

# 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

<b>A</b>	<b>General Details</b>				
1	Name of Organization	METALFAB MIDDLE EAST FZ LLC			
B	Legal Status	LLC	(Whether LLC, Co., Partnership, Proprietorship)		
C	Address	PO BOX: 6692, AL HAMRAH FZ, RAS AL KHAIMAH, UAE			
D	Telephone	00971 72444981			
E	Fax	00971 72444982			
F	Email	info@metalfabme.com			
G	Year of Establishment	2007			
H	Commercial Regn. No.	32079	Expiry Date	24-01-2020	
I	Trade License No.	RAKIA28FZ102070244	Expiry Date	24-01-2020	
<b>J</b>	<b>Details of Owner / Proprietor / Partners</b>				
	Name	Nationality			
	RAFEEL M.A	INDIAN			
<b>K</b>	<b>Names and Address of Subsidiary / Associate Co.</b>				
<b>L</b>	<b>Details of companies you currently enjoy credit facilities from</b>				
	Name	Contact Person	Mobile / Phone	Credit Limit	Payment Terms
	DUKE INTERNATIONAL	JIJESH	048860801		120 DAYS
	DSS STEEL LLC	ALKESH	072288253		120 DAYS
	FIRST SOURCE	VIVEK	065360634		120 DAYS
<b>M</b>	<b>Details of Credit requirement</b>				
	Credit Limit AED 1,000,000 for 120 days				
<b>N</b>	<b>Name and Address of Bankers with A/C No.</b>				
	Name & Branch			Account No.	
	BANK OF BARODA			90050400000117	
<b>O</b>	<b>Authorized Signatories for cheques / Bill of Exchange / Other banking documents</b>				
	Name	Designation		Specimen Signature	
	RAFEEL M.A	DIRECTOR			
<b>P</b>	<b>Authorized signatory for LPOs</b>				
	Name	Designation		Specimen Signature	
	RAFEEL M.A	DIRECTOR			
	SAMOON C.U	TL / SUPPLY CHAIN			
	BINU K	FINANCIAL CONTROLLER			

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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



Name

RAFEEL M.A

Signature.....

Telephone No.: 00971 72444981

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.....