



To : Maybank Singapore

Date (dd/mm/yyyy)

**1. Applicant's Name and Address**

Contact Person	<input type="text"/>
Telephone Number	<input type="text"/>
Email Address	<input type="text"/>
Fax Number	<input type="text"/>

**2. Beneficiary's Name and Address**

Contact Person	<input type="text"/>
Telephone Number	<input type="text"/>
Email Address	<input type="text"/>
Fax Number	<input type="text"/>

**3. Third Party's Name and Address (if applicable)**

**4. Advising / Correspondent Bank (Name, Address & SWIFT code)**

*(this field is mandatory if you apply for Counter Guarantee if BG issuance via SWIFT)*

SWIFT Code

**5. Application Type**

Banker's Guarantee

Counter Guarantee

Others, if any (please specify)

**Important Note:** Please enclose the necessary supporting documents with this application e.g. Letter of Award, Contract, Agreement, etc.

**6. Type of Application**

A) Issuance	B) Renewal	C) Extension/Amendment
Currency Amount In words	<i>(Applicable if tenor more than 1 year &amp; new BG is issued)</i>	<i>(Applicable if tenor less than 1 year)</i>
BG Effective Date <i>Indicate dd/mm/yyyy or "Same as BG Issue Date"</i>	Expiring Guarantee Number :	Existing Guarantee Number :
Expiry Date/BG Period (No. of months) <i>Indicate dd/mm/yyyy or BG Period i.e no. of months</i>	Renew BG for the amount below: Same Amount Different Amount (indicate below)	For Extension, please indicate the New Expiry Date (dd/mm/yyyy)
Claim Period*(No. of days/months after expiry date) <i>Indicate no of days or months</i>	Currency Amount In words	Other amendments (if any, please specify) :
	New Expiry Date (dd/mm/yyyy)	

*\*If left blank, Maybank has the right to impose 14 days (or such other number of days as per Maybank standard format) from the expiry date. For Extension/ Amendment, only a supplemental letter will be issued.*

**7. Collection Instructions**

I/We hereby authorise

I.C./Passport No.

to collect the above mentioned guarantee on my/our behalf for delivery to the beneficiary.

Please contact us for self collection.

Please courier directly to Beneficiary as per Address & Contact Person details indicated in Field 2 above.

\*\*Please issue this BG by authenticated SWIFT to Advising/Correspondent bank for delivery to Beneficiary and furnish us a copy.

( Others, if any

(please specify) :

\*\* Mandatory option if this is application is for Counter Guarantee or BG issued via SWIFT

**8. Special Conditions**

Please issue the Bank Guarantee in Maybank standard format.

Please issue the Bank Guarantee in the format attached to this application (if approved by Maybank).

Others, if any

(please specify):

**9. Instructions on Bank Charges**

We authorise you to debit our bank account number:

with you all amounts

payable by us in connection to the Trade Service provided by you to us, including but not limited to fees, charges, expenses, commission and any principal interest.

**10. Applicant's Authorisation and Declaration**

- a) We request that you provide the relevant Bank Guarantee services (the "Trade Service") in accordance with our instructions requested above.
- b) We agree to be bound by (a) the Transaction Banking Terms, or (b) the Standard Terms and Conditions, the General Trade Terms and any applicable Country Supplement and/or Service Supplement (as the case may be and each as amended from time to time).
- c) Any term defined in the terms and conditions referred to in paragraph 10(b) above shall have the same meaning set out in this Application Form.

**11. Authorised Signatory/ies (Complete with Company Stamp, wherever applicable)**

The term "Maybank Singapore" used throughout this Application Form means Malayan Banking Berhad, Singapore Branch or Maybank Singapore Limited, as the case may be, with whom the Applicant has entered into an Agreement for the banking facilities/services referred to in this Application Form.