



SOCIETE GENERALE
SRBIJA

Bulevar Zorana Đinđića 50 a/b, 11070 Beograd
Služba dokumentarnih poslova i garancija
Swift: SOGYRSBG
Telefon:
Fax: 011/225 10 25

Nalogodavac / Principal / Trasant / Izvoznik:

(Applicant / Principal / Drawer / Exporter)

.....
.....

Matični broj (ID no.) :

ZAHTEV ZA DOKUMENTARNI INKASO

REQUEST FOR DOCUMENTARY COLLECTION

Molimo vas da za naš račun izvršite inkaso naplatu sledećih dokumenata
Please, execute documentary collection of the following documents for our account

Menica <i>Bill of Exchange</i>	Komercijalna faktura <i>Commercial Invoice</i>	Pomorski konosman <i>Bill of Lading</i>	Avionski tovarni list <i>Airway Bill</i>	Kamionski tovarni list <i>CMR</i>	Železnički tovarni list <i>Railway Bill</i>
Polisa osiguranja <i>Insurance Policy</i>	Sertifikat o osiguranju <i>Insurance Certificate</i>	Paking lista <i>Packing List</i>	Sertifikat o poreklu <i>Certificate of Origin</i>	Sertifikat o kvalitetu <i>Certificate of Quality</i>	Špediterska potvrda o prijemu robe <i>Forwarder's Cargo Receipt</i>
Ostala dokumenta <i>Other Documents</i>					

Iznos dokumentarnog Inkasa
Amount of documentary collection

.....

Uvoznik/Trasat/Dužnik po inkasu
(inostrani partner)
*Importer / Drawee / Debtor
(foreign partner)*

.....
broj računa (*account number*)

.....
naziv i adresa (*name and address*)

Inkaso banka
Banka uvoznika/Trasata/Dužnika
*Collecting Bank
Bank of Importer / Drawee / Debtor*

S.W.I.F.T. :

Naziv i poštanska adresa (*name and postal address*):

.....

.....

Dokumenti poslani
Documents sent by

- Kurirskom poštom *Courier mail*
 Avionskom poštom *Airmail*
 Redovnom poštom *Regular mail*

Dokumenta uručiti uz <i>Terms of delivery of documents against</i>	<input type="checkbox"/> Plaćanje <i>Payment</i> <input type="checkbox"/> Akceptiranje po menici <i>Acceptance</i>
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Rok plaćanja na menici <i>Payment term on bill of exchange</i>	
Ostale instrukcije u vezi sa dostavom menice <i>Other instructions regarding presentation of bill of exchange</i>	<input type="checkbox"/> Akceptirane menice trebaju ostati u inkaso banci do momenta naplate <i>Accepted bills should be retain in collecting bank until collection</i> <input type="checkbox"/> Akceptirane menice se trebaju vratiti u vašu banku kako bi bile dostavljene nama <i>Accepted bills should be returned to your bank in order to be delivered to us</i>
Instrukcije u vezi protesta menice <i>Instructions regarding protest</i>	<input type="checkbox"/> Bez protesta u slučaju neplaćanja/neakceptiranja <i>No protest in the event of non-payment / non-acceptance</i> <input type="checkbox"/> Protest u slučaju neakceptiranja <i>Protest in the event of non-acceptance</i> <input type="checkbox"/> Protest u slučaju neplaćanja <i>Protest in the event of non-payment</i>
Troškovi po inkasu <i>Charges</i>	Troškovi inostranih banaka padaju na teret <i>Charges of foreign banks should be borne by:</i> <input type="checkbox"/> Našeg preduzeća <i>Our enterprise</i> <input type="checkbox"/> Našeg inopartnera/dužnika po inkasu <i>Our foreign partner / debtor</i> Uručenje dokumenata je uslovljeno plaćanjem bankarskih troškova <i>Presentation of documents depends on payment of bank charges:</i> <input type="checkbox"/> DA <i>YES</i> <input type="checkbox"/> NE <i>NO</i>
Posebni uslovi <i>Special conditions</i>
Inkaso izvršiti u skladu sa «Jednoobraznim pravilima za Inkaso» izdatim od strane MTK Pariz, poslednje izdanje <i>Collection should be executed in compliance with Uniform Rules for collections, issued by ICC Paris, latest edition</i>	
Prilog <i>Attachments</i> 1) 2) 3) 4)	
Kontakt osoba/telefon/faks/e-mail: <i>Contact person / telephone / fax / e-mail:</i> Ime <i>name</i> Telefon <i>telephone</i> Faks <i>fax</i> e-mail	
Mesto <i>Place</i> Datum <i>Date</i> 20.... godine	Pečat i potpis ovlašćenog lica <i>Signature and seal of authorized person:</i>