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

		APPLICAT	LION FORM	CILLLI	LIMOIMI	
	General Details					
	Name of Organization	BINYABER	DRIVING INST	POTE / TA	STEED VEHICLE	TESTING CENTER
	Legal Status	ис -				Partnership, Proprietorship
	Address	OPP GOVT WAREHOUSE AL RUWAYYA III - DUBAL . WAE.				
)	Telephone	04:2156000				
	Fax					
	Email	INFO @ BINYABER. COM				
	Year of Establishment					
	Commercial Regn. No.	AS At	tached.		piry Date	
	Trade License No.		As Attached. Expiry Date			
	Details of Owner / Prop	rietor / Partners				
	Name		Nationality			
	Mr. ABDULLA.			EMARATI.		
	Names and Address of S	TIES + DU	LUES PROPER	ries +		
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Page 2

General Terms & Conditions:

Sales Manager.....

General Manager

- An Interest of 12% will be charged on the outstanding amounts beyond the allowed credit period. 1
- Purchases will only be delivered against local purchase orders signed by authorized personnel. 2
- 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.
- 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 5 signatory by owner/s to sign such a document is to be attached.

/We a	gree to the above condition and declare that all inform						
	Company Stamp	Local Sponsor's Name Mr. ABDULLA BILL MOHD JABER					
		Signature					
		Telephone No.: 04: 2156000					
		Mob :					
Docun	nents Required						
1	Copy of Valid Trade License.						
2	Copy of Chamber of Commerce / Economic Department Ce	ertificate.					
3	Copy of Sponsor Passport / Identity Card						
4	opies of Document showing authorised signatory.						
5	Guarantee Cheque, undated (amount to be decided at the	uarantee Cheque, undated (amount to be decided at the time of credit approvals).					
		For office use only					
Accou	nt No	Limit (Dhs)					
Product/s Tim		Time Period					
Remar	ks						
Appro	ved By :-						

Accounts Manager.....

Managing Director.....