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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	A	APPLICA'	TION FORM	A CR	EDIT FACILIT	Y	
A General De	tails						
1 Name of Or	Name of Organization BEST		GUIF CLADDING LLC				
B Legal Status		Limited	Limited Liability Company (Whether LLC, Co., Partnership, Proprietorship)				
C Address			VI		4		
/ // /		et Col	EW Zenaya, Umm Al Quivan, P.O Box A8G87.				
E Fax		1-67	64000	3 3			
F Email		aniabestsulface.					
G Year of Esta	Year of Establishment		1-1-2013				
H Commercial	Regn. No.	1105616 Expiry Date 27(11)19					
			Expiry Date			27 (11)	
J Details of C	wner /Proprieto	r / Partners				10 7 111111	
The same of the sa	ame			Birth much	Nationality		
Anto C	Anto George		INDIA				
				(14)			
	-			85			
K Names and	Address of Subsi	idiary / Associ	ate Co.				
L Details of co	ompanies you cur Contact I		njoy credit facilities from Mobile / Phone		Credit Limit	Payment Terms	
anube. 1	no hammee	1 Zaid	05699190	69	000001	go days PDC	
rloyath			05545359	38	160000	90 day 1 DDC	
Call to 11	July 1				1	10 50 15 750.	
	redit requiremen	A STATE OF THE STA					
Credit Limit	AED _50008		for <u> </u>	days	3		
N Name and A	ddress of Banke	rs with A/C No	0.				
	Name & Branch			Account No.			
BANK OF BAKODA			90050200004		5020000445	8	
	Signatories for ch	eques / Bill of	Exchange / Other		documents		
	Name		Designation			Specimen Signature	
ANTO I	ANTO GEORGE		MANAGING DIRECTOR		2	Ask.	
Authorized s						11/11/2	
		s				72	
The state of the s	Name		Designation			Specimen Signature	
NITHIN DOMINIC			PURCHASE			Nixhood	
	HAMEED IBRAHIM		OPERATION MANAGER				
	ANTO GEORGIE ANI VARGHESE		MD			A	
I A	2 CILCE	FIN	ANCE MAN				

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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 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