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

		APPLICA	TION FORM	I CREDI'	I FACILITY		
A	General Details						
1	Name of Organization	PEARL GARDEN LANDSCAPE & IRRIGATION SERVICES L.L.C					
В	Legal Status	LIMITED LIABI	LIMITED LIABILITY COMPANY		(Whether LLC, Co., Partnership, Proprietorship		
С	Address	804, AL SALEM	804, AL SALEMIYAH TOWER, RIGGA AL BUTEEN, DEIRA, DUBAI, U.A.E				
D	Telephone	04-6032791					
Е	Fax	04-2293372	04-2293372				
F	Email	PGL@PEARLG	PGL@PEARLGARDENLANDSCAPE.COM				
G	Year of Establishment	2012					
Н	Commercial Regn. No.	1093939		Ex	17/04/2020		
I	Trade License No.	669109		Ex	17/04/2020		
J	Details of Owner / Proprietor / Partners						
	Name		Nationality				
	MR. RAWOOF ALI		INDIAN				
	MR. JAFFAR ALI		INDIAN				
L	Details of companies Name			one	Credit Limit	D (m	
M	SGULF LLC MR. PRAVI L TRADING LLC MR. ZAID M Details of Credit requ Credit Limit AED10	irement 0,000.00	055-4151075 06-5549593 for120	100	0,000.00 0,000.00	Payment Terms 120 DAYS 120 DAYS	
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Page 2

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.
- 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.: 04-6032791

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