

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 BAIT AL MUZAKHRAF CONTRACTING & PLASTER			
B	Legal Status	(Whether LLC, Co., Partnership, Proprietorship)			
C	Address	OFFICE 401, CRESCENT HOUSE BLDG. AL MAJAZ 3, SHARJAH			
D	Telephone	06-521-0108			
E	Fax				
F	Email	info@aacuae.com			
G	Year of Establishment	2018			
H	Commercial Regn. No.	188213	Expiry Date		
I	Trade License No.	770849	Expiry Date	31/07/2021	
J	Details of Owner / Proprietor / Partners				
	Name				Nationality
	Mohamed Ahmed Attalla Abdelhameed				EGYPT
K	Names and Address of Subsidiary / Associate Co.				
	N/A				
L	Details of companies you currently enjoy credit facilities from				
	Name	Contact Person	Mobile / Phone	Credit Limit	Payment Terms
	AL MADINA BLDG. MAT.	MR. AONAN	06-546-2552	100,000/-	60 days
	ALL STAR BLDG. MAT.	MR. MOUINER	054-425 0059	100,000/-	60 days
M	Details of Credit requirement				
	Credit Limit AED 150,000/- for 45 days				
N	Name and Address of Bankers with A/C No.				
	Name & Branch			Account No.	
	ADCB - SHARJAH			11752819820001	
O	Authorized Signatories for cheques / Bill of Exchange / Other banking documents				
	Name	Designation			Specimen Signature
	Mohamed Ahmed Attalla Abdelhameed	OWNER			
P	Authorized signatory for LPOs				
	Name	Designation			Specimen Signature
	Mohamed Ahmed Attalla Abdelhameed	OWNER			

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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



Local Sponsor's Name

AYOUB HASSAN SAADO MOHAMMED ALMUSTAHEEKH

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.....