

Date: [Insert Date]

To: [Insert Name of Issuing Bank]

Address: [Insert Bank Address]

Attn: Letter of Credit Department

Subject: Mutual Agreement to Cancel Irrevocable Letter of Credit

LC Number: [Insert LC Number]

LC Amount: [Insert Currency and Amount]

Date of Issue: [Insert Issue Date]

Expiry Date: [Insert Expiry Date]

To Whom It May Concern,

This letter serves as a formal and mutual request to cancel the above-referenced Irrevocable Letter of Credit in its entirety, effective immediately.

The Applicant and the Beneficiary hereby confirm their mutual agreement to this cancellation and release the Issuing Bank from any and all liabilities or obligations under this Letter of Credit. We further confirm that no claims have been made, nor will any be made, against this instrument.

Please find the original Letter of Credit document attached (if required). We request that you process this cancellation and confirm once the file is closed.

Any applicable cancellation fees should be charged to [Insert Account Number/Party Name].

Sincerely,

On behalf of the Applicant:

On behalf of the Beneficiary:

(Authorized Signature)

(Authorized Signature)

Name: [Insert Name]

Name: [Insert Name]

Title: [Insert Title]

Title: [Insert Title]

Company: [Insert Company Name]

Company: [Insert Company Name]