

# Credit Application Form



## COMPANY DETAILS

Company Name:	
Address:	
Type of Business:	
Business Activity:	
Year Established:	
Commercial License No.:	
Trade Expiry Date:	
Tax Registration No. (TRN):	
Annual Turnover (AED/USD):	

## COMPANY OWNERSHIP/SHAREHOLDERS

Full Name	% of Ownership	Nationality	ID/Passport No.	Expiry Date	Position in the Company

## FINANCE MANAGER CONTACT DETAILS

Name:	
Mobile No.:	
Email:	

## PROCUREMENT CONTACT DETAILS

Name:	
Title:	
Mobile No.:	
Email:	

## ACCOUNT PAYABLE DETAILS

Name:	
Title:	
Mobile No.:	
Email:	

**TRADE REFERENCES**

<b>Vendor 1:</b>		<b>Vendor 3:</b>	
Address:		Address:	
Telephone:		Telephone:	
Point of Contact:		Point of Contact:	
<b>Vendor 2:</b>		<b>Vendor 4:</b>	
Address:		Address:	
Telephone:		Telephone:	
Point of Contact:		Point of Contact:	

**AUTHORIZED SIGNATORIES ON LPO**

Name:		Name:	
Title:		Title:	

**AUTHORIZED SIGNATORIES ON CHEQUES**

Name:		Name:	
Title:		Title:	

**CREDIT REQUEST**

Requested Credit Limit (AED/USD/SAR):	
Preferred Payment Terms:	
Expected Purchase (Annual) AED/USD/SAR:	

**DOCUMENTS REQUIRED**

Trade License (Include the stakeholders shareholding % information page.)	Bank Statement
Memorandum of Association	Passport Copies of All Partners
Power of Attorney	National ID Copies of All Partners
VAT Registration Certificate	2 Years Audited Financials

**CUSTOMER DECLARATION**

1. We agree to settle all payments on due date as per invoice.
2. We hereby agree that all information provided above is correct
3. By submitting this application, you authorize FVC TRADING LLC/FVC MEA FZCO to make inquiries into the banking and business/trade references that you have supplied.
4. Authorized Signatory:

**FOR FVC TRADING LLC/ FVC MEA FZCO ONLY**

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**MANAGEMENT APPROVAL**

<b>Approved Limit (AED/USD):</b>		<b>Payment Term:</b>	
<b>Title</b>	<b>Name</b>	<b>Signature</b>	
<b>Regional Credit Controller Manager</b>			
<b>Sales Manager</b>			
<b>CFO</b>			

