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**APPLICATION FOR BANK GUARANTEE (BG)**

DATE :.

TO: AFFIN BANK BERHAD 197501003274 (25046–T)

Dear Sir(s),

* I/We hereby apply for a NEW BG ISSUANCE / BG RENEWAL/EXTENSION /AMENDMENT (REF.:      )

 [ ]  BG under existing facility limit [ ]  Ad-Hoc BG [ ]  BG Plus: - [ ]  PKG A [ ]  PKG B [ ]  PKG C

**DETAILS OF APPLICATION**

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| Applicant :      Beneficiary :      Validity Period : From       To       | Tel. & Fax No. & E-mail:       Amount :       |
| Purpose :      Security *(please tick where applicable)*:  [ ]  Cash Margin [ ]  1st Party Individual / Company FD [ ]  3rd Party Individual / Company FD**Information Required For Ad-Hoc BG /BG Plus Only:** |
| Annual Sales Turnover/Revenue :       | Number of Full Time Employees :      **GENERAL TERMS AND CONDITIONS** |

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| 1. I/We hereby confirm that the Bank may conduct credit checks with CTOS and other credit reference agencies on me/us per Bank’s requirements.2. I/We hereby confirm that there are no claims on the BG by the beneficiary for the backdated period i.e. from the effective date to issuance date *(subject to start date being not earlier than the date of Letter of Award or as per underlying contract).* 3. Please debit my/our Current Account/Saving Account No.       with you for all charges incurred, cash margin and applicable taxes. REMINDER: The Customer is reminded to read and understand the terms and conditions in this form before signing below. In the event there are any terms and conditions in this form that the Customer does not understand, the Customer is hereby advised to seek independent advice and/or discuss further with the Bank’s representative before signing below.I/We confirm I/we have read and agree to the above terms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Authorised Signatory(s) & Company Stamp  |

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| ***FOR BANK’S USE ONLY:****CIF :**Checked By :* | *BG NO. :* |

 shadowolf