

Date:  /  /

L/G NO : 644-LG-

**APPLICATION FOR BANK GUARANTEE**

Dear Sir,  
 Please issue a Bank Guarantee for my / our account in accordance with the undermentioned particulars. We agree to be bound by the terms and conditions of the Letter of Indemnity.

<b>PARTICULARS OF APPLICANT</b>	
Name	<input type="text"/>
(*3rd Party Name) if applicable	<input type="text"/>
Name*	<input type="text"/>
Address	<input type="text"/>

<b>PARTICULARS OF BENEFICIARY</b>	
Name	<input type="text"/>
Address	<input type="text"/>

<b>PURPOSE OF L/G</b>	<input type="text"/>
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<b>TYPE OF GUARANTEE (* to tick ✓)</b>			
<input type="checkbox"/> Custom (A1)	<input type="checkbox"/> Custom (A2)	<input type="checkbox"/> Advance/Warranty Payment Bond	<input type="checkbox"/> Performance Bond
<input type="checkbox"/> Custom (B1)	<input type="checkbox"/> Custom (B2)	<input type="checkbox"/> Security Deposit	<input type="checkbox"/> Utilities
<input type="checkbox"/> Custom (C1)	<input type="checkbox"/> Custom (C2)	<input type="checkbox"/> Bid / Tender	<input type="checkbox"/> Financial Guarantee
<input type="checkbox"/> Custom (D1)	<input type="checkbox"/> Custom (D2)	<input type="checkbox"/> Others _____	

<b>TYPE OF APPLICATION (to tick ✓)</b>		
<input type="checkbox"/> <b>New Issuance</b> <input type="checkbox"/> <b>Renewal from L/G No:</b> <input type="text"/> Currency Amount In Figures <input type="text"/> Currency Amount In Words <input type="text"/> Effective Date (dd/mm/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/> Expiry Date (dd/mm/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/> Claim Period of L/G (if any)* <input type="text"/> * Commission will be charged up to claim period Direct Issuance (to tick ✓) <input type="checkbox"/> via Swift* <input type="checkbox"/> via Letter * Bank Name and Swift Code <input type="text"/>	<input type="checkbox"/> <b>Extension</b> <b>L/G No:</b> <input type="text"/> Currency Amount In Figures <input type="text"/> Currency Amount In Words <input type="text"/> New Effective Date (dd/mm/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/> New Expiry Date (dd/mm/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/> New Claim Period of L/G (if any)* <input type="text"/> * Commission will be charged up to claim period Other (if any, please specify) <input type="text"/>	<input type="checkbox"/> <b>Amendment</b> <b>L/G No:</b> <input type="text"/> Currency Amount In Figures <input type="text"/> Currency Amount In Words <input type="text"/> Amend on Effective Date (dd/mm/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/> Amend on Expiry Date (dd/mm/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/> Amend on Claim Period of L/G (if any)* <input type="text"/> * Commission will be charged up to claim period Other Amendment (if any, please specify) <input type="text"/>

<b>COLLECTION / COURIER INSTRUCTION</b>		
<input type="checkbox"/> To collect personally at your office by <small>(All charges by courier despatch to be debited from our account)</small>	Name : <input type="text"/>	IC / Passport No : <input type="text"/>
<input type="checkbox"/> Please Courier to us	Attn : <input type="text"/>	Contact No : <input type="text"/>
<input type="checkbox"/> Please Courier to Beneficiary	Address/Dept : <input type="text"/>	

<b>STAMPING</b>
<input type="checkbox"/> We request you to send the above mentioned guarantee on my/our behalf for stamping * Stamping process will take approximately 3 to 12 working days
<input type="checkbox"/> We would like to do our own stamping at LHDN office

<b>INSTRUCTIONS OF BANK CHARGES</b>
We authorise you to debit all bank charges from our bank account no. <input type="text"/>

Kindly refer to our website at [www.bk.mufg.jp/malaysia/pdf/announcement\\_on\\_sanctions\\_clause\\_initiative.pdf](http://www.bk.mufg.jp/malaysia/pdf/announcement_on_sanctions_clause_initiative.pdf) for more details regarding the Standard Sanctions Clause which shall be incorporated into the body text of this instruments. Please take note that such clause may be revised, amended or varied from time to time in accordance with the applicable laws or regulations.

**AUTHORISED SIGNATURE (s) AND COMPANY CHOP**

All alteration must be duly signed by authorised signature / signatories