

# 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	<b>General Details</b>				
1	Name of Organization	LEMINAR AIR CONDITIONING COMPANY LLC			
B	Legal Status	LLC	(Whether LLC, Co., Partnership, Proprietorship)		
C	Address	PO Box 33539, RAS AL KHOR INDUSTRIAL AREA, DUBAI, UAE			
D	Telephone	+971 43338700			
E	Fax	+971 43339300			
F	Email	INFO@LEMINAR.AE			
G	Year of Establishment	1991			
H	Commercial Regn. No.	45046	Expiry Date	15-OCT-2019	
I	Trade License No.	226140	Expiry Date	15-OCT-2019	
J	<b>Details of Owner / Proprietor / Partners</b>				
	Name		Nationality		
	MOHD.	AL SHIRAWI	EMIRATI		
	NAVIN. M.	VALRANI	INDIAN.		
	PRAMODH	IDICHERIA	INDIAN		
K	<b>Names and Address of Subsidiary / Associate Co.</b>				
	AL SHIRAWI FACILITIES MANAGEMENT - RAS AL KHOR, DUBAI				
	AL SHIRAWI ELECTRICAL AND MECHANICAL ENGINEERING CO LLC - RAS AL KHOR				
L	<b>Details of companies you currently enjoy credit facilities from</b>				
	Name	Contact Person	Mobile / Phone	Credit Limit	Payment Terms
	SABI AIR CONDITIONING		04 2213770	300,000	120 days CREDIT
	RELIABLE TRADERS		04 2228187	300,000	120 days CREDIT
M	<b>Details of Credit requirement</b>				
	Credit Limit AED 100,000 for 30 days (BANK TRANSFER)				
N	<b>Name and Address of Bankers with A/C No.</b>				
	Name & Branch			Account No.	
	STANDARD CHARTERED BANK, MAIN BRANCH			0120571301	
O	<b>Authorized Signatories for cheques / Bill of Exchange / Other banking documents</b>				
	Name	Designation		Specimen Signature	
	ASIF MASTER	FINANCE DIRECTOR			
P	<b>Authorized signatory for LPOs</b>				
	Name	Designation		Specimen Signature	
	KARTIK RAVAL	GENERAL MANAGER			

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## General Terms & Conditions :-

- 1 ~~An interest of 12% will be charged on the outstanding amounts beyond the allowed credit period.~~ X
- 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

GENERAL MANAGER.

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.....