**MODEL OF FINANCIAL COLLATERAL PURSUANT TO URDG (2010)**

*Guarantor details (bank/ insurance company) or SWIFT key*

For: *(enter the beneficiary, i.e., the contracting authority)*

Date:       *(enter the date of issue)*

**TYPE OF INSURANCE:**       *(enter the type of the financial collateral: bank guarantee/deposit insurance)*

**NUMBER:**       *(enter the financial collateral number)*

**GUARANTOR:**       *(enter the name and address of the bank/insurance company in the place of issue)*

**PRINCIPAL:**       *(enter the name and address of the principal of the insurance, i.e., the tenderer selected in the public procurement procedure)*

**BENEFICIARY:**       *(enter the name and address of the Contracting authority)*

**UNDERLYING TRANSACTION:** *the Principal’s obligations under Contract No.*       *dated*        *(insert the number and date of the contract on the implementation of the public tender concluded under the procurement procedure marked*      ) *for*       *(insert the subject of the public tender)*

**AMOUNT AND CURRENCY:**       *(enter the maximum amount with a number and in words and the currency)*

**THE DOCUMENTS WHICH, IN ADDITION TO THE DECLARATION, MUST BE ATTACHED TO THE REQUEST FOR PAYMENT AND WHICH ARE EXPRESSLY REQUIRED IN THE FOLLOWING TEXT:**       *(none/list document)*

**LANGUAGE IN THE REQUIRED DOCUMENTS:** English

**FORMAT OF SUBMISSION:** in paper form by registered post or any form of express mail, or electronically by SWIFT system to the following address       *(enter the SWIFT address of the guarantor)*

**PLACE OF SUBMISSION:**       *(the guarantor shall enter the address of the branch where the submission of paper documents is to be made, or an email address for electronic submission, such as the Guarantor's SWIFT address)*

Notwithstanding the above, the submission of paper documents may be made at any branch of the Guarantor in the territory of the Republic of Slovenia.

**EFFECTIVE DATE:** DD. MM. YYYY *(enter the maturity date of the insurance)*

**THE PARTY LIABLE FOR COSTS:**       *(enter the name of the Principal of the insurance, i.e. the tenderer selected in the public procurement procedure)*

We, as Guarantor, hereby irrevocably undertake to pay to the Beneficiary any amount up to the amount of the Guarantee when the Beneficiary submits a proper request for payment in the form of submission specified above, signed by the authorised signatory(ies), together with such other documents as may be listed above, and in any event accompanied by a statement by the beneficiary, either included in the body of the request for payment itself or on a separate signed document accompanying or referring to the request for payment, indicating in what respect the principal of the insurance has failed to fulfil its obligations under the underlying transaction.

Any demand for payment under this insurance must be received on or before the effective date of the insurance at the place of presentation specified above.

Any disputes relating to this insurance shall be settled by a court of competent jurisdiction in Ljubljana under Slovenian law.

This insurance is subject to the Uniform Rules for Demand Guarantees (URDG) Revision 2010 issued by MTZ under No. 758.

Guarantor (stamp and signature)