LETTER OF INDEMNITY

Messrs.運送人(会員)名を記載	
	DATE:
Dear Sirs,	
CT D/I N	
CT B/L No	
Vessel / Voyage No Port of Loading / Port of Discharge	
Tort of Loading / Fort of Discharge	
☐ With reference to the above-mentioned	d Combined Transport Bill of Lading, we would request
you to amend as follows:	
Original made out	To be amended to read
訂正前の内容を記載	訂正後の内容を記載
	れている運送品の明細を記載
arise in connection with the above-mention	e to hold you free and harmless from any claim that may ned amendment(s) and/or remark(s) and indemnify you In addition, we fully guarantee that if you are unable to e charges will be fully paid by us.
Yours faithfully	
Name of Company(依頼者会社名を記載)	
By Authorized Signature & Title(署名権を	持つ人の署名と肩書を記載)