



o: UNITED OVERSEAS BANK LIMITED		Tel: (65) 6878 0707
Please complete form clearly in English & BLOCK LETTERS.	BANK USE ONLY	
Credit Number	Amendment No.	Approved By
Applicant Details	Beneficiary Details	
Applicant Full Name & Address	Beneficiary Full Name & Address	
Account Number		
Amendment Details		
1 Increase Amount of Credit By:		
2 Decrease Amount of Credit By:		
3 Extend Expiry Date to:		
4 Extend Latest Shipment Date to:		
5 Please debit margin deposit from account number:		
6 Please amend the above mentioned credit by: □ SWIFT □ Courier □ Registered Airmail □ Co	ollection at Counter* (*select which applicable)	
7 Amendment charges to be paid by:		
☐ Beneficiary ☐ Us		
Any other amendment(s) or instruction(s):		
We request you to amend the documentary credit with the abovementioned Credi our Application for Irrevocable Documentary Credit relating to the DC. All other ter We acknowledge that all amendments will be subject to acceptance by the confirm Uniform Customs and Practice for Documentary Credits as indicated in the DC.	rms and conditions of the DC remains unchanged. ming bank (if any) and the beneficiary. This amendment is s	subject to the version of ICC
We agree to continue to be bound by the Terms and Conditions for Irrevocable Do	ocument Credit application which is available at uob.com.s BANK USE ONL	
	SV	

FRN-8.10/F (R12.22)

Authorised Signature(s) & Company Stamp



Application for Amendment to Irrevocable Documer	
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