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



Page 1

| | | APPLICA | ATION FORM | CREDI | T FACILITY | 1 456-1 | |
|-------------|---|--|--|--------------|--|--|--|
| A | General Details | | | | | | |
| 1 | Name of Organization | GHANTOOT LANDSCAPING LLC | | | | | |
| В | Legal Status | | | | (Whether LLC, Co | , Partnership, Proprietorship) | |
| C | Address | | | | | | |
| D | Telephone | 512 Fl., SIT Tower Silicon Oasis, Dubai 04 333 1430 | | | | | |
| E | Fax | 04 333 1836 | | | | | |
| F | Email | ghls@ghlsuae.com | | | | | |
| G | Year of Establishment | 2011 | | | | | |
| Н | Commercial Regn. No. | see attachme | nment Expiry Date | | | | |
| I | Trade License No. | occ attachine | | | Expiry Date | | |
| I | Details of Owner /Proprietor / Partners | | | | | | |
| | Name | The Control of the Co | Nationality | | | | |
| | Mr. Manea Ali Mohammed Sadeq Al Ba | | | | | | |
| T. | Nomes and Address of Co | 1 .: 1: / A | | | | S. 1970 C. 27 (1970 F. 1970 F. | |
| K | Names and Address of Subsidiary / Associate Co. | | | | | | |
| | Ghantoot Real Estate International | | | | | | |
| | Ghantoot Transport Gene | ral Contracting | | | | | |
| L | Details of companies you | | | | | | |
| a describer | A STATE OF STREET AS DESIGNATION OF THE STREET, AND ASSOCIATION OF THE STREET, AND ASSOCIATION OF THE STREET, | act Person | Mobile / Pho | ne | Credit Limit | Payment Terms | |
| | Al Jazeera Mr. Mohammad | | 04 388 1375 | | 200,000 | 30 Days | |
| Manar | Al Omran Mr. Ahm | ad | 06 525 1510 | | 200,000 | 30 Days | |
| M | Dotails of Condit as giving | | | | THE STATE OF THE S | | |
| M | Details of Credit requiren | AN ALEXANDER STATE OF THE STATE | | | | | |
| | Credit Limit AED 300,000 | | for days 120 Days | | ys 120 Days | | |
| N | Name and Address of Bankers with A/C No. | | | | | | |
| | Name & Branch | | | Account No. | | | |
| | Commercial Bank of D | bu Dhabi | | 100 130 7550 | | | |
| O | Authorized Signatories for cheques / Bill of Exchange / Other banking documents | | | | | | |
| | Name | AL CARE, CONT. ALL PARTS | Design | | | Specimen Signature | |
| Лr. Ма | nea Ali Mohammed Sadeq | Al Balooshi | Managing Director | | | | |
| | Mr. Mohamed Sadat | | General Manager | | | 3 | |
| Р | Authorized signatory for LPOs | | | | | | |
| | Name | | Designation Signature Procurement Manager | | | | |
| | Mr. Jamil Abdo | | Procurement Manager | | | We - | |
| | IVIr. Jamii Abdo | | <u>Frocurement</u> ivianadei | | 11 44 | | |
| | Mr. Mohamed Sadat | | General Manager | | -17/1 | 40 | |

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



Page 2

General Terms & Conditions :-

- 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 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.
- 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 abpve condition and declare that all information given in this application are true and correct.



P.O. Box: 111504, Dubai-U.A.E.

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 |