

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	General Details				
1	Name of Organization	AL Mezin General Contracting LLC			
B	Legal Status	LLC	(Whether LLC, Co., Partnership, Proprietorship)		
C	Address	Villa No-E10, AL Rawabit Street, Khalidiya, Abu Dhabi.			
D	Telephone	02-6810 456			
E	Fax	02-6814 463			
F	Email	PURCHASES@almezincontracting.com			
G	Year of Establishment	1993			
H	Commercial Regn. No.	CN-1014802	Expiry Date	14-08-2020	
I	Trade License No.		Expiry Date		
J	Details of Owner / Proprietor / Partners				
	Name				Nationality
	Dr. Jamil Hamdan - GM -				Jordanian
K	Names and Address of Subsidiary / Associate Co.				
L	Details of companies you currently enjoy credit facilities from				
	Name	Contact Person	Mobile / Phone	Credit Limit	Payment Terms
	SMKA Electric - Mr. Niaz Khan		02 555 7873	500,000	PDC 90 days.
	BETEC CAD Industries - Mr. Samil Panda		06 557 5252	1,000,000	PDC 60 days.
	Cleveland Cable - Mr. Shareef		04 880 6185	750,000	PDC 90 days.
M	Details of Credit requirement				
	Credit Limit AED 50,000/- for 60 days				
N	Name and Address of Bankers with A/C No.				
	Name & Branch			Account No.	
	1. FAB, Khalidiya			015 777 558	
	2. AL Hilal Bank, Corniche			0241 888 66 014	
O	Authorized Signatories for cheques / Bill of Exchange / Other banking documents				
	Name	Designation		Specimen Signature	
	Dr. Jamil Hamdan	General Manager			
P	Authorized signatory for LPOs				
	Name	Designation		Specimen Signature	
	Mr. Suhail M. Saed	Purchasing 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.
- 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



Dr. Jamil Hamdan

Local Sponsor's Name

Signature.....

Telephone No.: 02-6810456

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.....