



ACCOUNT APPLICATION FORM

| TRADING ADDRESS | | |
|-------------------------|------------|-------------|
| Company Name | | |
| Office Number | | |
| Building Name | | |
| Street/Area Name | | |
| | | |
| | | |
| City | Post Code | Country |
| | | |
| Telephone Number | Fax Number | Web Address |
| | | |

| CONTACT DETAILS | | | | |
|--|-------------------|----------------|----------------------|----------------------|
| 1 | First Name | Surname | Mobile Number | Email Address |
| | | | | |
| 2 | First Name | Surname | Mobile Number | Email Address |
| | | | | |
| 3 | First Name | Surname | Mobile Number | Email Address |
| | | | | |
| How did you hear about Atlas? If by referral please name the party. | | | | |
| | | | | |

The following is required to open an account:

1. Proof of equipment insurance if dry hiring equipment.
2. Trading License Copy
3. The first hire must be fully paid by cash, credit card or bank transfer
4. A deposit will usually be required
5. A copy of your company letterhead

Please fax or email a signed copy of this completed form.

Fax: +971 4 390 4372 | Email: info@atlastelevision.com

| CURRENT TRADE REFERENCES | | | |
|--------------------------|----------|---------------|----------|
| Co. Name: | | Co. Name: | |
| Address: | | Address: | |
| | | | |
| | | | |
| Post Code | Phone No | Post Code | Phone No |
| | | | |
| Contact Name: | | Contact Name: | |

This company uses a third party credit reference agency for credit assessment purposes. In submitting a request for this Company to open a credit account, you are hereby providing us with your consent to carry out any credit reference searches that we deem necessary to support your application. These searches will be taken for credit information purposes only, and may be carried out on both your company and its Principals.

The credit reference agency may also keep a record of our enquiry and share that information with other businesses that may also make enquiries about the company and its Principals.

This does not affect your statutory rights.

You are also agreeing to abide by the Terms and Conditions of this Company in the absence of any written authority, strictly from this Company, to the contrary.

Declaration: I wish to open a credit account with Atlas Television FZ LLC.

I am authorised by my company to do so.

The applicant acknowledges having received a copy of the suppliers Terms & Conditions and agrees to the conditions therein.

| | |
|----------------|--|
| FULL NAME | |
| SIGNATURE | |
| POSITION/TITLE | |