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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| | | APPLICAT | TION FORM | 1 CRED | IT FACILI | TY | | | |
|--|--|-------------------------------------|------------------------|-----------------|---|------------------------|-----------------|--|--|
| A | General Details | | | | | | | | |
| 1 | Name of Organization | Silver Coas | t Construct | ion and | Boring L | L | | | |
| В | Legal Status | LLC | | | (Whether LLC | C, Co., Partnership, F | 'roprietorship) | | |
| С | Address | Airport Rd. Corner Al Falah 64. Auh | | | | | | | |
| D | Telephone | 02-6214994 | | | | | | | |
| Е | Fax | 07-6219228 | | | | | | | |
| F | Email | info@cilvercoast ae | | | | | | | |
| G | Year of Establishment | 1997 | | | | | | | |
| Н | Commercial Regn. No. | T | | Expiry Date | | | | | |
| I | Trade License No. | | | Expiry Date | | | | | |
| J | Details of Owner / Proprie | | | | | | | | |
| | Name | | Nationality | | | | | | |
| | Mr. Shaher Awartani | Jordan | | Jordan | | | | | |
| | Mr. Ahmed Ismael | | VAE | | | | | | |
| | | | | | | | | | |
| K | Names and Address of Subsidiary / Associate Co. | | | | | | | | |
| | | | | | | | | | |
| | | | | | 3 | | | | |
| | | | | | | | | | |
| L | Details of companies you | currently enjoy cre | edit facilities from | | | | | | |
| Name Conta | | ct Person Mobile / Pho | | one | Credit Limit | Paym | ent Terms | | |
| Tee | Mr. Jas | im 02-55020 | | | | 90 | days | | |
| | mix AUH Mr. Wa | | | 044 | | 120 | 120 days | | |
| Sage | hine Mr. Sho | ahed | 056 -9265 | -9265202 | | 90 | days | | |
| M | Details of Credit requirem | | | | | | | | |
| | Credit Limit AED 200; 000. for 120 days | | | | | | | | |
| | | | | | | | | | |
| N | Name and Address of Bankers with A/C No. | | | | | | | | |
| | Name & Branch | | | Account No. | | | | | |
| | Arab Bank | | | 4001-596120-303 | | | | | |
| | ADCB | | 10541835020 | | | | | | |
| О | Authorized Signatories for cheques / Bill of Exchange / Oth | | | banking do | cuments | | | | |
| | Name | | Designation | | | Specimen Signature | | | |
| | Mr. Shaher Awartani | | Chairman | | | | | | |
| | The second secon | | | | | | | | |
| P | Authorized signatory for L | POs | | | | | | | |
| The Control of the Co | Name | | Designation | | Balantai la | Specimen Signature | | | |
| | Eng. Karim Yacoub | | Director of Operations | | | Jakan | | | |
| | 13,000 | | 7 | | - | | | | |
| | | | | | | | | | |
| _ | | | | | | | | | |

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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.
- 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 | Mr. Shaher | Awartani | | | | |
|----------------------|------------|----------|--|--|--|--|
| 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 |