

# Remittance Form

## Documentary Collection

Please send the fully completed and signed form to:

ING Bank N.V. Trade Finance Services, ACT B 05.226, Bijlmerdreef 24, 1102 CT Amsterdam, the Netherlands

---

### 1. Drawer

Company name \_\_\_\_\_

Contact person \_\_\_\_\_

Address \_\_\_\_\_

Postal code \_\_\_\_\_ City \_\_\_\_\_

E-mail \_\_\_\_\_

Telephone number \_\_\_\_\_

Our reference \_\_\_\_\_

---

### 2. Drawee

Company name \_\_\_\_\_

Address \_\_\_\_\_

Postal code \_\_\_\_\_ City \_\_\_\_\_

Country \_\_\_\_\_

---

### 3. Drawee's Bank

Name \_\_\_\_\_

Address \_\_\_\_\_

Postal code \_\_\_\_\_ City \_\_\_\_\_

Country \_\_\_\_\_

BIC code (if available) \_\_\_\_\_

---

### 4. Documentary Collection Amount

Currency  Amount \_\_\_\_\_

---

## 5. Documents attached

	copies		copies
<input type="radio"/> Bill of Exchange	_____	<input type="radio"/>	_____
<input type="radio"/> Invoice	_____	<input type="radio"/>	_____
<input type="radio"/> Insurance certificate	_____	<input type="radio"/>	_____
<input type="radio"/> Certificate of origin	_____	<input type="radio"/>	_____
<input type="radio"/> Packing list	_____	<input type="radio"/>	_____
<input type="radio"/> Marine Bill of Lading	_____	<input type="radio"/>	_____
<input type="radio"/> CMR / Airway Bill	_____	<input type="radio"/>	_____

## 6. Instructions

Deliver documents

- Against payment  
 Against acceptance of the of the bill of exchange at  \_\_\_ days after \_\_\_\_\_ or  
 at  -  -

After acceptance

- Keep the bill of exchange in portfolio of drawee's bank for collection on the maturity date  
 Avalise the bill of exchange  
 \_\_\_\_\_

In the event of non-acceptance or non-payment

- Protest the bill of exchange

Drawee's bank charges payable by drawee

- May not be refused  In case of refusal charge to us

Means of dispatching documents

- By courier service in one lot

Further instructions

- \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## 7. Settlement instructions

Principal amount

Credit account number

Currency

Account number \_\_\_\_\_

Commission and charges

Debit account number

Currency

Account number \_\_\_\_\_

---

## 8. General Conditions

We request you to process this Documentary Collection in accordance with the instructions given in this Remittance Form. This collection is subject to the ICC Uniform Rules for Collections, latest version, as adopted and published by the International Chamber of Commerce in Paris. A copy of the ICC Uniform Rules for Collections will be sent upon request.

---

## 9. Signature

Place

Date  -  -

Name

Authorised signature(s)

---

ING will not be liable for any loss and/or damage resulting from the use of electronic means of communication, including, but not limited to, loss or damage resulting from failure or delay in delivery, interception or manipulation by third parties or computer programs used for electronic communications and transmission viruses.

The Applicant must promptly supply this original signed application form to ING at the request of ING.

ING Bank N.V. has its registered office at Bijlmerplein 888, 1102 MG Amsterdam, the Netherlands, commercial register no. 33031431 in Amsterdam. ING is registered with the Netherlands central bank (DNB) and the Financial Markets Authority (AFM) in the Credit Institutions and Financial Institutions Register. ING is also subject to the supervision of the Netherlands Competition Authority (NMA). For more information regarding the supervision of ING, please contact DNB ([www.dnb.nl](http://www.dnb.nl)), the AFM ([www.afm.nl](http://www.afm.nl)) or the NMA ([www.nmanet.nl](http://www.nmanet.nl)).

---