

YIELD 4 FINANCE PVT. LTD.

| APPLICANT | NAME: | |
|------------------------|-------------------|--|
| | ADDRESS: | |
| | CONTACT NO.: | |
| | FAX: | |
| | EMAIL: | |
| | CONTACT PERSON: | |
| AMOUNT OF SBLC: | | |
| BENEFICIARY BANK | BANK NAME: | |
| | BANK ADDRESS: | |
| | BANK SWIFT CODE: | |
| | BANK ACCOUNT NO.: | |
| BENEFICIARY | NAME: | |
| | ADDRESS: | |
| | PHONE: | |
| | FAX: | |
| | EMAIL: | |
| SENDING INSTRUMENT VIA | | SWIFT/COURIER/TELEX If by COURIER, please fill out below: Beneficiary Contact Person: Full Address: Phone: Email: |
| TENURE: | | Liliali. |