

**APPLICATION OF LIMIT FROM PCB\***

Name of the PCB:.....

Address:.....

Date:.....

The Director,

Banking Policy Department,

SBP, Karachi.

Dear Sir,

We hereby request for the sanctioning of below mentioned amount under the FCEF Scheme. We are liable to pay -----rate of markup on quarterly basis. We further undertake that the requested credit line will only be used in the light of the principles set under F.E. Circular No. 07 dated 17<sup>th</sup> April 2003 and subsequent circulars issued from time to time by SBP, in this regard.

PCB's Limit (in US \$)	Amount availed during last Quarter (in US \$)	Amount of Loan Projected for the coming Quarter (in US \$)	Amount Requested (in US \$)	Markup Rate
1	2	3	4	5

(Authorized Signature)  
PCB

*\*This form shall be submitted 15 days prior to the beginning of each quarter.*