

## Import Bills Form 4 Issuance and Remittance Application form ARAB REPUBLIC OF EGYPT

We hereby request that Standard Chartered Bank, Egypt Branch (the “Bank”) to fill in and accordingly issue Form 4 on our behalf, containing the following details:

1. APPLICANT DETAILS	
1.1 Applicant Name:	1.2 Applicant Address:
1.3 Applicant Import Card No.	1.4 Applicant Tax Card No:
1.5 Line of Business	1.6 Name of contact person
1.7 Debit Account for Admin Fees & Commission	1.8 Telephone of contact person
2. SHIPMENT DETAILS	
2.1 Invoice Number	2.2 Invoice Date
2.3 Shipping Document Number	2.4 Shipping Document Date
2.5 Goods Description	
2.6 Quantity	2.7 Value of Documents
2.8 Currency	2.9 County of origin
2.10 Imported from	2.11 Trade Term (Ex: EXW, FOB, CFR, CIF, ...etc)
2.12 ACID No.	2.13 HS Code
2.14 Form4 Required as per the below: Please tick transaction type: <input type="checkbox"/> Open Account <input type="checkbox"/> Import Bill Collection (IBC) Reference: <input type="checkbox"/> Import LC (ILC) Reference:	
3. TERMS OF PAYMENT	
Please tick one of the below: <input type="checkbox"/> Advanced Payment as per Proforma invoice – swift message attached <input type="checkbox"/> Cash Against Documents (Sight) <input type="checkbox"/> Deferred Payment (        Days) from (B/L, AWB, Invoice,..etc) Specify deferred payment date:	

#### 4. REMITTANCE AMOUNT

Please enter Currency of Remittance and amount to be remitted or equivalent currency amount to be converted.

Currency of Remittance

Amount to be Remitted

In Words

Charge Type:  SHA - Local charges borne by remitter & overseas by beneficiary

OUR - All local and overseas charges borne by remitter

BEN - All local and overseas charges borne by beneficiary

Value Date \*

#### 5. RECIPIENT'S (BENEFICIARY) INFORMATION

Account No. / IBAN

Account Name & Address \*

##### Recipient's Bank Details

Bank Name

Country

SWIFT / Clearing Code

Address

Country \*

#### 6. PAYMENT DETAILS

6.1 Debit Account No.

6.2 Payment CCY & Amount

We hereby authorize the Bank, without any liability or responsibility on its side and on our own responsibility, to issue and complete Form 4 on our behalf in accordance with the above details and to subsequently debit all the related commissions and administration charges from our account number ( ).

We hereby confirm that the information provided above is correct and accurate and the Bank shall not be responsible or liable for any losses, costs or damages as a result of relying on the above information to complete Form 4 on our behalf.

Moreover, we authorize you to book cash collateral in case it applies as per the Central Bank of Egypt regulations by debiting our account number ( ).

In case cash collateral will be collected in currency other than the Import Transaction currency, we authorize you to collect the cash collateral amount at your discretion. We also acknowledge your right to increase the cash collateral percentage at any time without referring to us to face any changes in exchange rates.

We, ( ), hereby undertake that the shipping documents attached to this form issued in the name of ( ) and which we will use to implement the importation transaction was not and will not be presented to any other bank in order to avoid duplication in the implementation of the importation transaction. We shall be deemed fully liable and responsible should there be any breach to this undertaking. Additionally, we are aware that shipments should be cleared from the customs within 30 days from the issuance of the relevant Form 4. We acknowledge that failing to fulfil any of our undertakings herein entitles you to report to the Central Bank of Egypt all the data related to us and our related parties to add us and them to a blacklist of clients failing to execute importation transactions, which leads to our inability, and our related parties to execute any importation transaction in the future.

We release the Bank from any liability and indemnify and hold the Bank indemnified against any actions, suits, proceedings, costs, claims, demands, charges, expenses and /or losses whatsoever arising of or in connection with the Bank acting on our above request.

Best Regards,

Name	
Signature	
Date	