**SGC INVESTMENTS LLC**

**APPLICATION FORM**

**Letter of Credit / SBLC**

|  |  |  |
| --- | --- | --- |
| APPLICANT | NAME: |  |
| ADDRESS: |  |
| CONTACT NO.: |  |
| FAX: |  |
| EMAIL: |  |
| CONTACT PERSON: |  |
| AMOUNT OF LC/SBLC: | |  |
| BENEFICIARY BANK | BANK NAME: |  |
| BANK ADDRESS: |  |
| BANK SWIFT CODE: |  |
| BANK ACCOUNT NO.: |  |
| BENEFICIARY | NAME: |  |
| ADDRESS: |  |
| PHONE: |  |
| FAX: |  |
| EMAIL: |  |
| TENURE: | |  |