

# Guidelines for Letters of Good Standing

1. Fill out the application form.
2. A **non-refundable fee** of EC\$ 30.00 (**\$US 15.00**) for each letter to be made at the 1st National Bank St. Lucia Limited, to the account name: **Pharmacy Council** account number: **94751006758**. (See USD transfer information below).
3. Email the completed form and proof of payment, to the Pharmacy Council at [pharmacycouncilslu@gmail.com](mailto:pharmacycouncilslu@gmail.com)
4. Follow up with the Council within seven business (7) days of receipt acknowledgement.
5. Letters of good standing will be done after the Council has done due diligence.

## USD Transfer information

### Beneficiary Bank Information

SWIFT Code/ABA/Routing: LUOBLCLC

Banks Name: 1st National Bank St. Lucia Limited

Address: 21 Bridge Street

City: Castries

Country: St. Lucia

Account Number: **94751006758**

### Beneficiary Customer Information

Account #:

Name:

Address:

City:

Country:

### Intermediary Bank Information

SWIFT Code: IRVTUS3N

ROUTING: 021000018

Banks Name: Bank of New York

Address: 1 Wall Street

City: New York

Country: USA 10038