# 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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11 113		APPLICATI	ON FORM C	REDIT FACILI	ITY	
A	General Details					
1	Name of Organization	Al Shirawi Electrical & Mechanical Engineering Co. LLC				
В	Legal Status	Limited Liabilty Company (Whether LLC, Co., Partnersh				
С	Address	POBON 33539, Res Alkhon Ind Alea -2, Dubai, UAE				
D	Telephone	04-3337644				
Е	Fax	04-3336898				
F	Email	info Dalshiravi al				
G	Year of Establishment	1976				
Н	Commercial Regn. No.	42063		Expiry Date _		
I	Trade License No.	206341		Expiry Date - 3	29-04-2020	
J	Details of Owner / Proprie	etor / Partners				
	Name			Nationality	Nationality	
	MEDHA J SUKTHANKAR	Greneral Manager	CANA	DIAN		
VOTES ES	Name Conta	act Person	Mobile / Phone	Credit Limit		
	enlight Truly RK Man				LP0-120 d	
	1 4	non			LP0-120d	
М	Details of Credit requirem					
	Details of Credit requirem  Credit Limit AED Soo,	nent	for <u>    20</u>	days		
		nent	for &0	days		
		nent		days		
М	Credit Limit AED S60,  Name and Address of Bar	nent		days		
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M N	Name and Address of Bar  Name and Address of Bar  Name  Mashrag Rank  Authorized Signatories for Name	nent  nkers with A/C No.  lame & Branch  Al Rigga  r cheques / Bill of I	Exchange / Other band	01049015 7089 king documents	LD0-1204	
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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.
- The firm/company will be totally responsible for payments of any materials supplied against LPOs duly signed by authorized personne 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.
- 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 Author 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

General 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