

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	Arabian Electricians - ARABEL			
B	Legal Status	Establishment	(Whether LLC, Co., Partnership, Proprietorship)		
C	Address	2nd Floor Bldg # 05 Defence Road Abu Dhabi - UAE			
D	Telephone	02-6444190			
E	Fax	02-6448323			
F	Email	ho@arabel.ae			
G	Year of Establishment	1986			
H	Commercial Regn. No.		Expiry Date		
I	Trade License No.	CN-1023919	Expiry Date	11-11-2021	
J	Details of Owner / Proprietor / Partners				
	Name		Nationality		
	Mr. Nabil Selbak	MD	Lebanon		
K	Names and Address of Subsidiary / Associate Co.				
L	Details of companies you currently enjoy credit facilities from				
	Name	Contact Person	Mobile / Phone	Credit Limit	Payment Terms
	Mubandam Electrical		Mr. Mathew - 02-6424471	10 Million	120 Days
	Safeline Electrical		Mr. Shabnaz - 02-644499	05 Million	120 Days
	Electra Abu Dhabi		Mr. Arun - 02-6778077	03 Million	120 Days
M	Details of Credit requirement				
	Credit Limit AED	100,000/-	for	120	days
N	Name and Address of Bankers with A/C No.				
	Name & Branch	Account No.			
	ADCB - Main	359214020001			
	FAB - Main	1411323288024019			
O	Authorized Signatories for cheques / Bill of Exchange / Other banking documents				
	Name	Designation	Specimen Signature		
	Mr. Nabil Selbak	MD			
	Mr. Nael Awad	Finance Manager			
P	Authorized signatory for LPOs				
	Name	Designation	Specimen Signature		
	Mr. Hisham El Mahi	General Manager			
	Mr. Nael Awad	Finance Manager			



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General Terms & Conditions :-

- 1 An Interest of 12% will be charged on the outstanding amounts beyond the allowed credit period.
- 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

Mr. Nael Awaad
(Finance Manager)

Local Sponsor's Name

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
- 4 Copies of Document showing authorised signatory.
- 5 Guarantee Cheque, undated (amount to be decided at the time of credit approvals).

For office use only

Account No.....

Limit (Dhs).....

Product/s.....

Time Period.....

Remarks.....

Approved By :-

Sales Manager.....

Accounts Manager.....

General Manager

Managing Director.....