

CREDIT APPLICATION FORM

ORGANIZATION DETAILS

Name of Organization : _____
Number of Employees : _____
Parent Company or Owner : _____
Affiliated Company : _____
Type of Business : _____
Trade License Number : _____ Date of expiry: _____
Commercial Reg. No. : _____
Date of operation : _____
Number of branches : _____

ADDRESS DETAILS

Sponsors Name and Address (if applicable) : _____
: _____
Business Address : _____
: _____
Internet Address (if applicable) <http://www> : _____
Billing Address (if different from above) : _____

CONTACT DETAILS

Contact Name: _____
Position : _____
Telephone : _____ Telefax: _____
E-mail : _____

Credit Facility Required AED/USD.....

BANK DETAILS

Name of Bank : _____
Address : _____
Account No. : _____
Swift Code : _____
Telephone No.: _____ Telefax : _____

BUSINESS REFERENCES (THREE) Companies who provide you Credit Facilities

Company	Contact Person	Tel. No.	Credit Terms	Amount	Mode of Payment

AUTHORIZED SIGNATORIES to sign on behalf of the Company (for bookings)

Name	Position	Specimen Signature
_____	_____	_____
_____	_____	_____
_____	_____	_____

NAME OF EXECUTIVE TO BE CONTRACTED FOR PAYMENT

_____	_____
Name	Position
_____	_____
Name	Position

Undertaking by Applicant

- 1) I/We hereby declare that the above information is true to the best of my/our knowledge.
- 2) All invoices to be paid within the agreed allotted credit period.
- 3) I/We understand that the failure to make payment when an amount becomes due will result in automatic suspension/cancellation of the credit facilities and the account shall become payable in full and further, **Rayna Tourism LLC** and Affiliated Companies shall have the right to take any legal action for recovery of its dues. The balance outstanding and remains unpaid is subject to monthly interest of 3% calculated from the due date.
- 4) **Rayna Tourism LLC**, is authorized to request the applicant to provide a Deposit or Bank Guarantee in the amount of the credit limit applied for.
- 5) I/We understand that this credit facility is not applicable for any Group bookings.
- 6) I/We authorize **Rayna Tourism LLC** to communicate directly or otherwise with our bankers and trade references listed on the application form to verify our creditworthiness at any time.
- 7) All invoices will be deemed correct unless Rayna tourism LLC receive a written notification of the errors or disputes within 3 days of presentation of the invoice/s.

AUTHORIZED SIGNATORY

COMPANY STAMP

Name:

Designation:

Date

ATTACHMENTS (please attach the following along with the Credit Application)

- 1. Copy of the trade license/commercial registration
- 2. Passport copy of the Local Sponsor and Partner's or Authorized Signature
- 3. Sketch of the exact location of the establishment.

<i>For Rayna Use only</i>		
Action	Signature	Date
Bank Reference Verified by		
Business Reference Verified by		
Approved By		
BDM/Sales/Contracting		
Financial Controller		
Managing Partner		
Agreed Term:		
Credit Limit :		