AUTHORITY FOR PAYMENT GUARANTEE (AVAL) OF BILL OF EXCHANGE



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To: The Manager ANZ Trade and Supply Chain Select (Branch)	ANZ Inward Collection Reference
Date (dd/mm/yyyy)	Customer Reference
From (sustanes name and address include company identification number if	applicable).
From (customer name and address, include company identification number if	applicable):
I/We authorise ANZ to guarantee payment of or add its aval to a bill of exchan	
Bill of exchange dated (dd/mm/yyyy)	Currency and amount
Drawn by (Name & Address)	Collection requested by (Pank name & address)
Drawn by: (Name & Address)	Collection requested by (Bank name & address)
Correspondent Collection Reference	
In consideration of ANZ guaranteeing payment of or adding it's aval to the bill of exchange above (Bill) we agree:	
1. that if the Bill is dishonoured, we will repay ANZ the amount of the Bill plus interest at the current interest rate from the time of dishonour until repayment and all charges incurred by ANZ; and	
2. to hold ANZ indemnified against, and to pay ANZ on demand, all damages, losses and expenses which ANZ may incur in guaranteeing payment of, or adding its aval to, the Bill.	
Charges:	
Debit our following account for all charges relating to this Payment Guarantee Currency	e AVAL: Account Number
This authority is subject to, and we are bound by, the terms in the ANZ Trade Terms booklet and any other applicable Trade Agreements. We confirm that ANZ has given us the booklet or we have accessed it at anz.com/corporate and given us the other applicable Trade Agreements. We acknowledge ANZ recommends that we read them and seek clarification from ANZ about any issues of concern.	
Authorised Signature	Name of Authorised Signatory
Authorised Signature	Name of Authorised Signatory
Company stamp or chop (if applicable):	
BANK USE ONLY	
Date received (dd/mm/yyyy)	Signature(s) verified
	Yes No
All checks complete	Approved by
Trada Palatianship Officer	Manager / Team Leader
Trade Relationship Officer	Manager / Team Leader