

To: FIRST COMMERCIAL BANK, LTD. HONG KONG BRANCH
(Incorporated In Taiwan with limited liability)

DATE :

Advising Bank :

- (20) Credit No. (21) Advising Bank Ref. No.
(31C) Date of Issue :
(59) Beneficiary(before this amendment) :

We hereby request you to amend the above mentioned credit by ☐ Airmail ☐ Cable As Marked ☒ Below :

- (26E) Number of Amendment :
(30) Date of Amendment :
☐ (31D) Date and Place of Expiry :
☐ (59) Beneficiary (Name And Address) :
☐ (32B) Increase Amount :
☐ (33B) Decrease Amount :
☐ (39) Credit Amount Tolerance : ☐ Plus/ Minus : % ☐ Others :
☐ (42) Draft At ☐ sight ☐days after sight ☐days after shipment date ☐days after B/L date for full invoice value drawn on you/your correspondent
☐ (43P) Partial Shipments : ☐ Allowed ☐ Not Allowed
☐ (43T) Transshipment : ☐ Allowed ☐ Not Allowed
☐ (44) Place of Receipt : ;
Port/Airport of Loading : ;
Port/Airport of Discharge : ;
Place of Delivery : ;
☐ (44C) Latest Date of Shipment :
☐ (45B) ☐ Add Description of Goods :
☐ Delete Description of Goods :
☐ Replace All Description of Goods :
☐ (46B) ☐ Add Documents Required :
☐ Delete Documents Required :
☐ Replace All Documents Required :
☐ (47B) ☐ Add Special Instructions :
☐ Delete Special Instructions :
☐ Replace All Special Instructions :
☐ (71D) Charges :
☐ All banking charges outside Hong Kong including reimbursement commission are for ☐ Applicant's ☐ Beneficiary's account.
☐ Discount charges, interest where applicable are for ☐ Applicant's ☐ Beneficiary's account. (For USANCE DC only)
☐ Acceptance commission where applicable are for ☐ Applicant's ☐ Beneficiary's account. (For USANCE DC only)
☐
☐ (48) Period for presentation : Days After The Date Of Shipment
☐ (49) Confirmation Instructions : ☐ Confirm ☐ Without.
☐

Other Instructions :

- ☐ Please debit all charges and /or additional margin to our account no. _____
☐ Above amendment is subject to beneficiary's consent by cable.

All other terms will remain unchanged.

We hereby agree that we shall not cause you any loss or trouble whatsoever in consequence of the alteration(s) and undertake to assume all our responsibilities as pledged in the original application of this documentary credit.

APPLICANT: 	FOR BANK USE ONLY: Add. Margin % . _____ Approval No. _____ Comm. @ % . _____ Date Of Approval _____ @ . _____ Term _____ Postage/Cable . _____ Credit Line _____ Total . _____
Authorized Signature And Company Chop Tel No. _____	MANAGER: _____ CHECKER: _____ MAKER: _____ (S.V.)