

SHAHID HUSSAN SCAFFOLDING IND. LLC

P.O. Box : 79028, Ind. Area 11, Sharjah UAE

Mobile : +971-551144401; +971-503971249

Email : shahid@shahidind.com; Websites : www.shahidind.com



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APPLICATION FORM CREDIT FACILITY

A	General Details				
1	Name of Organization	AL BADDAD CAPITAL FZCO			
B	Legal Status	FZCO	(Whether LLC, Co., Partnership, Proprietorship)		
C	Address	DUBAI NATIONAL INDUSTRIES PARK, JEBEL ALI, DUBAI, UAE			
D	Telephone	+ 971 4 802 9999			
E	Fax	N/A			
F	Email	info@albaddad.com / purchase@albaddad.com			
G	Year of Establishment	2007			
H	Commercial Regn. No.	1334210	Expiry Date	31-DEC-2020	
I	Trade License No.	595743	Expiry Date	31-DEC-2020	
J	Details of Owner / Proprietor / Partners				
	Name	Nationality			
	DR. FATEEN HUSSEIN AL BADDAD	JORDAN / USA			
K	Names and Address of Subsidiary / Associate Co.				
	N/A				
L	Details of companies you currently enjoy credit facilities from				
	Name	Contact Person	Mobile / Phone	Credit Limit	Payment Terms
	ALURCO	MR. NASSER	04 335 5036	OPEN CREDIT	210 DAYS PDC
	GULF EXTENSIONS	MR. CHRISTIAN	04 884 6146	OPEN CREDIT	120 DAYS PDC
	AL MAZEN	ENG. MAJED	06 534 9441	OPEN CREDIT	90 DAYS PDC
M	Details of Credit requirement				
	Credit Limit AED	100,000	for	90	days
N	Name and Address of Bankers with A/C No.				
	Name & Branch			Account No.	
	ADCB - KARANA			11291857920001	
O	Authorized Signatories for cheques / Bill of Exchange / Other banking documents				
	Name	Designation		Specimen Signature	
	DR. FATEEN HUSSEIN AL BADDAD	CHAIRMAN			
P	Authorized signatory for LPOs				
	Name	Designation		Specimen Signature	
	ENG. OSAMA NAIM	COMMERCIAL DIRECTOR			

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General Terms & Conditions :-

- ~~1 An Interest of 12% will be charged on the outstanding amounts beyond the allowed credit period~~ N/A
- 2 Purchases will only be delivered against local purchase orders signed by authorized personnel.
- 3 The firm/company will be totally responsible for payments of any materials supplied against LPOs duly signed by authorized personnel unless and otherwise an adequate notice is given to us in writing canceling those signatures.
- 4 All disputes arising in respect of all outstanding over due account shall be finally referred to the Dubai Court for Settlement.
- 5 This Credit Application is to be signed by the owner of the firm. In case it is signed by a person other than the owner / copy of Authority given to the signatory by owner/s to sign such a document is to be attached.

I/We agree to the above condition and declare that all information given in this application are true and correct.

Company Stamp



Local Sponsor's Name - N/A

Signature.....

Telephone No.:.....

Mob :.....

Documents Required

- 1 Copy of Valid Trade License. ✓
- 2 Copy of Chamber of Commerce / Economic Department Certificate. ✓
- ~~3 Copy of Sponsor Passport / Identity Card~~ N/A
- ~~4 Copies of Document showing authorised signatory~~ N/A
- ~~5 Guarantee Cheque, undated (amount to be decided at the time of credit approvals).~~ N/A

For office use only

Account No.....

Limit (Dhs).....

Product/s.....

Time Period.....

Remarks.....

Approved By :-

Sales Manager.....

Accounts Manager.....

General Manager

Managing Director.....

W
Dsa