



To: The Hongkong and Shaghai Banking Corporation Limited

APPLICATION FOR GOODS RELEASE

Note: Please mark where applicable

Documentary Credit Number	Goods Amount	Date <table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y			

Details of Goods (This section MUST be completed)			
Description			Marks and Numbers
Quantity	Gross weight	Invoice Number	

Goods release Method and Details of Document									
Goods Shipped by Sea									
Please endorse to my/our the following Bill of loading and domiciliate the following invoice									
Name of Shipping Company	Shipping Company Code (for Bank Use Only)								
Name of vessel	Bill of Lading Number								
Invoice Number	Invoice date <table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		
Amount invoice									
In making this application for the release of goods, I/we authorise you to effect payment of the relative Bill on presentation even where documents contain discrepancies.									
Goods Shipped by Air / Parcel Post (Release under Air Waybill / Parcel Post Receipt)									
Please endorse to my/our order the following Air waybill / Parcel Post Receipt relating ti the Bill drawn on me/us which is in transit									
Air Waybill / Parcel Post Receipt Number	Flight Number								
Invoice Number	Invoice date								
Amount invoice									
In marking this aplication for the release of goods, I/we accept liability for payment of the relative Bill even where documents contain discrepancies.									

We totally disclaim you from all consequences may result from this operation.

We irrevocably accept the documents as they will be presented under the documentary credit as mentioned above, opened by you on our instructions even where this documents contain discrepancies.

We authorize you to debit our account no. for any amount claimed under this documentary credit plus any charges

The termes of this commitment are final and can't be contested by us.

Authorised Signature(s) and Company Stamp

Name of Contact Person
Contact Telephone Number
Imports Account Number

For Bank Use Only

DC Overdrawn by (Amount)	Goods Description in DC matches with the Invoice <input type="checkbox"/> YES <input type="checkbox"/> No Trasport Document	Document(s) Received <input type="checkbox"/> Invoice original <input type="checkbox"/> Trasport Document original	First Checked by	Second Cheked by (Officer)
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