHECK(S)票據明細					
DRAWER 發票人	DRAWEE 受款人	DATE OF DRAWING 發票日	CHECK NO. 票據號碼	AMOUNT 金額	BANK REFERANCE NO. 託收銀號編號

INSTRUCTIONS FOR THE PAYMENT 付款指示:

Please credit the proceeds to our Account No.

請將收妥款項存入本人帳戶，帳號：

We (I) unconditionally guarantee to refund to you on demand the proceeds of the abovementioned cheque(s), should the cheque(s) be returned unpaid or should payment be in any other ways delayed or stopped.

本號(人)茲向 貴分行保證如上列票據因存款不足，業經止付或其他任何原因而未獲兌現時，一經 貴行通知本人願立即歸還 貴行所墊款項。

APPLICANT'S NAME 申請人名稱:  I.D. No. 統一編號:	APPLICANT'S ADDRESS 申請人地址:  TEL No. 電話號碼:
APPLICANT'S SIGNATURE 申請人簽章:	MANAGER 主管:                      MAKER 經辦:

## CONDITIONS

It is understood and agreed that:

1. Having exercised due care in the selection of any correspondent to whom the mentioned item may be sent for collection you shall not be responsible for any act, omission, default, suspension, insolvency or bankruptcy of any such correspondent or sub-agent thereof, or for any delay in remittance, loss in exchange or loss of item or its proceeds during transmission or in the course of collection, but your responsibility shall be only for your own acts.
2. In the case of dishonour of check(s) by reason of non-payment or by other reasons whatsoever. We/I authorize you to waive protest and agree that you shall not perform in any way statutory proceedings in this regard.
3. All charges and expenses incurred for the presentation or handling of check(s) shall be borne by us/me, whether or not the collection is paid.
4. The present collection is subject to Uniform Rules for Collections, International Chamber of Commerce(ICC)