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

		APPLICATION	FORM C	CREDIT	FACILITY	
١	General Details					
1	Name of Organization	Jombo Engineering	Į.			· ·
3	Legal Status	LLC			(Whether LLC, Co	o., Partnership, Proprietorship)
:	Address	AL GURG BLDG, TARIQ BIN ZIY	YAD ROAD,P.O.BO	X:3426, DUBAI-	JAE	
	Telephone	(+9714) 3367999				
	Fax	(+9714) 3360495				
	Email	fm.support@jumbo.ae				
	Year of Establishment	28/03/2007				
	Commercial Regn. No.	593280 Expiry Date				27/03/2020
	Trade License No.	593280 Expiry Date 27/03/2020				
J	Details of Owner / Proprietor / Partners					
	Name			Natio	nality	
			ubai UAE			
		ou currently enjoy credit fac			Credit Limit	Payment Terms
	Name Co	ntact Person	cilities from	2	Credit Limit	Payment Terms
L M	Name Co Details of Credit require	ement	cilities from	days	Credit Limit	Payment Terms
	Name Co	ement	ilities from Mobile / Phone		Credit Limit	Payment Terms
M	Details of Credit requir	cment fo	ilities from Mobile / Phone		Credit Limit	Payment Terms
M	Name Co Details of Credit require	cment fo	ilities from Mobile / Phone			Payment Terms unt No.
M	Details of Credit requir	cment Bankers with A/C No. Name & Branch	ilities from Mobile / Phone		Acco	
M	Details of Credit requir Credit Limit AED Name and Address of I National bank of fujairal	ement Bankers with A/C No. Name & Branch Bur Dubai branch	Mobile / Phone	days	Acco	
M	Details of Credit requir Credit Limit AED Name and Address of I National bank of fujairal	cment Bankers with A/C No. Name & Branch	ilities from Mobile / Phone or	days days 012000723108 anking docum	Acco	unt No.
N	Details of Credit requir Credit Limit AED Name and Address of I National bank of fujairal	ement Bankers with A/C No. Name & Branch Bur Dubai branch	Mobile / Phone	days days 012000723108 anking docum	Acco	
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M	Details of Credit requir Credit Limit AED Name and Address of I National bank of fujairal Authorized Signatories Name	ement	ilities from Mobile / Phone or	days days 012000723108 anking docum	Acco	unt No.
M N	Details of Credit requir Credit Limit AED Name and Address of I National bank of fujairal Authorized Signatories Name Authorized signatory for	ement	Mobile / Phone or ange / Other basigna	days 012000723108 anking documention	Acco	unt No. Specimen Signature
M N	Details of Credit requir Credit Limit AED Name and Address of I National bank of fujairal Authorized Signatories Name Authorized signatory for Name	cment Bankers with A/C No. Name & Branch Bur Dubai branch for cheques / Bill of Excha	ilities from Mobile / Phone or ange / Other ba Designa	days 012000723108 anking documention	Acco	unt No. Specimen Signature Specimen Signature
	Details of Credit requir Credit Limit AED Name and Address of I National bank of fujairal Authorized Signatories Name Authorized signatory for	ement Bankers with A/C No. Name & Branch n ,Bur Dubai branch for cheques / Bill of Excha	ilities from Mobile / Phone or ange / Other ba Designa	daysdaysdaysdaysdaysdaysdaysdaysdaysdaysdays	Acco	unt No. Specimen Signature

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Page 2

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

Signature.....

Telephone No.:....

Mob:....

Documents Required

- 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