Self-Insurance Regulation • MS-60
7551 Metro Center Dr., Ste 100 • Austin, Texas 78744-1609
• (512) 804-4775 • FAX (512) 804-4776• www.tdi.state.tx.us

DOCUMENTARY IRREVOCABLE STANDBY LETTER OF CREDIT

Date	: Letter of Credit Number:
То:	Texas Department of Insurance Division of Workers' Compensation Self-Insurance Regulation 7551 Metro Center Dr., Ste 100, MS-60 Austin, Texas 78744-1609
favoi	We hereby issue this Documentary Irrevocable Standby Letter of Credit (hereinafter "LOC") in your and authorize you to draw on:
	(Name and Office of Issuing Bank)
	(Address of Issuing Bank)
For a	account of:
	(Name of Employer)
	(Address of Employer)
to	the agamagete emount of IIC dellars
up to	the aggregate amount of U.S. dollars(Written and Numbers)
	able by your draft at sight marked "drawn under
avan	able by your draft at sight marked "drawn under(Name of Issuing Bank)
	Letter of Credit Number

Drafts drawn under this LOC must be accompanied by an affidavit from the Texas Department of Insurance, Division of Workers' Compensation, stating that the Commissioner of the Division of Workers' Compensation has determined that the above-named Employer has become an impaired employer. Specifically, the above-named Employer has either suspended payment of compensation as determined by the Commissioner, filed for relief under bankruptcy laws, had bankruptcy proceedings filed against it, or had a receiver appointed by a court in Texas. The Issuing/Confirming Bank is entitled to rely upon the statements contained in the affidavit and will have no obligation to independently verify any statements contained therein.

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dated _____

Employer Name:	LOC Number:
This LOC shall be effective on (primary term) and shall be valid and irreverenewed in accordance with the terms here	ocable for such time period and for so long thereafter, as it may be
periods equal to the length of the primary tunless, it is at least sixty (60) days prior confirming bank written notice at central compensation in Austin, Travis County automatically renewed. Upon receipt of so	applicable, shall be deemed automatically renewed for additional term from the original expiration date or any future expiration date to an expiration date, the Commissioner receives from us or the office of the Texas Department of Insurance, Division of Workers y, Texas, that the LOC or Confirmation will no longer be such notice, the Division of Workers' Compensation may draw on the amount available under the LOC or Confirmation on or before
Issuing/Confirming Bank's individual obligother party. Any amount of payment under	is not subject to any conditions or qualifications and is the gation, which is in no way contingent on reimbursement from any er this LOC by the Issuing Bank or any confirming bank shall be f Public Accounts – Treasury Operations into a Trust Fund entitled
• •	under and in compliance with the terms of this LOC will be duly, if presented to the above-mentioned Bank(s) on or before the day
This LOC is subject to the "Uniform International Chamber of Commerce, Publication of Commerce,	Customs and Practice for Documentary Credits" (1993 Revision), ication No. 500.
Name and title of signer, for Issuing Bank	
By:Authorized Signature	Date
Printed Name & Title	

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