

**IRREVOCABLE LETTER OF CREDIT**

**BENEFICIARY**

*Gallatin Department of Electricity  
P.O. Box 1555  
Gallatin, TN 37066*

---

<b>ISSUING BANK</b> _____
<b>ADDRESS OF ISSUING BANK</b> _____ _____
<b>BANK CREDIT NO.</b> _____ <b>MAXIMUM AMOUNT</b> _____
<b>DATE OF ISSUE</b> _____
<b>APPLICANT</b> _____
<b>SERVICE ADDRESS</b> _____ _____

*This Irrevocable Letter of Credit must be supplied by a local bank. It cannot be modified without the written consent of the Gallatin Department of Electricity. The Issuing Bank may cancel this Letter of Credit at any time by filing with the Beneficiary thirty (30) days written notice of its desire to be relieved of liability. The cancellation notice must be sent to GDE by Certified Mail. The Issuing Bank shall not be discharged from any liability already accrued under this Letter of Credit or which shall accrue before the expiration of the thirty day period. The issuing bank will pay any claims occurring during the effective date. Claims will be presented to the issuing bank within 90 days after the cancellation date.*

\_\_\_\_\_  
**Authorized Signature, Issuing Bank**

\_\_\_\_\_  
**Date**