

**ISSUE DATE:** [Insert Date]

**IRREVOCABLE STANDBY LETTER OF CREDIT NO:** [Insert Number]

**BENEFICIARY:**

[Name of Beneficiary]

[Address of Beneficiary]

**APPLICANT:**

[Name of Applicant/Customer]

[Address of Applicant]

**ISSUING BANK:**

[Name of Bank]

[Address of Bank]

**AMOUNT:** [Insert Currency and Amount in Figures] ([Insert Amount in Words])

**EXPIRY DATE:** [Insert Date] at our counters.

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To: [Name of Beneficiary]

We hereby establish our Irrevocable Standby Letter of Credit in your favor for the account of [Applicant Name], up to the aggregate amount of [Amount], available by payment at sight upon presentation of your written demand for payment referencing this Letter of Credit Number [Insert Number].

Your demand for payment must be accompanied by the following document(s):

1. A signed statement by an authorized representative of the Beneficiary stating that: "The Applicant has failed to fulfill its contractual obligations under [Reference Agreement/Contract Name] dated [Date] and the amount claimed is now due and payable."
2. The original of this Standby Letter of Credit and any amendments.

Special Conditions:

- Partial drawings are [permitted/not permitted].
- All banking charges are for the account of the Applicant.
- This Letter of Credit is subject to the Uniform Customs and Practice for Documentary Credits (2007 Revision), International Chamber of Commerce Publication No. 600 (UCP600).

We hereby engage with you that all demands for payment made in compliance with the terms and conditions of this Standby Letter of Credit will be duly honored if presented at our office located at [Bank Address] on or before the Expiry Date.

Yours faithfully,

[Authorized Signature]

[Name and Title of Signatory]

[Name of Issuing Bank]