

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	FARNEK SERVICES			
B	Legal Status	LLC	(Whether LLC, Co., Partnership, Proprietorship)		
C	Address	PO Box 5423, ALQUOZ			
D	Telephone	04-3824400			
E	Fax	04-3397486			
F	Email	info@farnek.com			
G	Year of Establishment	1989			
H	Commercial Regn. No.	45796	Expiry Date		
I	Trade License No.	228703	Expiry Date	14/06/2020	
J	Details of Owner / Proprietor / Partners / DIRECTORS				
	Name		Nationality		
1	MARKUS	OBERLIN	SWISS		
2	LUEAS	EIGENMANN	SWISS		
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
	PANREHE	MANOJ	04, 3883644	200,000	90 days Credit
	ALVAR	SARAB	04, 3419650	200,000	90 days Credit
	NAFEC	Jaganito	04815111	200,000	90 days Credit
M	Details of Credit requirement				
	Credit Limit AED 200,000 for 30 days				
N	Name and Address of Bankers with A/C No.				
	Name & Branch			Account No.	
	ADCB - KHALID BIN WALEED ST			1006678112400	
O	Authorized Signatories for cheques / Bill of Exchange / Other banking documents				
	Name	Designation	Specimen Signature		
	MARKUS OBERLIN	CEO			
	LUEAS EIGENMANN	COO	L. Eigenmann		
P	Authorized signatory for LPOs				
	Name	Designation	Specimen Signature		
	NO SIGNATURE REQUIRED - ELECTRONIC PO				

FARNEK

FarneK Services L.L.C.
P.O. Box: 5423, Dubai - U.A.E.
Tel. : 04-382 4400
Fax : 04-339 7160
www.farneK.com

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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

FARNEK
Farnek Services L.L.C.
P.O. Box: 5423, Dubai - U.A.E.
Tel. : 04-382 4400
Fax : 04-339 7160
www.farnek.com

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.....