

ECUA Account Number: \_\_\_\_\_

Irrevocable Letter of Credit No: \_\_\_\_\_

Institution Name: \_\_\_\_\_

Institution No: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Beneficiary Name/Address:

Customer Name/Address:

ECUA  
P. O. Box 15311  
9255 Sturdevant Street  
Pensacola, Florida 32514-0311

Amount \$ \_\_\_\_\_

Documentary Irrevocable Letter of Credit No. \_\_\_\_\_ has been established in favor of the ECUA for services rendered to \_\_\_\_\_.

We hereby authorize the Emerald Coast Utilities Authority to Draw upon Irrevocable Letter of Credit No. \_\_\_\_\_ up to an aggregate amount not to exceed \$ \_\_\_\_\_.

Funds under this letter of credit are available to you through your signed statement provided the following conditions are met.

1. The original draft of this letter must be present.
2. A statement signed and dated by and Authorized Official of The ECUA to the effect the amount which is the draft is drawn, represents amount due and payable by \_\_\_\_\_ to the ECUA which are unpaid and a minimum of fifteen (15) days has been allowed to pay said amount.
3. A copy of invoice (s) itemizing fees due and payable, which specifically identifies services under which default was incurred are presented.

We hereby engage with The ECUA that all drafts under and in compliance with the above terms of this credit will be duly honored by our institution when presented.

Except as otherwise expressly stated herein, this credit is subject to the Uniform Customs and Practice for documentary credit (1983 revision) International Chambers of Commerce Publication Number 400.

Authorizing Agent: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Phone No: \_\_\_\_\_

Date: \_\_\_\_\_

Alternate Contact Person: \_\_\_\_\_