

Dear Valued Vendor,

We are proud to announce that Al Thuriah Group has implemented an integrated ERP system across all companies and would like to inform you about the restructured procurement cycle starting from **1<sup>st</sup> of November 2019**. Please be advised of the following guidelines.

#### 1. Listing – Approved Vendors

Any company who wishes to trade and do business with Al Thuriah needs to be listed as our Approved Vendor.

- Vendor will fill out and submit the Listing Form (with the required mandatory documents).
- Once your trade license expires, kindly send a copy of your renewed license to [suppliers@althuriah.com](mailto:suppliers@althuriah.com) to update our records and avoid any payment inconvenience.

#### 2. Purchase Order Process and Delivery

Al Thuriah will raise a Purchase Order detailing line by line the items to be purchased along with their respective quantities, UOM and rates. Below are the required documents to be submitted by the Vendor/Subcontractor upon delivery.

S/N	Delivery Location	Documents to be Submitted	Submit to
1	Materials to Site	Original Delivery Note	Site Contact Person
2	Materials to Main Office	Original Delivery Note	Main Office Recipient / P.O. Contact Person (whoever receives)
3	Services to Site and Main Office	Original Completion Certificate	Contact Person
4	Subcontractor/s	Proforma Invoice	Contact Person

*\*Mandatory fields for all these documents include P.O. Number, Company Name, UOM and Quantity*

Kindly note that any difference(s) between the Purchase Order and the Delivery Note/Completion Certificate will be returned for revision.

#### 3. Invoice

The Vendor is required to submit the original Invoice along with copy of a signed Delivery Note/signed Completion Certificate/signed Payment Certificate to:

Al Thuriah Group  
**Finance & Accounts Department**  
 5<sup>th</sup> Floor, Sahara Tower 1  
 P.O. Box 23335, Al Nahda, Sharjah, U.A.E.

The Invoice must tally with the corresponding Purchase Order and Delivery Note/Completion Certificate and all rules regarding the Federal Tax Authority such as correct name/format, etc. Any difference(s) in the Invoice will be returned for revision.

#### 4. Payment Process

Once the original Invoice has been received and stamped at the Accounts Department, payment date will be calculated as follows:

- Assuming all Invoice details are correct, then the payment date will be calculated based on the number of days from the date of receipt at the Accounts Department.
- If the Invoice is incorrect, it will be returned to the Vendor for revision. The payment date will then be calculated based on the number of days from the date of receipt of the revised Invoice at the Accounts Department.

It is our objective to keep you informed throughout this reorganization process. You may contact us anytime for further clarifications.

We greatly appreciate your compliance and cooperation on this matter.

#### **AL THURIAH GROUP**

Collectively, Al Thuriah Group refers to the following companies:

- Al Thuriah Bldg. Cont. LLC
- Al Thuriah Properties LLC
- Al Thuriah Cleaning Services and Maintenance LLC
- Al Raya Contracting LLC

# LISTING FORM

## **TABLE OF CONTENTS**

### I. Appendix 1 – Listing Form

• General Information . . . . .	3
• Contact Person/s . . . . .	4
• Bank Details . . . . .	4
• VAT Confirmation . . . . .	5
• Attachments . . . . .	5
• Declaration . . . . .	6

Upon completion, kindly submit your listing form along with the mandatory documents to the below address (scanned colored copy to [suppliers@althuriah.com](mailto:suppliers@althuriah.com)).

#### **"Listing Form – Al Thuriah"**

Al Thuriah Group  
P.O. Box 23335  
5th Floor, Sahara Tower 1, Al Nahda, Sharjah, UAE

This listing form applies to all Al Thuriah companies:

Al Thuriah Bldg. Cont. LLC  
Al Thuriah Properties LLC  
Al Thuriah Cleaning Services and Maintenance LLC  
Al Raya Contracting LLC

**This document is renewable.**

**Any changes made to this document must be forwarded to us including any updated licenses and certificates.**

## **Appendix 1- Listing Form**

Supplier	Subcontractor	Service Provider
<b>A. GENERAL INFORMATION</b>		
1. Full Company Name (Legal)		
2. Scope of Services/Products		
3. P.O Box		
4. Office No.		
5. Building Name		
6. Street		
7. City		
8. Country		
9. Telephone No.		
10. Mobile No.		
11. Fax No.		
12. E-mail Address		
13. Website		
14. Date of Establishment		
15. Trade License No.		
16. Trade License Expiry Date		
17. Chamber of Commerce Commercial Registration No.		
18. Chamber of Commerce Commercial Registration Validity Date		
19. Type of Company	Limited Liability Sole Trader	Joint Venture Others
20. Paid-up Capital		

21. Name of Owner(s)	1. _____
	2. _____
	3. _____
22. Key Personnel/Signatories (please provide Power of Attorney, if applicable)	
	1. _____
	2. _____
	3. _____
23. No. of Employees on Visa	_____
24. ISO Certification	Yes No

## B. CONTACT PERSON/S

1. Sales Contact Person	Designation: _____
Personal Title	Mr. Ms. Other _____
Full Name	_____
Telephone No.	_____ Extension: _____
Mobile No.	_____
Fax No.	_____
E-mail Address	_____
2. Operations Contact Person	Designation: _____
Personal Title	Mr. Ms. Other _____
Full Name	_____
Telephone No.	_____ Extension: _____
Mobile No.	_____
Fax No.	_____
E-mail Address	_____

3. Finance Contact Person	Designation: _____
Personal Title	Mr. Ms. Other _____
Full Name	_____
Telephone No.	_____ Extension: _____
Mobile No.	_____
Fax No.	_____
E-mail Address	_____

### C. BANK DETAILS

1. Bank Name	_____
2. Bank Account No.	_____
3. IBAN No.	_____
4. Swift Code	_____
5. Bank Address	_____

### D. VALUE ADDED TAX (VAT)

1. Company Turnover	Above 375,000 AED	Below 375,000 AED
2. Is your company VAT registered?	Yes	No
3. If your company is VAT registered, please provide your VAT identification number.		
Identification Number / (TRN) _____		

### E. ATTACHMENTS

#### A. **Mandatory**

1. Trade License
2. Chamber of Commerce Certificate
3. Power of Attorney (if applicable)

4. Passport Copy (Owner/s and Signatories)

5. VAT Registration Certificate

**B. Optional**

6. Others (please specify) \_\_\_\_\_

**F. DECLARATION**

This is to certify that all information contained in this listing form is complete and accurate.

Name \_\_\_\_\_

Designation \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Stamp