



Export Collection Bills Application Form (Without Letter of Credit)

We hand you drafts and/or documents as specified below for disposal in accordance with the instruction mentioned herein.

Drawer (Name & Address) : Contact Person: _____ Phone No.: _____	Collecting Bank : Bill Currency & Amount :
Drawee (Name & Address) :	Bill of Exchange No.and Date : Description of Goods :
Tenor of Bill of Exchange 1. <input type="checkbox"/> At Sight 2. <input type="checkbox"/> _____ Days After Sight 3. <input type="checkbox"/> Others : _____ (Please specify)	

Documents enclosed (please indicate the number of originals and copies)

	Bill of Exchange	Commercial Invoices	Packing List	Bill of Lading	Air Waybill	Insurance Policy/ Certificate	Certificate of Origin	Inspection Certificate	Beneficiary Certificate	Weight List	Delivery Order
Original											
Copies											

Other Document(s) (Please specify) :

We hereby instruct you to dispose the draft and relative documents by following our instructions marked "X"

<u>Instruction to Collecting Bank</u>	
Release documents against	<input type="checkbox"/> Payment <input type="checkbox"/> Acceptance
Collect drawer bank charges from	<input type="checkbox"/> Drawer <input type="checkbox"/> Drawee
Collect drawee bank charges from	<input type="checkbox"/> Drawer <input type="checkbox"/> Drawee
For non-payment /non-acceptance	<input type="checkbox"/> Protest <input type="checkbox"/> Do not Protest
For charges / interest	<input type="checkbox"/> Waive <input type="checkbox"/> Do not Waive
<input type="checkbox"/> Other Instructions (Please specify) :	
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <hr style="border: 0; border-top: 1px solid black; margin-top: 5px;"/>	
** This documents should be handled with the Subject in accordance to the Uniform Rules for Collections, 1995 revision, ICC Publication No.522.	

Proceeds Disposal : <input type="checkbox"/> Please credit our Account with you upon receipt of funds. <input type="checkbox"/> Other Instruction (specify)
We instruct KBZ Bank to despatch the bills by courier service at our risks under the Terms and Conditions set forth on reverse page and to debit our account below for all your charges. Account No : Signature & Company Stamp : Date :