## SHAHID HUSSAN SCAFFOLDING IND. LLC

P.O. Box : 79028, Ind. Area 11, Sharjah UAE Mobile : +971-551144401; +971-503971249

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Page 1

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		AP	PLICAT	ΓΙΟΝ FOR	M CRE	DIT	FACIL	ITY						
A	General Details				N W 7		No. of the							
1	Name of Organization	E	ELIO ALUMINIUM FABRICATORS LLC											
В	Legal Status					(	Whether L	LC, Co., I	Partners	ship, Proprietorship				
C I	Address	UH.	1#7.~/	AG WH, AL	0007	2 1)	UBAI,	LIAC	-					
D	Telephone		4-3453		2002	2 , 0	CGAT,	Une						
-	Fax		+ - 3453											
F I	Email		Shemi @elioaficom, Shashi @elioaficom											
G S	Year of Establishment		-05-20		, , , , ,									
H (	Commercial Regn. No.		710031			Expir	ry Date			13-05-202				
I 7	Trade License No.						ry Date			75 -5 202				
j 1	Details of Owner /Pr	oprietor /	Partners		37 12 12				1071					
	Name					Nation	ality	T 0.0						
_	Mr. GARA DICKS		ARTNER	Sc	A HTUC	FRICA	A							
+														
_	Names and Address	of Subsidia	rv / Associa	ate Co.	Names and Address of Subsidiary / Associate Co.									
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## General Terms & Conditions :-

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

Documents Required LUMINIUM

Local Sponsor's Name

- Copy of Valid Trade License.
- Copy of Chamber of Commerce / Economic Department Certificate.
- 3 Copy of Sponsor Passport / Identity Card
- Copies of Document showing authorised signatory.
- 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