



DLC APPLICATION FORM

| | |
|-----------------------------------|--|
| VALIDITY | |
| LC AT SIGHT OR USANCE LC | |
| SWIFT OR HARDCOPY | |
| APPLICANT'S DETAILS | |
| NAME: | |
| ADDRESS: | |
| CONTACT NO.: | |
| EMAIL: | |
| CONTACT PERSON: | |
| AMOUNT OF DLC | |
| BENEFICIARY'S DETAILS | |
| NAME: | |
| ADDRESS: | |
| CONTACT NO.: | |
| EMAIL: | |
| CONTACT PERSON: | |
| BENEFICIARY'S BANK DETAILS | |
| NAME: | |
| ADDRESS: | |
| SWIFTCODE | |
| ACCOUNT NUMBER | |
| SHIPMENT DETAILS | |
| LATEST SHIPMENT | |

| | |
|---------------------------------|------------------------------|
| DATE | |
| SHIPMENT FROM | |
| SHIPMENT TO | |
| INCOTERMS | FOB/CIF/CFR/DDP |
| SHIPMENT BY | SEA/AIR/LAND |
| PARTIAL SHIPMENT | ALLOWED / NOT ALLOWED |
| TRANS SHIPMENT | ALLOWED / NOT ALLOWED |
| PROFORMA INVOICE DETAILS | |
| PROFORMA INVOICE NO | |
| PROFORMA INVOICE DATE | |
| DESCRIPTION OF GOODS | |