

We hereby request Nordea Bank Abp (the "Bank") to amend the Documentary Credit (the "Credit") mentioned beside for our account and at our risk according to the instructions given by us on this form.

Nordea's reference number

Applicant's name and address

Contact person

Telephone

Fax

Business ID/Identity No.

Beneficiary's name and address

Beneficiary's bank (when known)

Fill in amendments only

New place and date for expiry

☐ Increase amount with

☐ Decrease amount with

Shipment from

Shipment to

New currency and amount

Tolerance (if any)
+/- %

Partial shipment

☐ allowed ☐ not allowed

Transshipment

☐ allowed ☐ not allowed

Credit available

☐ at sight ☐ at days after ☐ shipment

Terms of delivery (Incoterms 2010)

☐ CIP ☐ CPT ☐ FCA ☐

☐ CIF ☐ CFR ☐ FOB

☐ sight

☐

Place (terms of delivery)

Latest date of shipment

Confirmation of the credit

☐ requested ☐ not requested ☐ may add

Other amendments

Nordea's charges regarding this amendment to be paid by

☐ Applicant ☐ Beneficiary

Bank charges outside Nordea regarding this amendment to be paid by

☐ Applicant ☐ Beneficiary

Forward contract No.

Debit account No. for principal amount

Debit account No. for charges

The latest revision of ICC Uniform Customs and Practice for Documentary Credits shall be applied to this Documentary Credit.

We undertake to pay the Bank on demand any amount which the Bank has paid or is liable to pay according to the Documentary Credit amended on the basis of this request. In addition we undertake to comply with the Nordea General Terms and Conditions for Documentary Credits set out below. We consent to the use and disclosure of information as set out in clause 6 (Information) of such terms and conditions.

National statistics

Beneficiary's country code

Code of Central Bank

Place and date

Applicant's name and authorized signature(s)

To be completed by relevant Nordea Customer Responsible Unit

Credit to be amended

☐ by single credit approval ☐ within limit ☐ covered

Place and date

The credit has been approved.

Name of bank and Customer Responsible Unit and authorized signature(s)