

**APPLICATION FOR CREDIT FACILITIES**

Company Name:	_____				
Tel No.:	_____	Fax No.:	_____		
P.O. Box:	_____	Emirate:	_____		
Contact Person/People for Payment:	_____				
Name of General Manager/Purchase Manager:	_____				
Location:	_____				
Building:	_____	Office/Flat/Shop No.:	_____		
Street:	_____	Area:	_____		
Date of Establishment:	_____	Email:	_____		
License Expiry Date:	_____	Web:	_____		
Business Activity/Line of Business:	_____				

	Company Partner Details(Including Local Sponsor)	Name of Partner	% of Shares	Nationality	Designation	Res Tel. No.	Mobile No.
1							
2							
3							
4							
5							

	Authorized Signatory's Detail:	(To Sign Cheques/Local Purchase Order)		
	Name of Authorized Signatory	Designation	Specimen Signature	
1				
2				
3				

Associated Business Details:						
List of Associated Companies/Firms(If Any)						
	Company Name	City	Emirates	Tel No.	Contact Person	Facility Availed From us
1						
2						
3						

Bank Details:			
Bank	Branch	Emirate	Account No.
1			
2			

Business References:(Company Name(s) presently whom you are dealing with)					
Company Name	City	Emirates	Tel No.	Contact Person	Facility Availed From us
1					
2					
3					

A I/We wish to apply for credit facilities with Advance Procurement For General Trading , to the extent of:	
	(AMT IN WORD)AED:
Credit Period Required(in Days):	Type of Credit: LPO PDC:

B I/We hereby agree to settle the Account by issuing Post Dated Cheque (PDC).

1 \_\_\_\_\_ PDC will be issued at the time of collection/supply of material(s)

2 \_\_\_\_\_ PDC will be issued & handover to us within 10days from the date of collection/supply of material(s)

(Tick One)

C I/We/Mr./Ms. \_\_\_\_\_

Jointly and severally guarantee due to compliance with terms of the above credit agreement to your company in the event of any deviation from our agreed payment terms

D I/We undertake unconditionally to pay for goods and or services provided by Advance Procurement For General Trading

Within the SANCTIONED CREDIT PERIOD.

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Authorized Signatory

For: \_\_\_\_\_

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Company Stamp

※ If Authorized signatory to Sign Cheque is other than Local Sponsor, then please provide the Power of attorney duly attested by Local Court/Notary Public

**The following documents are must for processing this Credit Application**

- a Duly filled and signed/Stamped Credit Application Form in Original
- b Valid Trade/Commercial/Industrial License Copy & Valid Chamber of Commerce Vat Registration Certificate Copy
- c Valid Passport copy of Owner(s)/Partner(s)/Director(s)/(Local Sponsor along with Visa page)
- d Proof of Ownership/Partnership(Memorandum of Association)
- e Bank statement of last 6 months.

※ PS: Valid copies of the above documents must be submitted to us soon after it is expiry, to continue our existing credit facility

**For (Advanced Procurement) Official Purpose Only**

Remark of:

(A) Sales Executive:

The details provided in this credit application form is verified by myself by visiting the Applicant's premises (Office/Factory/Warehouse/Yard/Site Office), as in my capacity of Sales E

(B) Dept. Manager

(C) Control Manager

Application Received on:		Time:	Received By:	
Approved By				REMARKS(IF ANY)
Dept. Manager	Control Manager	Finance Manager	President	