



APPLICATION FOR OUTWARD COLLECTION OF BILLS

For Office Use

OBC No _____

To: **HSBC Bank Malta p.l.c.** (hereinafter "you" or "the Bank")

HSBC Bank Malta p.l.c. – Trade and Supply Chain, Business Banking Centre, Mill Street, Qormi QRM3101
Tel - 2380 1836 / 2380 1837 / 2380 8000 Fax - 2380 4535 Date:

From:

Full Customer Name

Contact Details

Tel:

Fax:

Address

We submit the attached bills / documents for collection.

Bills / Documents enclosed **Item Count**

Bill of Exchange

Invoice

Bill of Lading

Air Waybill

Health Certificate

Ship's Agent Declaration

Certificate of Origin

Packing / Weight List

Insurance Policy / Certificate

Credit Note

Others (please specify below)

Documents to be released only

Against Payment

Against Acceptance

Tenor/Due date

days from

(tick box as applicable)

Currency

Amount

In case of non-acceptance / non-payment

Protest

Do not Protest

Warehouse

Insure against fire

Please present documents through*

Your correspondents

Other correspondents:

*(tick box as applicable, and enter bank details if collection not through Bank's correspondents)

Shipping Marks and Numbers

Goods

Vessel

Special Instructions

COLLECTION SUBJECT TO URC522

Drawee (tick boxes and fill in details as applicable)

In case of need, contact:

For assistance only

Whose decisions may be accepted

All local charges are for

Ourselves

Drawees

All foreign charges are for

Ourselves

Drawees

If charges are refused, these

May be waived

May not be waived

Disposal of proceeds

Please credit our _____ account

Please forward your Cashier's Order in EUR in settlement

Name/s for and on behalf of **Company name:**

Authorised Signature/s (To be signed in accordance with your bank mandate)

For Office Use

For HSBC Bank Malta plc

Authorised Signature and number:

IMPORTANT NOTICE

1. The Bank is obliged to comply with laws, regulations and requests of public and regulatory authorities in various jurisdictions which relate to the prevention of financing of, amongst other things, named terrorists and sanctioned persons. This may require that the Bank intercept and investigate any payment messages and other information or communications sent to or by you or on your behalf via the Bank's systems and this process involves making further enquiries as to whether a name which might refer to a named or sanctioned person actually refers to that person.

2. The Bank will not be liable for loss (whether direct or consequential and including without limitation loss of profit or interest) or damage suffered by any party arising out of any delay or failure by the Bank in performing any of its duties or other obligations caused in whole or in part by any steps taken pursuant to clause 1 above. This process may cause a delay in processing certain information and therefore the Bank does not warrant that any information on the Bank's systems relating to any payment messages and communications which are the subject of any action taken pursuant to clause 1 above is accurate, current and up-to-date at the time it is accessed whilst such action being taken. The Bank will, however, attempt to notify you of the fact that such action is being taken/the existence of such circumstances as soon as is reasonably practicable (subject to any overriding confidentiality requirements).

3. The adoption of the procedures pursuant to clause 1 above shall not be construed to imply any warranty whatsoever on the Bank's part towards its customers. In this respect, the Bank shall not be liable for any losses or damages suffered by customers on account of any transfer of funds. It is prudent commercial practice for customers to make their own investigations regarding counterparties beforehand in this respect.

Customer Name and Authorised Signature/s

Name/s: For and on behalf of **Company Name:**

Authorised Signature/s (To be signed in accordance with your bank mandate)

For Office Use

For HSBC Bank Malta plc

Authorised Signature and number: