## **Application for Issue of Bank Guarantee**

									Date *	dd	/	/ m yyy	 yy
Account Name*		Name (s)											
Account Number*		13 digits											
Nature*		☐ Fixed expiry		1 Auto Renewal	Valid	dity*	From	d mm	_/	_ To	/_	уууу	
Type of Guarantee	i .	□ BID/Tender       □ Performance       □ Payment       □ Advance Payment         □ Maintenance       □ Retention       □ Labour											
Guarantee Format*		☐ As per Bank Format ☐ As per Attached Format											
Purpose		Details											
Beneficiary													
Name*													
Address													
City / State					Cou	ntry							
		Currency			Amou	nt in Figure	25						
Guarantee Amount	*	Amount in Words											
Special Instruction	s (if any)												
		Aı	pplicant	Declaration and	d Terms a	nd Con	ditions						
d. pledge and charge in f	I between me/u debit my/our ab nts thereof, if an by my/our oblig debit my/our ab old the same ur avour of RAKBAI yments that RAk set off all or an	s and RAKBANK. In consove-mentioned account y; gations set out in the Co ove-mentioned account htil the guarantee issued NK the amounts held by (BANKA may have to pay	ideration of or any oth unter Inder or any oth pursuant to RAKBANK ounder the	f RAKBANK agreeing to er account held with I nnity duly signed by n er account held with I to this application is ca and irrevocably and ur guarantee and/or Cou	o issue the g RAKBANK for ne/us in favo RAKBANK, fro ncelled; nconditional unter-Indemi	juarantee, I all comminur of RAKB om time to ly authorise nity; and	/we uncond sssions and ANK; time, with a RAKBANK	ditionally and tharges in co all sums wh to transfer s	d irrevocably: connection with ich RAKBANK r uch amounts	n issuance of may have to p to a separate	the above pay as a re account a	guarante sult of issu as a conti	e and uance inuing
			Applicar	nt Signature(s) w	ith Com	pany Sta	amp*						
*Mandatory Fields Arabic for	m available												
Bank Use													
Front Office/Cred Cash Margin Tracking Refere			Rec	Name	<i>                                     </i>	Name	r		Name	ade Finan	ce		
Cash Margin  ☐ Yes % ☐ No	adaing Neicle		☐ Yes		☐ Yes			□ CSV	. va.r.tc				
Counter Indemnity  ☐ Yes ☐ No			□ No	Employee ID	□ No	Employe	e ID		Employee ID				

Remarks (if any)

Approval Conditions (if any)

Remarks (if any)



PPS-01147/V102017

Remarks (if any)