

IMPORT: TRADE FINANCE APPLICATION

To - Office/Branch:					Date:
Re: Importation of:					
Supplier's Name:					
Supplier's Address:					
Carrying Vessel:					
Bill of Lading Date:		Date of	Arrival: (if Post shipment)	Estimated Date of S	Shipment: (if Pre shipment)
Invoice Number:		Date of I	nvoice:	CCY:	Amount:
I/We hereby request BSP Fina	•	ance the above exp	oort Trade transaction ("Trans	action")	
	% of the invoice value.			\neg	
CCY:	Amount:		For a period of	Days Maturit	ty Date:
Funds are to be disbursed as Pay Drawing under Letter Pay Documentary Collect	r of Credit number: tion number:				
Credited to my/our Bank Local/Foreign Currency Account number (only if payment has already been effected by me/us)					
Pay to Supplier (See above) Account Details:					
Bank Name:					
	Bank A	Address:			
(If finance required in Local Currency) Converted at the Bank's Telegraphic Transfer Selling Rate of Exchange for the currency concerned on day finance is provided. Delivered under the Bank's Forward Exchange Contract number:					
In consideration of the Bank providing finance in the amount and for the Transaction and period specified above ("Financed Amount"), I/we undertake to pay the Bank the Financed Amount, together with interest thereon at the rate of					
In the event that I/we am/are unable to pay the Bank the Debt on the Maturity Date, the Bank is hereby authorised to debit any of my/our Bank account(s) with the amount of Debt. Where the Financed Amount or any other part of the Debt is in a foreign currency, the Bank will convert it to Local Currency on the Maturity Date at the Bank's prevailing rate of exchange for the sale of that currency. Interest on any resulting overdraft(s) will be charged to me/us at the Bank's highest prevailing overdraft rate.					
I/We also hereby authorise the	Bank to debit my/our Ba	nk account(s) with	any applicable government c	harges and taxes either mont	hly in arrears or upon the Maturity Date
If I/we wish to rollover the Debt at the Maturity date, I/we acknowledge and agree that I/we must provide the Bank with a written request to that effect by no later than 5:00pm on the business day immediately preceding the Maturity Date. If I/we do not make such a request, I/we acknowledge and agree that my/our Bank account(s) may be debited on the Maturity Date with the entire amount of the Debt. The Bank may, in its absolute discretion, accept or refuse any request from me/us to roll over the Debt.					
Any reference to Bank of South or its subsidiaries in Samoa, T			nce to Bank of South Pacific L	imited, any of its branches in	Fiji, Solomon Islands or Cook Islands
I/we acknowledge and agree the	hat I/we must produce all	documentation red	quested by the Bank before it	will consider this application.	
Maturity Instructions: Debit my/our Bank Local/Fore	ign Currency Account nu	mber:			
Converted at the Bank's To	elegraphic Transfer Buyin	g Rate of Exchang	e for the currency concerned	on maturity date.	
O Delivered under the Bank's	s Forward Exchange Cont	ract number:			
Signed for and on behalf of:					
(Name of individual/s, company, partnership or firm). Note: (Signatures to be in accordance with current authorities held by the Bank). Signature:					
		Nam	e:		
Signature:					

Name: