

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 SHAIBA SAEED AL HAMLI GROUP OF EST (AL FIRAS GENERAL CO			
B	Legal Status	GENERAL CONTRACTING AND MAINTANANCE	(Whether LLC, Co., Partnership, Proprietorship) ✓		
C	Address	AL SIMMAH STREET- AL KHALIDIYA-ABUDHABI -U.A.E			
D	Telephone	02-6669600			
E	Fax	02-6658511			
F	Email	info@alfiras.com			
G	Year of Establishment	31/07/1988			
H	Commercial Regn. No.		Expiry Date		
I	Trade License No.	CN-1023851	Expiry Date	13-10-2019	
J	Details of Owner /Proprietor / Partners				
	Name	Nationality			
	Mr. AL SHAIBA SAEED AL HAMLY	OWNER	UAE		
K	Names and Address of Subsidiary / Associate Co.				
	SOZO MANAGEMENT CONSULTANTS / AL SIMMAH STREET- AL KHALIDIYA-ABUDHABI -U.A.E				
	COSMO WASTE TRASPORT / AL SIMMAH STREET- AL KHALIDIYA-ABUDHABI -U.A.E				
L	Details of companies you currently enjoy credit facilities from				
	Name	Contact Person	Mobile / Phone	Credit Limit	Payment Terms
	CICON	WAEEL JAWAHARI	02 641 5444	1,000,000	120 DAYS PDC
	TREMIX	Mr. GASSAN	02 555 5400	1,500,000	120 DAYS PDC
	UNION REBAR	Mr. MOHAMED SAMI	02 5500177	2,000,000	120 DAYS PDC
M	Details of Credit requirement				
	Credit Limit AED <u>500,000</u> for <u>120</u> days				
N	Name and Address of Bankers with A/C No.				
	Name & Branch			Account No.	
	ADCB - ABU DHABI			730071020001	
O	Authorized Signatories for cheques / Bill of Exchange / Other banking documents				
	Name	Designation		Specimen Signature	
	Mr. AL SHAIBA SAEED AL HAMLY	OWNER			
P	Authorized signatory for LPOs				
	Name	Designation		Specimen Signature	
	Mr. MOHAMMAD ITBAISHA	PROCUREMENT MANAGER			
	Mr. WASEEM ZAINEH	DEPUTY PURCHASING MANAGER			

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SHAHID[↑]

Industries

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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.



Local Sponsor's Name: Mr. ALSHAIBA SAEED ABDULHADI ALHAMELI

Signature.....

Telephone No.: 02-6669600

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.....